

MINUTES**THE STATE MEDICAL BOARD OF OHIO****March 14, 2012**

Darshan Mahajan, M.D., President, called the meeting to order at 1:00 p.m., in the Administrative Hearing Room, 3rd Floor, the James A. Rhodes State Office Tower, 30 E. Broad St., Columbus, Ohio 43215, with the following members present: Anita Steinbergh, D.O., Vice-President; J. Craig Strafford, M.D., Secretary; Jack C. Amato, M.D., Supervising Member; Lance A. Talmage, M.D.; Marchelle L. Suppan, D.P.M.; Kris Ramprasad, M.D.; Laurie O. Elsass; Mark A. Bechtel, M.D.; and Donald R. Kenney, Sr. The following members did not attend the meeting: Dalsukh Madia, M.D.; and W. Frank Hairston.

Also present were: Richard A. Whitehouse, Executive Director; Kimberly C. Anderson, Assistant Executive Director; Sara Vollmer, Assistant Executive Director; Susan Loe, Assistant Executive Director, Program Management and Operations; William J. Schmidt, Senior Counsel; Sallie J. Debolt, General Counsel; Rebecca J. Marshall, Chief Enforcement Attorney; David P. Katko, Marcie Pastrick, Karen Mortland, Mark Blackmer, Cheryl Pokorny, Daniel Zinsmaster, and Sheldon Safko, Enforcement Attorneys; Kyle Wilcox, Melinda Snyder, Henry Appel, and Heidi Dorn, Assistant Attorneys General; Joan K. Wehrle, Education & Outreach Program Manager; Patricia Davidson, Chief Hearing Examiner; Greg Porter, Gretchen Petrucci, and Danielle Blue, Hearing Examiners; Danielle Bickers, Compliance Supervisor; Annette Jones, Compliance Officer; Nicole Weaver, Chief of Licensure; Barbara Jacobs, Senior Executive Staff Attorney; Jacqueline A. Moore, Public Information Assistant; and Benton Taylor, Executive Assistant to the Executive Director.

MINUTES REVIEW

Dr. Bechtel moved to approve the draft minutes of the February 8, 2012, Board meeting, as written. Dr. Strafford seconded the motion.

Dr. Mahajan stated that he would now entertain discussion in the above matter.

Dr. Steinbergh stated that she has proposed some minor changes in the language of her comments regarding the case of Ramon Fawzi Fakhoury, M.D. Copies of Dr. Steinbergh's proposed changes were provided to the Board members.

Dr. Steinbergh moved to amend the minutes of the February 8, 2012 meeting as discussed. Dr. Strafford seconded the motion. A vote was taken. All members voted aye. The motion to amend carried.

Dr. Steinbergh moved to approve the draft minutes of the February 8, 2012, Board meeting, as amended. Dr. Strafford seconded the motion. A vote was taken. All members voted aye. The motion carried.

EXECUTIVE SESSION

Dr. Steinbergh moved that the Board declare Executive Session to confer with the Attorney General's representatives on matters of pending or imminent court action. Dr. Suppan seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Amato	- aye
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- aye
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion carried.

Pursuant to Section 121.22(G)(3), Ohio Revised Code, the Board went into executive session, with Mr. Whitehouse, Ms. Anderson, Ms. Vollmer, Ms. Loe, Mr. Schmidt, Ms. Debolt, Ms. Marshall, the Enforcement Attorneys, the Assistant Attorneys General, Ms. Wehrle, Ms. Bickers, Ms. Jones, Ms. Weaver, Ms. Jacobs, Ms. Moore, and Mr. Taylor in attendance.

The Board returned to public session.

APPLICANTS FOR LICENSURE

Dr. Steinbergh moved to approve for licensure, contingent upon all requested documents being received and approved in accordance with licensure protocols, the physician applicants listed in Exhibit "A" and handout, the physician assistant applicants listed in Exhibit "B," the limited practitioner applicants listed in Exhibit "C," the acupuncturist applicants listed in Exhibit "D," the anesthesiologist assistant applicants listed in Exhibit "E," and to grant Certificates of Good Standing to the limited branch schools listed in Exhibit "F." Dr. Strafford seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Amato	- aye
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- aye
	Ms. Elsass	- aye

Mr. Kenney - aye
Dr. Ramprasad - aye

The motion carried.

REPORTS AND RECOMMENDATIONS

Dr. Mahajan announced that the Board would now consider the Reports and Recommendations, and the Proposed Findings and Proposed Orders appearing on its agenda.

Dr. Mahajan asked whether each member of the Board had received, read and considered the hearing records; the Findings of Fact, Conclusions of Law, Proposed Orders, and any objections filed in the matters of: Laila Ibrahim Gooma, M.D.; Mark Owen Henson, M.D.; and Amy R. Weidman, M.D. A roll call was taken:

ROLL CALL:

Dr. Strafford	- aye
Dr. Amato	- aye
Dr. Suppan	- aye
Dr. Steinbergh	- aye
Dr. Mahajan	- aye
Dr. Bechtel	- aye
Dr. Talmage	- aye
Ms. Elsass	- aye
Mr. Kenney	- aye
Dr. Ramprasad	- aye

Dr. Mahajan asked whether each member of the Board understands that the disciplinary guidelines do not limit any sanction to be imposed, and that the range of sanctions available in each matter runs from dismissal to permanent revocation. A roll call was taken:

ROLL CALL:

Dr. Strafford	- aye
Dr. Amato	- aye
Dr. Suppan	- aye
Dr. Steinbergh	- aye
Dr. Mahajan	- aye
Dr. Bechtel	- aye
Dr. Talmage	- aye
Ms. Elsass	- aye
Mr. Kenney	- aye
Dr. Ramprasad	- aye

Dr. Mahajan noted that, in accordance with the provision in Section 4731.22(F)(2), Ohio Revised Code, specifying that no member of the Board who supervises the investigation of a case shall participate in further adjudication of the case, the Secretary and Supervising Member must abstain from further

participation in the adjudication of these matters. In the matters before the Board today, Dr. Strafford and Dr. Talmage served as Secretary and Dr. Amato served as Supervising Member.

Dr. Mahajan reminded all parties that no oral motions may be made during these proceedings.

The original Reports and Recommendations shall be maintained in the exhibits section of this Journal.

LAILA IBRAHIM GOMAA, M.D., Case No. 11-CRF-022

Dr. Mahajan directed the Board's attention to the matter of Laila Ibrahim Gomaa, M.D. He advised that objections were filed to Hearing Examiner Davidson's Report and Recommendation and were previously distributed to the Board members.

Dr. Mahajan continued that a request to address the Board has been timely filed on behalf of Dr. Gomaa. Five minutes would be allowed for that address.

Dr. Gomaa was represented by her attorney, Christopher Conard.

Mr. Conard stated that Dr. Gomaa is before the Board today due to one false accusation that turned her family's life upside down, the direct result of the actions of an overzealous prosecutor. Mr. Conard stated that in the wake of an anti-Muslim backlash that contributed to her fear and insecurity over what was happening to her family, Dr. Gomaa made a decision that profoundly altered the course of her professional life. Mr. Conard stated that Dr. Gomaa faced extraordinary circumstances when her son was on trial for his life in 2004. Mr. Conard asked the Board to consider the following factors. First, Dr. Gomaa cooperated with the investigation. Second, there was no financial harm to any party. Third, Dr. Gomaa did not engage in any fraudulent activity. Fourth, Dr. Gomaa is remorseful and she has acknowledged that she had been wrong.

Mr. Conard continued that Dr. Gomaa's decision-making flowed directly from her mental health condition, for which she has sought treatment that continues to this day. Mr. Conard stated that Dr. Gomaa is committed to maintaining her mental health and avoiding her previous mistakes. Mr. Conard requested that the Board impose a stayed suspension with conditions, as set forth in Dr. Gomaa's objections. Mr. Conard noted the Hearing Examiner's statement, "It appears unlikely Dr. Gomaa will commit such offenses in the future."

Dr. Gomaa admitted that she had been wrong in 2004 to have hired Ms. Zagursky to work with her. Dr. Gomaa explained that she had been under a severely stressful situation and her son was facing life in prison. Dr. Gomaa stated that she could see now that she had not been thinking correctly. Dr. Gomaa stated that she is currently getting help from a psychiatrist.

Dr. Gomaa stated that she is a good doctor and she would like to maintain her practice and keep her relationships with her patients. Dr. Gomaa stated that she loves her patients and her patients love her. Dr. Gomaa asked the Board to consider keeping her in practice.

Dr. Mahajan asked if the Assistant Attorney General would like to respond. Mr. Appel stated that he would like to respond.

Mr. Appel stated that Dr. Gomaa is not before the Board today because of an allegation made by a federal prosecutor. Mr. Appel stated that this case arose because Dr. Gomaa made the decision to bring an unlicensed person into Ohio to practice medicine at her facility. Dr. Gomaa has pled guilty to two felonies as a result of this: Complicity to practice medicine without a license, and attempt to practice medicine without a license. Mr. Appel stated that these are very serious charges and the Board should impose a stern discipline.

Mr. Appel stated that at the beginning of Dr. Gomaa's hearing, he had felt that permanent revocation was appropriate in this case. After the hearing, Mr. Appel changed that opinion due to some mitigating circumstances. Mr. Appel agreed with the Hearing Examiner's Proposed Order, which would impose an indefinite suspension of no less than two years. Mr. Appel noted Dr. Gomaa's objection regarding the Proposed Order's stipulation that her license cannot be restored until another matter she has before the Board is resolved. Specifically, Dr. Gomaa objected that this stipulation is a violation of due process. Mr. Appel disagreed with Dr. Gomaa, but opined that it would be appropriate to remove that stipulation and not have the two matters tied together.

Mr. Appel continued that, although Mr. Conard has stated that Dr. Gomaa's son was on trial for his life, he was in fact being charged with securities fraud and insider trading. Mr. Appel stated that the Board should take very stern action against any physician who allows an unlicensed person to practice medicine in their facility. Mr. Appel requested that the Board adopt the Hearing Examiner's Proposed Order, with his previously-proposed minor amendment.

Mr. Conard asked to respond to Mr. Appel's statement. Dr. Mahajan denied Mr. Conard's request.

Ms. Debolt wish to make two corrections for the record. First, Ms. Debolt stated that Dr. Gomaa did not plead guilty, but rather she pled no-contest and the judge found her guilty. Second, Ms. Debolt stated that Dr. Gomaa was found guilty of one felony and one first-degree misdemeanor, not two felonies. Mr. Appel thanked Ms. Debolt for the corrections.

Dr. Steinbergh moved to approve and confirm Ms. Davidson's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Laila Ibrahim Gomaa, M.D. Dr. Ramprasad seconded the motion.

Dr. Mahajan stated that he would now entertain discussion in the above matter.

Dr. Steinbergh noted that two corrections should be made to the Report and Recommendation. First, on page 1, it should read that the Board received Dr. Gomaa's hearing request on April 7, 2011, not April 7, 2010. Second, on page 7, it should read that Dr. Gomaa hired Joyce Zagursky in November 2004, not November 2005.

Dr. Steinbergh stated that a number of things concerned her about this case. Dr. Steinbergh noted that

when Dr. Gomaa relocated from Chicago to Ohio in 1996, she changed her practice from anesthesiology to pain management, medical weight control, and physical medicine and rehabilitation, for which she was not specifically trained.

Dr. Steinbergh stated, and the hearing record shows, that Dr. Gomaa had many opportunities to communicate with the Board and to become familiar with the Board's requirements regarding physician assistants. Dr. Gomaa had employed several physician assistants and had received advice from the Board in this regard.

Dr. Steinbergh continued that in 2004, Dr. Gomaa hired Joyce Zagursky, who was licensed as a physician in Pennsylvania but held no license in Ohio. At that time, Dr. Gomaa was under duress because she was going to New York to help with her son's legal problems. Although Dr. Steinbergh appreciated Dr. Gomaa's duress, she had no doubt that Dr. Gomaa knew what she was doing and knew that it was wrong. Dr. Steinbergh stated that not only did Dr. Gomaa allow the unlicensed practice of medicine, but she also billed for Ms. Zagursky's services under her own name, leading to Medicaid and Bureau of Worker's Compensation (BWC) fraud. Dr. Gomaa was required to pay \$30,376.97 in restitution and was ordered to perform community service, from which she has since been released. Dr. Steinbergh stated that defrauding Medicaid and BWC is essentially defrauding all taxpayers.

Dr. Steinbergh expressed concern about Dr. Gomaa's patient care in that she left her practice in the hands of an unlicensed individual. Dr. Steinbergh also noted that there was a lot of disruption in Dr. Gomaa's office and her staff ultimately left. Dr. Steinbergh stated that Dr. Gomaa had wanted Ms. Zagursky to come into her office as a physician assistant. Dr. Steinbergh observed that Ms. Zagursky was not and cannot be licensed as a physician assistant, as that is a separate profession. Dr. Steinbergh opined that Dr. Gomaa's actions in leaving her patients in the care of an unlicensed person cannot be attributed to her depression. Dr. Steinbergh commented that, as a solo practitioner, she knows what her responsibilities to her practice would be if she had to leave suddenly in a crisis. Dr. Steinbergh stated that if not for Dr. Gomaa's diagnosis of depression, she would feel that permanent revocation is appropriate in this case.

Dr. Steinbergh agreed with the Findings of Fact and Conclusions of Law in the Report and Recommendation. However, Dr. Steinbergh agreed with Mr. Appel that this action should be separate from any other possible action against Dr. Gomaa pending before the Board. Dr. Steinbergh also opined that an examination on the law regarding the practice of medicine in Ohio should be required prior to restoration of Dr. Gomaa's license.

Dr. Steinbergh moved to amend the Proposed Order to remove Paragraph (C)(6), entitled "Effect of Further Board Action During Suspension." Dr. Steinbergh further moved to add the following paragraph under Conditions for Reinstatement or Restoration:

Examination on Law Relating to Practice of Medicine and Surgery: Prior to submitting her application for reinstatement or restoration, Dr. Gomaa shall take and pass an examination to be administered by the Board or its designee related to the content of the Ohio Revised Code and Ohio Administrative Code relating to the practice of medicine and surgery in Ohio. In the event Dr. Gomaa fails this examination, she must wait at least three

months between re-examinations.

Dr. Ramprasad seconded the motion.

Dr. Mahajan stated that he would now entertain discussion in the above matter.

Dr. Mahajan commented that it is not uncommon for anesthesiologists to practice pain management, and that treatment of pain management also involves looking at the patient's lifestyle, including weight and eating habits. Dr. Steinbergh agreed, but stated that when a physician walks away from the specialty in which they have been trained, there are sometimes concerns about the practice itself. Dr. Steinbergh stated that none of her conclusions resulted from that aspect of this case.

A vote was taken on Steinbergh's motion to amend:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to amend carried.

Dr. Steinbergh moved to approve and confirm Ms. Davidson's Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Laila Ibrahim Gomaa, M.D. Dr. Ramprasad seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to approve carried.

MARK OWEN HENSON, M.D., Case No. 11-CRF-085

Dr. Mahajan directed the Board's attention to the matter of Mark Owen Henson, M.D. He advised that no objections were filed. Ms. Blue was the Hearing Examiner.

Dr. Steinbergh moved to approve and confirm Ms. Blue's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Mark Owen Henson, M.D. Dr. Ramprasad seconded the motion.

Dr. Mahajan stated that he would now entertain discussion in the above matter.

Dr. Suppan stated that the issues in this case are as follows:

- Impairment of ability to practice according to acceptable and prevailing standards because of habitual or excessive use or abuse of drugs, alcohol or other substances.
- Violation of conditions and limitations placed by the Board on the certificate to practice.
- Making a false, fraudulent, deceptive, or misleading statement in the solicitation or advertising for patients in relation to the practice of medicine and surgery, or securing or attempting to secure any certificate to practice or certificate of registration issued by the Board.

Dr. Suppan stated that Dr. Henson graduated from the University of Cincinnati College of Medicine in 1997 and was licensed to practice medicine in Ohio in 1999. In 2006, Dr. Henson entered into a Step I Consent Agreement due to impairment. Dr. Suppan noted that Dr. Henson had actually been treated for chemical dependency in the 1980's, indicating that the events that led to Dr. Henson's Consent Agreement constitute a relapse.

Dr. Suppan continued that Dr. Henson entered into a Step II Consent Agreement in 2007, which reinstated his medical license and imposed probationary conditions. A 2008 relapse led to another suspension of Dr. Henson's license, which was reinstated with probationary terms in 2010. In December 2010, Dr. Henson relapsed again. Although Dr. Henson was in compliance with his consent agreement from that time until at least May 2011, he allegedly told a colleague in July 2011 that he had relapsed again. Thus, Dr. Henson has relapsed four times.

Dr. Suppan stated that Dr. Henson cannot abide by the requirements of his consent agreements. Dr. Suppan noted the following quote from Dr. Henson in the Report and Recommendation:

There is a pattern of remorse, getting excited and back into recovery and then various lengths of sobriety, and then something that changes in the psyche where, kind of -- even though I'm going through the motions, I -- mentally things are not going well and I would relapse and repeat the cycle all over again.

Dr. Suppan supported the Proposed Order of revocation, and speculated that Dr. Henson also recognizes that he needs additional time out from practice in order to refocus on his recovery. Dr. Steinbergh

explained to the family practice residents in attendance that the proposed revocation is non-permanent, and Dr. Henson may apply for another license once he has had a chance to heal and document sobriety.

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

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to approve carried.

JUSTIN MATTHEW RODEBAUGH, M.D., Case No. 11-CRF-086

Dr. Mahajan stated that Dr. Rodebaugh has made a motion to continue this matter until April 2012. Dr. Mahajan stated that Dr. Rodebaugh's motion was granted and this matter will be considered at the April 11, 2012 meeting of the Board.

AMY R. WEIDMAN, M.D., Case No. 11-CRF-087

Dr. Mahajan directed the Board's attention to the matter of Amy R. Weidman, M.D. He advised that objections were filed and have been previously distributed to Board members. Ms. Blue was the Hearing Examiner.

Dr. Mahajan continued that a request to address the Board has been filed on behalf of Dr. Weidman. Five minutes would be allowed for that address.

Dr. Weidman was represented by her attorney, John Childs. Mr. Childs introduced himself and yielded the floor to Dr. Weidman.

Dr. Weidman stated that she is deeply sorry for the mistake she made in offering to treat Patient 1. Dr. Weidman stated that she became personally involved with Patient 1 in May 2009. Dr. Weidman stated that when she treated Patient 1 on June 11, 2009, she only had the best intentions and had seen him for altruistic reasons. Dr. Weidman evaluated Patient 1's eligibility for patient assistance for Xolair, an allergic asthma medication, which would have cost \$900.00 per month without Dr. Weidman's intervention. Dr. Weidman stated that she would not offer curbside treatment to Patient 1 and wanted to make sure the treatment was documented. Dr. Weidman stated that because Patient 1 had no insurance, she was happy to provide him with quality medical care.

Dr. Weidman recognized that it was an error in judgment to treat Patient 1 while they were still friends. Dr. Weidman stated that, although her relationship with Patient 1 was in no way predatory, she should have referred Patient 1 to the clinic instead of seeing him in her office. Dr. Weidman stated that the type of high-quality care she provided to Patient 1 was consistent with her history as a doctor. Dr. Weidman stated that she is board certified in internal medicine, has had no record of complaints or problems for 25 years, and is still trusted by her patients. Dr. Weidman stated that after she was forced to leave her last practice, nearly 1,000 patients have offered their support and followed her to her new practice.

Dr. Weidman explained that she only saw Patient 1 one time while she was involved with him. Dr. Weidman stated that she ended her friendship with Patient 1 on August 15, 2009, when he began to show threatening characteristics, and the physician-patient relationship continued only because the hospital risk management department would not permit her to end that relationship until laboratory results were resolved. Dr. Weidman stated that she was able to end the physician-patient relationship in February 2010, and issued Patient 1 a 30-day letter to ensure there would be continuation of his medical care.

Dr. Weidman stated that she in no way caused Patient 1 to lose his job, his residence, or his girlfriend. Dr. Weidman stated that when they became friends, Patient 1 had already decided to break up with his girlfriend. Dr. Weidman further stated that Patient 1 lost his job and residence in June 2010 as a result of his own actions as manager of a farm four months after the end of the physician-patient relationship, and was unrelated to their personal friendship.

Dr. Weidman opined that the vacation she went on with Jeanette Cox, her office manager at that time, should not have any bearing on the Board's decision. Dr. Weidman stated that she has been friends with Ms. Cox for a long time. Dr. Weidman stated that the picture Ms. Cox took during the vacation is not indicative of Dr. Weidman's understanding of professional boundaries and Dr. Weidman was not happy with the intended prank.

Dr. Weidman stated that she has learned her lesson and she understands that she is not without fault. However, Dr. Weidman opined that the recommended minimum 180-day suspension of her medical license is too harsh under the circumstances. Dr. Weidman stated that that recommendation is based on placing too much credibility on Patient 1's testimony and his emotional response, as well as her own seeming lack of remorse at the hearing. Dr. Weidman stated that, in fact, she did openly express remorse at the hearing. Dr. Weidman stated that she is sorry for what has happened. Dr. Weidman stated that she never meant to hurt Patient 1 and was sorry if she did. Dr. Weidman stated that she had only meant to offer Patient 1 quality medical care that he otherwise would not have received.

Dr. Weidman opined that it is not fair for the Hearing Examiner to base her recommendation on the emotions displayed by Patient 1 at the hearing, or that the Hearing Examiner so easily credited Patient 1's words over Dr. Weidman's, especially given Patient 1's background. Dr. Weidman stated that Patient 1 was not honest at the hearing. Dr. Weidman stated that she tried hard at the hearing to maintain her professional bearing and to keep her emotions in check, but it was very hard for her to say nothing when her integrity was questioned.

Dr. Weidman asked the Board to consider reducing the recommended discipline. Dr. Weidman stated that Patient 1 has moved on and, according to his testimony, he is gainfully employed and has received continuation of care for his medical problems. Dr. Weidman stated that a minimum 180-day suspension is not warranted and will cause profound hardship on her current patients who depend on her as a solo practitioner. Dr. Weidman asked that she be permitted to continue caring for her patients who have followed her to her new location. Dr. Weidman also noted that she is helping care for the patients of a partially disabled physician. Dr. Weidman stated that she will take any Continuing Medical Education courses that the Board deems appropriate and will follow any rules necessary in order to continue providing care to her patients. Dr. Weidman stated that she was raised by her parents to always help people at a disadvantage, and that had been her goal. Dr. Weidman hoped that the Board exists not only to protect patients, but also to protect physicians.

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

Ms. Snyder stated that it was helpful to see Dr. Weidman show emotion today, because at the hearing Dr. Weidman was unapologetic for her relationship with Patient 1. Ms. Snyder stated that Dr. Weidman believes that this situation is mitigated and made less egregious by the fact that the sexual relationship predates the physician-patient relationship. However, Ms. Snyder stated that the problems inherent in this type of relationship are the same regardless of which relationship came first. Ms. Snyder stated that what the Board should have heard from Dr. Weidman today is that she understands that as a physician, she has a lot of power over her patients and that she risks losing her objectivity when she treats a patient with whom she is in a sexual relationship.

Ms. Snyder noted that at one point, Dr. Weidman referred Patient 1 to a specialist because he was unable to achieve an erection. However, Dr. Weidman never referred Patient 1 to a specialist when she thought he had a personality disorder. Ms. Snyder stated that some may speculate that Dr. Weidman did not refer Patient 1 because she feared he would talk about their relationship with a mental health specialist. Ms. Snyder stated that these are the kind of questions that arise when a physician treats a sexual partner.

Ms. Snyder opined that Dr. Weidman took advantage of Patient 1. Ms. Snyder noted that Patient 1 had no money, no insurance, and worked as a farmhand at a barn. Dr. Weidman testified that she knew Patient 1 was emotionally vulnerable. Dr. Weidman gave Patient 1 free medical care and a very expensive medication that she signed him up for. Today, Dr. Weidman stated that her hospital risk manager would not allow her to release Patient 1 for a time. Ms. Snyder felt that this is very important because the risk manager was not aware of Dr. Weidman's personal relationship with Patient 1. Ms. Snyder also felt it was significant that, if not for her risk manager, Dr. Weidman would have ended the physician-patient relationship as soon as the personal relationship was over.

Ms. Snyder stated that there is no dispute that there was sexual contact in his case. The dispute regards the extent of the sexual contact and the length of the relationship. Ms. Snyder stated that the Hearing Examiner believed Patient 1's testimony, and she does as well. Ms. Snyder stated that Dr. Weidman's own testimony was even more damaging, because she clearly did not understand the appropriate professional boundaries that a physician must maintain. Ms. Snyder questioned why Dr. Weidman's office manager

took naked pictures of her and sent them to Patient 1, especially in light of the office manager's testimony that she was not aware of their relationship. That Dr. Weidman considers that incident to be a prank or a joke demonstrates her lack of understanding of professional boundaries.

Ms. Snyder stated that this case is unlike the case of Dr. Zacharias, which the Board ruled on in January 2012. Ms. Snyder stated that Dr. Zacharias had been repentant throughout the process and had already taken a course in professional boundaries.

Ms. Snyder stated that the Proposed Order is below the minimum disciplinary guidelines and opined that that is appropriate in this case. Ms. Snyder stated that she supports the Report and Recommendation.

Dr. Steinbergh to approve and confirm Ms. Blue's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Amy R. Weidman, M.D. Suppan seconded the motion.

Dr. Mahajan stated that he would now entertain discussion in the above matter.

Dr. Ramprasad stated that Dr. Weidman provided care to Patient 1 for a three-month period, during which time there was sexual contact. Dr. Weidman had known Patient 1 prior to the physician-patient relationship. When Patient 1 became Dr. Weidman's patient, she signed him up for a program which provided him with the medication Xolair for free.

Dr. Ramprasad stated that, even today, Dr. Weidman said nothing about the boundary between physician and patient. Dr. Ramprasad stated that patients trust that physicians will do their best for them, not take advantage of them. Dr. Ramprasad stated that when a physician treats a sexual partner, their judgment is clouded. The Medical Board's rules against such relationships are designed to protect patients.

Dr. Ramprasad took exception to Dr. Weidman's statement that Patient 1 benefitted from the situation because he received free medication and low-cost care. Dr. Ramprasad stated that Patient 1 felt abused. Dr. Ramprasad stated that in cases such as this, the Board considers the degree of emotional dependence the former patient has on the licensee, duration of the physician-patient relationship, the nature of medical services provided, and other factors. Dr. Ramprasad stated that this behavior is considered to be a departure from the minimal standards of care.

Dr. Ramprasad granted that Dr. Weidman had good intentions, as do many physicians who seek to help someone who does not have insurance. Dr. Ramprasad noted that the Proposed Order is below Board's disciplinary guidelines for this behavior. Dr. Ramprasad stated that he agrees with the Proposed Order of a minimum 180-day suspension, followed by probationary terms.

Dr. Steinbergh agreed with Dr. Ramprasad and expressed uncertainty that Dr. Weidman truly understands how unprofessional this situation was. Dr. Steinbergh was unable to imagine how an office manager has an opportunity to take a naked picture of a physician and send it to a patient. Dr. Steinbergh stated that it is inappropriate for a physician to have a sexual relationship with a patient, regardless of when that relationship starts or ends.

Ms. Elsass opined that Dr. Weidman's actions were abusive towards Patient 1. Ms. Elsass stated that Dr. Weidman turned her office into a quasi-bedroom and that this will affect Patient 1. Ms. Elsass admonished Dr. Weidman that this is not a humorous situation.

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

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to approve carried.

PROPOSED FINDINGS AND PROPOSED ORDERS

JORDON JAMES SCURALLI, L.M.T., Case No. 11-CRF-111

Dr. Mahajan directed the Board's attention to the matter of Jordon James Scuralli, L.M.T. He advised that the Board issued a Notice of Opportunity for Hearing to Mr. Scuralli, and documentation of service was received. There was no request for hearing filed, and more than 30 days have elapsed since the mailing of the Notice. This matter was reviewed by Hearing Examiner Blue, who prepared Proposed Findings and Proposed Order, and it is now before the Board for final disposition.

Dr. Steinbergh moved to find that the allegations as set forth in the November 9, 2011 Notice in the matter of Jordon James Scuralli, L.M.T., have been proven to be true by a preponderance of the evidence and to adopt Ms. Blue's Proposed Findings and Proposed Order. Dr. Suppan seconded the motion.

Dr. Mahajan stated that he would now entertain discussion in the above matter.

Dr. Steinbergh stated that Mr. Scuralli failed to comply with the terms of his May 12, 2010, Board Order. Dr. Steinbergh stated that she agrees with the Proposed Order of revocation. Dr. Steinbergh commented that Mr. Scuralli may reapply for his massage therapy license if he is able to document sobriety.

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

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain

Dr. Suppan	- aye
Dr. Steinbergh	- aye
Dr. Mahajan	- aye
Dr. Bechtel	- aye
Dr. Talmage	- abstain
Ms. Elsass	- aye
Mr. Kenney	- aye
Dr. Ramprasad	- aye

The motion to approve carried.

FINDINGS, ORDERS, AND JOURNAL ENTRIES

Dr. Mahajan advised that, in the following matters, the Board issued a Notice of Opportunity for Hearing, and documentation of service was received for each. There were no requests for hearing filed, and more than 30 days have elapsed since the mailing of the Notices. The matters are therefore before the Board for final disposition. Dr. Mahajan stated that these matters are not disciplinary in nature, and therefore all Board members may vote.

ROBERT TYSON GROSSMANN, M.D., Case No. 12-CRF-007

Dr. Suppan moved to find that the allegations as set forth in the January 30, 2012 Notice in the matter of Robert Tyson Grossmann, M.D., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, approving Dr. Grossmann's application for restoration of his certificate to practice medicine and surgery, provided he take and pass the Special Purpose Examination (SPEX) or specialty board recertification examination within one year of January 30, 2012. Dr. Amato seconded the motion.

Dr. Mahajan stated that he will now entertain discussion in the above matter.

Dr. Suppan noted that Dr. Grossman has been out of the practice of medicine for more than two years. Dr. Suppan stated that the Order will approve Dr. Grossmann's application for restoration of his medical license, pending successful completion of the SPEX or specialty board certification.

A vote was taken on Dr. Suppan's motion to approve:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Amato	- aye
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- aye
	Ms. Elsass	- aye

Mr. Kenney - aye
Dr. Ramprasad - aye

The motion to approve carried.

MARK THOMAS JOHNSON, M.D., Case No. 12-CRF-006

Dr. Suppan moved to find that the allegations as set forth in the January 30, 2012 Notice in the matter of Mark Thomas Johnson, M.D., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, approving Dr. Johnson's application for restoration of his certificate to practice medicine and surgery, provided he take and pass the Special Purpose Examination (SPEX) or specialty board recertification examination within one year of January 30, 2012. Dr. Steinbergh seconded the motion.

Dr. Mahajan stated that he will now entertain discussion in the above matter.

Ms. Elsass stated that Dr. Johnson's medical license lapsed on October 1, 2008, and he has not been engaged in the practice of medicine for more than two years. Ms. Elsass stated that the Order will approve Dr. Johnson's application for restoration, pending successful completion of the SPEX or specialty board certification.

A vote was taken on Dr. Suppan's motion to approve:

ROLL CALL:

Dr. Strafford	- aye
Dr. Amato	- aye
Dr. Suppan	- aye
Dr. Steinbergh	- aye
Dr. Mahajan	- aye
Dr. Bechtel	- aye
Dr. Talmage	- aye
Ms. Elsass	- aye
Mr. Kenney	- aye
Dr. Ramprasad	- aye

The motion to approve carried.

PAIKKY LEE, M.D., Case No. 12-CRF-113

Dr. Steinbergh moved to find that the allegations as set forth in the January 30, 2012 Notice in the matter of Paikky Lee, M.D., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, approving Dr. Lee's application for restoration of his certificate to practice medicine and surgery, provided he take and pass the Special Purpose Examination (SPEX) or specialty board recertification examination within one year of January 30, 2012, and successfully complete retraining as specified in the Proposed Order. Dr.

Suppan seconded the motion.

Dr. Mahajan stated that he will now entertain discussion in the above matter.

Dr. Ramprasad stated that Dr. Lee applied for restoration of his license to practice medicine and surgery in Ohio. Dr. Ramprasad stated that the Order will approve Dr. Lee's application, pending successful completion the SPEX or specialty board certification, as well as successful completion of three months of retraining. The Order specifies that Dr. Lee's retraining must be under the supervision of Anthony Cionni, M.D., the Director of Anesthesia at Good Samaritan Hospital. Further, Dr. Lee's retraining must address the technical, clinical, and cognitive aspects of the practice of anesthesiology and must include the passage of an examination. Successful retraining shall be evidenced by a favorable written report from Dr. Cionni.

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

ROLL CALL:	Dr. Strafford	- aye
	Dr. Amato	- aye
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- aye
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to approve carried.

KAMAL BHAILAL PATEL, M.D., Case No. 12-CRF-005

Dr. Steinbergh moved to find that the allegations as set forth in the January 30, 2012 Notice in the matter of Kamal Bhailal Patel, M.D., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, denying Dr. Patel's application for a license to practice medicine and surgery. Dr. Suppan seconded the motion.

Dr. Mahajan stated that he will now entertain discussion in the above matter.

Dr. Ramprasad stated that the Order is to deny Dr. Patel's application for licensure because she has not completed at least 24 months of graduate medical education through the second-year level or its equivalent.

A vote was taken on Dr. Steinbergh's motion to deny:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Amato	- aye

Dr. Suppan	- aye
Dr. Steinbergh	- aye
Dr. Mahajan	- aye
Dr. Bechtel	- aye
Dr. Talmage	- aye
Ms. Elsass	- aye
Mr. Kenney	- aye
Dr. Ramprasad	- aye

The motion to deny carried.

CLEVELAND INSTITUTE OF MEDICAL MASSAGE, Case No. 11-CRF-121

Dr. Talmage moved to find that the allegations as set forth in the December 21, 2011 Notice in the matter of the Cleveland Institute of Medical Massage have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, placing the Certificate of Good Standing of the Cleveland Institute of Medical Massage on probation for at least 12 months from the effective date, and other conditions specified in the Proposed Order. Dr. Steinbergh seconded the motion.

Dr. Mahajan stated that he will now entertain discussion in the above matter.

Dr. Talmage stated that the Cleveland Institute for Medical Massage has failed to have at least 75% of its students pass each of the three previous massage therapy examinations. Dr. Talmage stated that this either indicates a failure to teach or a failure to select students who can be successful. Dr. Talmage stated that the Order will, in accordance with the Board's rule, place the Cleveland Institute's Certificate of Good Standing on probation. If the Cleveland Institute is unable to bring itself up to standards within 12 months, it may be subject to further sanction and loss of accreditation.

Dr. Talmage noted that the Cleveland Institute's March 10 deadline for reapplication for their Certificate of Good Standing has now passed, and he is unaware if it has reapplied.

A vote was taken on Dr. Talmage's motion:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Amato	- aye
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- aye
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion carried.

The Board took a break at 2:20 p.m. and returned at 2:50 p.m. Dr. Amato was not present when the meeting resumed.

CITATIONS, PROPOSED DENIALS, DISMISSALS, ORDERS OF SUMMARY SUSPENSION & NOTICES OF IMMEDIATE SUSPENSION

SAMUEL J. CHRISTIAN, M.D. – CITATION LETTER

At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

Dr. Steinbergh moved to send the Citation Letter to Dr. Christian. Dr. Suppan seconded the motion.

A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to send carried.

FRANKLIN DONALD DEMINT, D.O. - CITATION LETTER

At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

Dr. Steinbergh moved to send the Citation Letter to Dr. Demint. Ms. Elsass seconded the motion. A

vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye

Mr. Kenney - aye
Dr. Ramprasad - aye

The motion to send carried.

TERRY ALAN DRAGASH, D.O. - CITATION LETTER

At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

Ms. Elsass moved to send the Citation Letter to Dr. Dragash. Dr. Suppan seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford	- abstain
Dr. Suppan	- aye
Dr. Steinbergh	- aye
Dr. Mahajan	- abstain
Dr. Bechtel	- aye
Dr. Talmage	- abstain
Ms. Elsass	- aye
Mr. Kenney	- aye
Dr. Ramprasad	- aye

The motion to send carried.

YEMI M. FASAKIN, M.D. - CITATION LETTER

At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

Dr. Steinbergh moved to send the Citation Letter to Dr. Fasakin. Ms. Elsass seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford	- abstain
Dr. Suppan	- aye
Dr. Steinbergh	- aye
Dr. Mahajan	- aye
Dr. Bechtel	- aye
Dr. Talmage	- abstain
Ms. Elsass	- aye
Mr. Kenney	- aye
Dr. Ramprasad	- aye

The motion to send carried.

DEBORAH A. JORGENSEN, P.A. – NOTICE OF SUMMARY SUSPENSION AND OPPORTUNITY FOR HEARING

At this time the Board read and considered the proposed Notice of Summary Suspension and Opportunity for Hearing in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

Dr. Suppan moved to enter an Order of Summary Suspension in the matter of Deborah A. Jorgensen, P.A., in accordance with Section 4730.25(G), Ohio Revised Code, and to issue the Notice of Summary Suspension and Opportunity for Hearing. Dr. Steinbergh seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- aye
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion carried.

SHABAN A. E. MAHMOUD, M.D. - CITATION LETTER

At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

Dr. Steinbergh moved to send the Citation Letter to Dr. Mahmoud. Dr. Bechtel seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to send carried.

CHRISTINA E. NOGA, M.T. - CITATION LETTER

At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

Dr. Steinbergh moved to send the Citation Letter to Ms. Noga. Dr. Suppan seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to send carried.

MICHAEL JAMES OSER - CITATION LETTER

At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

Dr. Steinbergh moved to send the Citation Letter to Mr. Oser. Dr. Bechtel seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to send carried.

VENKATARAMANAI AH PULIVARTHI, M.D. - CITATION LETTER

At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

Dr. Steinbergh moved to send the Citation Letter to Dr. Pulivarthi. Dr. Suppan seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to send carried.

CHARMAINE NICOLE REESE - CITATION LETTER

At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

Dr. Steinbergh moved to send the Citation Letter to Ms. Reese. Dr. Bechtel seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to send carried.

Dr. Amato returned to the meeting at this time.

FRANCES ELIZABETH WEBB-SMITH, M.D. - CITATION LETTER

At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

Ms. Elsass moved to send the Citation Letter to Dr. Webb-Smith. Dr. Steinbergh seconded the

motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to send carried.

Dr. Steinbergh moved to table this topic until Thursday, March 15, for possible additional citations. Dr. Suppan seconded the motion. All members voted aye. The motion carried.

RATIFICATION OF SETTLEMENT AGREEMENTS

ROBERT K. FINLEY, III, M.D. – CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Consent Agreement with Dr. Finley. Dr. Bechtel seconded the motion.

Dr. Mahajan stated that he would now entertain discussion in the above matter.

Dr. Steinbergh noted that this physician took steps to remediate himself upon receiving the Board's Notice of Opportunity for Hearing. Dr. Steinbergh stated that this was a very favorable action on the physician's part.

A vote was taken on Dr. Steinbergh's motion to ratify:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to ratify carried.

SIVA RAO MURTHY, M.D. – STEP I CONSENT AGREEMENT

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

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to ratify carried.

ANASTASIA CHRISTOPHER – PERMANENT WITHDRAWAL

Dr. Steinbergh moved to ratify the Proposed Permanent Withdrawal with Ms. Christopher. Ms. Elsass seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to ratify carried.

JOSEPH FRANCIS LYDON, JR., M.D. – STEP II CONSENT AGREEMENT

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

ROLL CALL:	Dr. Strafford	- abstain
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Dr. Amato	- abstain
Dr. Suppan	- aye
Dr. Steinbergh	- aye
Dr. Mahajan	- aye
Dr. Bechtel	- aye
Dr. Talmage	- abstain
Ms. Elsass	- aye
Mr. Kenney	- aye
Dr. Ramprasad	- aye

The motion to ratify carried.

MICHAEL CHRISTOPHER MACATOL, M.D. – STEP I CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Step I Consent Agreement with Dr. Macatol. Dr. Bechtel seconded the motion.

Dr. Mahajan stated that he will now entertain discussion in the above matter.

Dr. Steinbergh noted that this physician stopped seeing patients in June 2011. Dr. Steinbergh stated that this physician has not been compliant and hoped that he begins to take this situation seriously. Dr. Steinbergh stated that, although she has concerns about this physician, she will support the proposed Consent Agreement.

A vote was taken on Dr. Steinbergh's motion to ratify:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to ratify carried.

R.E.B., M.D. – CONSENT AGREEMENT

Dr. Steinbergh noted that this case involves a sexual relationship between the physician and a patient. Mr. Safko stated that the sexual relationship preceded the physician-patient relationship.

Responding to Dr. Steinbergh's concerns, Ms. Marshall stated that the concern about a physician-patient sexual relationship is that the physician has more power than the patient, and therefore the patient cannot truly consent to the relationship. In addition, the relationship can impact the physician's professional judgment. Ms. Marshall stated that the situation with R.E.B., M.D., is somewhat unique in that the patient was also an attorney who had the physician's practice group as a client. Ms. Marshall explained that attorneys also have a professional code of responsibility and are not allowed to have a sexual relationship with a client for reasons of imbalance of power and clouding of professional judgment, just as in the case of a physician and a patient. Ms. Marshall stated that the unusually light discipline in this proposed Consent Agreement is a recognition that each participant of the relationship was equally responsible and was in a position to exercise power over the other.

Dr. Ramprasad expressed difficulty accepting the reasoning that led to this settlement. Dr. Steinbergh agreed. Dr. Steinbergh stated that, although she appreciates the work that goes into the negotiation of consent agreements, she intends to vote against this proposed Consent Agreement.

Dr. Ramprasad asked why Board members are not allowed more information when deciding to ratify a consent agreement. Ms. Marshall explained that much of the information in such cases are investigatory and, by law, confidential. Mr. Whitehouse stated that such information may require Board members to abstain from voting if a violation results in the case returning to the Board. Dr. Amato agreed and stated that, according to the Board's legal counsel, the information given to the Secretary and Supervising Member may prejudice the voting members of the Board, and it is for this reason that the Secretary and Supervising Member abstain from voting in disciplinary matters.

Ms. Elsass asked what will occur in the matter of R.E.B., M.D., if the proposed Consent Agreement is not approved. Ms. Marshall explained that if the proposed Consent Agreement is not approved, then the matter will go back to the enforcement attorney and will be revisited by the Secretary and Supervising Member. The Secretary and Supervising Member will decide if the case is viable enough to support a citation or negotiate another consent agreement. The Secretary and Supervising Member may also choose to take a non-disciplinary route, such as sending a cautionary letter, referring the physician to an educational course, or simply closing the case. Ms. Marshall stated that if the Secretary and Supervising Member choose a non-disciplinary option, the other Board members will not become aware of the outcome.

Dr. Mahajan agreed that what R.E.B., M.D., did was wrong, but that he and his patient/attorney were equals and that he continued to treat her after the end of their relationship. Dr. Mahajan stated that he supports the proposed Consent Agreement.

Dr. Suppan stated that she does not agree with the concept that the physician-patient relationship and the attorney-client relationship cancel each other out. Dr. Suppan opined that each case should be considered on its own merits and that a situation involving two professionals should be held to a higher standard rather than a lower one.

Ms. Debolt asked that a motion be made on this matter before further discussion ensues.

Dr. Steinbergh moved to ratify the Proposed Consent Agreement with R.E.B., M.D. Ms. Elsass seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- nay
	Dr. Steinbergh	- nay
	Dr. Mahajan	- aye
	Dr. Bechtel	- nay
	Dr. Talmage	- abstain
	Ms. Elsass	- nay
	Mr. Kenney	- nay
	Dr. Ramprasad	- nay

The motion to ratify did not carry.

MAHENDRA KUMAR MAHAJAN, M.D. – CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Consent Agreement with Dr. Mahendra Mahajan. Dr. Bechtel seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion to ratify carried.

Dr. Steinbergh moved to table this topic until Thursday, March 15, for possible additional settlement agreements. Dr. Bechtel seconded the motion. All members voted aye. The motion carried.

REINSTATEMENT REQUESTS

JOSH U. HILL, P.A.

Dr. Steinbergh stated that Mr. Hill has met the requirements for reinstatement and he is in compliance with the Board's Order of January 12, 2011.

Dr. Steinbergh moved that the request for the reinstatement of the license of Josh U. Hill, P.A., be approved, subject to the probationary terms and conditions as outlined in the January 12, 2011 Board Order for a minimum of four years. Dr. Bechtel seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion carried.

DOMINIC J. MAGA, D.O.

Dr. Steinbergh stated that the Board issued an Order on March 9, 2011, due to Dr. Maga having been found guilty of five misdemeanor counts of willful failure to file income tax returns, which involved misdemeanors of moral turpitude. Dr. Maga has met the stipulations of the Order and has submitted the required documentation of his ability to resume practice.

Dr. Steinbergh moved that the request for the reinstatement of the license of Dominic J. Maga, D.O., be approved, subject to the probationary terms and conditions as outlined in the March 9, 2011 Board Order for a minimum of two years. Dr. Suppan seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- abstain
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion carried.

PROBATIONARY APPEARANCES

PHILIP L. CREPS, D.O.

Dr. Creps was making his final appearance before the Board pursuant to his request for release from the terms of the Board's Order of March 14, 2007. Ms. Bickers reviewed Dr. Creps' history with the Board.

Dr. Steinbergh asked if Dr. Creps continues to practice psychiatry in Michigan. Dr. Creps replied affirmatively.

Dr. Steinbergh asked Dr. Creps to describe his professional and personal ethics course and how it has affected him. Dr. Creps stated that he took the ethics course at Case Western Reserve University and found it to be very helpful. Dr. Creps continued that he has learned to always tell the truth, the whole truth, and nothing but the truth, particularly on applications. Dr. Creps stated that it is a relief to have the Board aware of everything and that absence of fear occurs in the presence of truth. Dr. Creps also found it beneficial to see others who are in situations similar to his.

Dr. Steinbergh asked if everything else is going well in Dr. Creps' life. Dr. Creps replied that everything is going well.

Dr. Steinbergh moved to release Dr. Creps from the terms of the Board's Order of March 14, 2007. Dr. Suppan seconded the motion. All members voted aye. The motion carried.

Dr. Steinbergh asked if Dr. Creps had any other comments for the Board. Dr. Creps stated that this situation has caused him to seek excellence. Dr. Creps stated that he has recertified in both adult psychiatry and child & adolescent psychiatry, as well had becoming board certified in addiction medicine through the American Board of Addiction Medicine. Dr. Creps stated that he has also been inducted as a fellow of the American Osteopathic College of Neurologists and Psychiatrists. Dr. Creps stated that he has not taken the Board's action lightly, but has instead set the goal of striving towards excellence in his professional career.

RICHARD GRAHAM DAY, M.D.

Dr. Day was making his final appearance before the Board pursuant to his request for release from the terms of his March 14, 2007 Consent Agreement. Ms. Bickers reviewed Dr. Day's history with the Board.

Dr. Steinbergh stated that Dr. Day has worked a long time to reach the point where he can be released from his Consent Agreement. Dr. Steinbergh asked Dr. Day to describe his recovery, his current practice, and his personal support.

Dr. Day stated that today he is happier and healthier than he has ever been in his life. Dr. Day stated that when he signed his Step I Consent Agreement in 2005, he was so devastated that he considered surrendering his medical license. Dr. Day expressed gratitude to those who convinced him that he needed help and treatment. Dr. Day stated that for the last 2,437 days, he has worked very hard on his recovery, and he has been told by friends, patients, and administrators that his recovery has made him a better physician and a better person. Dr. Day was extremely grateful to the Board for giving him a second chance. Dr. Day stated that he will continue to work very hard on his recovery and do what is necessary to

maintain his sobriety.

Dr. Day stated that he currently has a private practice in Cambridge, Ohio, and has admitting privileges to the local hospital. In addition, Dr. Day is the health commissioner and medical director for the county health department and its clinic. Dr. Day stated that both his personal practice and his health department practice are very rewarding and successful, which would not be possible without his sobriety. Dr. Day stated that he has a wonderful support system, including his wife, who is present with him today.

Dr. Day expressed appreciation to the late Board member Mr. Albert, who had been very helpful to him, as well as Ms. Bickers, who had given him invaluable guidance and assistance.

Dr. Steinbergh moved to release Dr. Day from the terms of his March 14, 2007 Consent Agreement. Dr. Suppan seconded the motion. All members voted aye. The motion carried.

ADAM PATRICK HALL, D.O.

Dr. Hall was making his final appearance before the Board pursuant to his request for release from the terms of his March 14, 2007 Consent Agreement. Ms. Bickers reviewed Dr. Hall's history with the Board.

Dr. Steinbergh asked if Dr. Hall is practicing family practice in the Powell, Ohio area. Dr. Hall replied that that is the case.

Dr. Steinbergh asked Dr. Hall to describe his recovery and his plans for the future. Dr. Hall responded that since being placed on suspension and probation for impairment, he has worked hard on his recovery by attending meetings, working with his sponsor, and putting his sobriety first. Dr. Hall stated that he has a general practice, including work in urgent care centers, because he is not boarded and did not finish a residency. Dr. Hall stated that he has obtained Suboxone-prescribing authority and his helping patients in his former situation to recover their lives. Regarding future plans, Dr. Hall stated that he will seek certification by the Board of Addiction Medicine.

Dr. Steinbergh stated that Dr. Hall will have to be particularly vigilant when working in the field of addiction medicine. Dr. Hall agreed and stated that he will make sure his program is as vigilant as possible. Dr. Steinbergh asked how long it will take Dr. Hall to obtain addiction medicine certification. Dr. Hall replied that he hoped to be certified by the end of this year.

Dr. Ramprasad noted that Dr. Hall had the diagnoses of major depression and bipolar disorder with mixed anxiety, yet is not on any medications for these conditions. Dr. Hall stated that his psychiatrist released him in 2010 because he felt Dr. Hall's mood disorders were stable. Dr. Hall stated that he checks in with his psychiatrist periodically, in addition to seeing a private physician. Dr. Mahajan asked if Dr. Hall is working with a mental health professional. Dr. Hall answered that he does work with a mental health professional to make sure he is stable.

Dr. Steinbergh moved to release Dr. Hall from the terms of his March 14, 2007 Consent Agreement. Dr. Bechtel seconded the motion. All members voted aye. The motion carried.

RONALD CARL HETMAN, D.P.M.

Dr. Hetman was making his final appearance before the Board pursuant to his request for release from the terms of his March 14, 2007 Consent Agreement. Ms. Bickers reviewed Dr. Hetman's history with the Board.

Dr. Steinbergh asked how Dr. Hetman is. Dr. Hetman replied that he is fine.

Dr. Steinbergh asked if Dr. Hetman would like to address the family practice residents in attendance regarding their responsibilities to licensure and the prevention of mistakes. Dr. Hetman replied that he had no comments for the residents at this time, but opined that every medical school should have a course on substance abuse and alcoholism. Dr. Hetman felt that such a course would be very beneficial to both physicians and the public.

Dr. Steinbergh asked Dr. Hetman to describe his recovery and what he plans to do in terms of personal vigilance. Dr. Hetman responded that he has been sober since February 2007, is an avid runner, plays games similar to golf, and restores mustangs with a friend. Dr. Hetman also stated that he has 13 grandchildren and is very busy helping with their activities.

Dr. Steinbergh asked if Dr. Hetman intends to continue meeting with recovery groups. Dr. Hetman answered that he has no plans to continue meetings. Dr. Steinbergh noted that Dr. Hetman will retire soon. Dr. Hetman stated that he will retire at the end of this year.

Dr. Suppan stated that she and Dr. Hetman have been friends for years. Dr. Suppan stated that she has recused herself in previous matters concerning Dr. Hetman, but wanted to take this opportunity to congratulate him.

Dr. Suppan moved to release Dr. Hetman from the terms of his March 14, 2007 Consent Agreement. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

KYLE ELLIOT HOOGENDOORN, D.P.M.

Dr. Hoogendoorn was making his final appearance before the Board pursuant to his request for release from the terms of his March 12, 2009 Consent Agreement. Ms. Bickers reviewed Dr. Hoogendoorn's history with the Board.

Dr. Suppan asked how things are going for Dr. Hoogendoorn. Dr. Hoogendoorn replied that he is currently practicing full-time with the main hospital system in Fort Worth, Texas.

Dr. Suppan asked if Dr. Hoogendoorn is currently involved in pain management. Dr. Hoogendoorn responded that he is no longer involved in pain management, but has a mixed general and surgical podiatric practice. Dr. Suppan asked if Dr. Hoogendoorn has a good support system in Texas. Dr. Hoogendoorn answered that he has a good support system and his company does routine random chart

audits. Dr. Hoogendoorn stated that he has been audited twice with no problems.

Dr. Suppan asked if Dr. Hoogendoorn has any questions for the Board. Dr. Hoogendoorn replied that he had no questions, but advised the family practice residents in attendance to remain ever vigilant in their documentation and the changing requirements of charting.

Dr. Suppan moved to release Dr. Hoogendoorn from the terms of his March 12, 2009 Consent Agreement. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

SCOTT BRIAN LINDSAY, D.P.M.

Dr. Lindsay was making his final appearance before the Board pursuant to his request for release from the terms of the Board's Order of April 8, 2009. Ms. Bickers reviewed Dr. Lindsay's history with the Board.

Dr. Suppan asked how Dr. Lindsay is. Dr. Lindsay replied that he is good.

Dr. Suppan asked what kind of impact Dr. Lindsay's professional ethics course had on him. Dr. Lindsay answered that he found the course informative and comprehensive. Dr. Lindsay stated that although his issue had involved health care fraud, the course covered all ethical situations that a physician may encounter. Dr. Lindsay stated that the overriding theme of the course was asymmetric responsibility. Dr. Lindsay stated that his practice now has compliance consultants who perform audits.

Dr. Suppan asked what type of work Dr. Lindsay is currently engaged in. Dr. Lindsay replied that he is seeing patients and doing volunteer work. Dr. Suppan asked if Dr. Lindsay's practice is primarily outpatient. Dr. Lindsay answered that his practice is primarily outpatient. Dr. Suppan asked if Dr. Lindsay is able to participate with Medicaid or Medicare. Dr. Lindsay responded that he cannot currently participate, but will be able to in about one-and-a-half years.

Dr. Suppan moved to accept the compliance staff's report of conference on February 7, 2012. Dr. Suppan further moved to release Dr. Lindsay from the terms of the Board's Order of April 8, 2009. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

ZUHAYR T. MADHUN, M.D.

Dr. Madhun was making his final appearance before the Board pursuant to his request for release from the terms of the Board's Order of August 12, 2009. Ms. Bickers reviewed Dr. Madhun's history with the Board.

Dr. Steinbergh asked Dr. Madhun to describe his current practice. Dr. Madhun replied that he is currently in private practice and has some hospital rounding responsibilities. Dr. Madhun described his situation as minimally thriving.

Dr. Steinbergh asked how Dr. Madhun's ethics and boundaries courses have affected his decision-making. Dr. Madhun replied that when he is now with a patient, he sees the boundaries and has foresight into

potential dangers.

Dr. Steinbergh wished Dr. Madhun well and hoped that this has been a great learning experience for him.

Dr. Steinbergh moved to release Dr. Madhun from the terms of the Board's Order of August 12, 2009. Dr. Suppan seconded the motion. All members voted aye. The motion carried.

JASON R. MOLDER, L.M.T.

Mr. Molder was making his final appearance before the Board pursuant to his request for release from the terms of the Board's Order of October 8, 2008. Ms. Bickers reviewed Mr. Molder's history with the Board.

Dr. Steinbergh asked what Mr. Molder has been doing recently and what his plans for the future are. Mr. Molder answered that he has completed his associate's degree and is currently attending a trade school for carpentry. Mr. Molder stated that this process has redirected him to develop more skills in life.

Dr. Steinbergh asked if Mr. Molder will continue to do massage therapy. Mr. Molder replied that he thinks he will resume massage therapy in the future because he enjoys helping others, but felt like he needed to develop another trade as a source of income. Mr. Molder stated that he had had trouble making a living at massage therapy because he tried hard to make it affordable for anyone who needed his help.

Dr. Steinbergh advised Mr. Molder to remember that massage therapy is a profession and he must keep up with his skills and knowledge to maintain his skill level. Mr. Molder agreed and stated that he respects the field of massage therapy. Mr. Molder stated that he performs massage therapy every day, even if he does not charge for it. Mr. Molder stated that he has had some problems in the past due to conflict with authority figures. Mr. Molder stated that this experience has helped him mature and he has found it strengthening to become humble and learn from people above him.

Dr. Steinbergh asked if Mr. Molder had any questions for the Board. Mr. Molder replied that he has no questions.

Dr. Steinbergh moved to release Mr. Molder from the terms of the Board's Order of October 8, 2008. Dr. Bechtel seconded the motion. All members voted aye. The motion carried.

JOHN P. MOORE, III, M.D.

Dr. Moore was making his final appearance before the Board pursuant to his request for release from the terms of the Board's Order of May 14, 2003. Ms. Bickers reviewed Dr. Moore's history with the Board.

Dr. Steinbergh asked Dr. Moore to describe his experience since the Board's Order. Dr. Moore replied that things are going well and he has been humbled by the experience. Dr. Moore stated that things were done wrongly, but was proud to say he still has a lot of idealism and is still trying to make an impact on healthcare in this country. Dr. Moore stated that he plans to practice until he is about 70. Dr. Moore stated

that his staff finds him to be more analytical after the Board Order, and that is because Dr. Moore wants to make sure everything is done correctly. Dr. Moore appreciated the Board's help.

Dr. Steinbergh asked if Dr. Moore has any questions for the Board. Dr. Moore replied that he has no questions.

Dr. Steinbergh moved to release Dr. Moore from the terms of the Board's Order of May 14, 2003. Dr. Bechtel seconded the motion. All members voted aye. The motion carried.

PHILLIP THIELE NORTH, M.D.

Dr. North was making his final appearance before the Board pursuant to his request for release from the terms of his March 14, 2007 Consent Agreement. Ms. Bickers reviewed Dr. North's history with the Board.

Dr. Steinbergh asked how Dr. North feels. Dr. North answered that he is feeling excellent.

Dr. Steinbergh asked where Dr. North is practicing. Dr. North replied that he is doing *locum tenens* work in urgent care centers in southwest Ohio, and his work is going well. Dr. Steinbergh commented that doing *locum tenens* work can be very stimulating.

Dr. Strafford exited the meeting at this time.

Dr. Steinbergh asked how Dr. North will continue his recovery program. Dr. North stated that he has learned that to maintain his recovery, he must make it a part of his life and internalize the aspects of recovery so that it becomes a philosophy and a way of life. Dr. North stated that he will continue to attend meetings and is frequently the chair of a Thursday meeting. Dr. North stated that he has one sponsee.

Dr. Steinbergh asked if Dr. North has any questions for the Board. Dr. North stated that he has no questions.

Dr. Steinbergh moved to release Dr. North from the terms of his March 14, 2007 Consent Agreement. Dr. Suppan seconded the motion. All members voted aye. The motion carried.

Dr. Amato exited the meeting at this time.

MICHAEL J. O'BRIEN, D.O.

Dr. O'Brien was making his final appearance before the Board pursuant to his request for release from the terms of the Board's Order of September 11, 2002. Ms. Bickers reviewed Dr. O'Brien's history with the Board.

Dr. Steinbergh asked if Dr. O'Brien is the director of anesthesiology at his facility. Dr. O'Brien responded that he is not the director, but is an employee of an anesthesia group. Dr. O'Brien stated that he does not

work in the operating room, but staffs a pre-operative evaluation clinic. Dr. Steinbergh, noting the Board's concern with recidivism among anesthesiologists, observed that Dr. O'Brien does not work on the same floor as anesthesiology and asked if that situation will continue. Dr. O'Brien answered that it will continue.

Dr. Steinbergh stated that Dr. O'Brien's group is in the process of devising the best way to monitor Dr. O'Brien. Dr. O'Brien stated that his current group is the same group he was with before his troubles and he is grateful that they have given him a second chance. Dr. O'Brien stated that he will continue monitoring through the hospitals and he will be making no changes to his recovery program. Dr. O'Brien stated that he still has a sponsor and two sponsees, and that will continue as well. Dr. Steinbergh asked how many days per week Dr. O'Brien attends meetings. Dr. O'Brien replied that he attends two to three meetings per week.

Dr. Suppan asked if Dr. O'Brien will be able to renew his board certification if he is only practicing in the pre-operative clinic and not doing anesthesia cases. Dr. O'Brien responded that he is uncertain how he will be able to renew his certification without doing hands-on anesthesiology. Dr. Steinbergh asked if there is a group that offers certification for clinicians who do pre-operative management. Dr. O'Brien replied that he is unaware of any such group.

Dr. Steinbergh asked if Dr. O'Brien had any questions for the Board. Dr. O'Brien replied that he has no questions and he appreciates the help he received from Mr. Albert and Ms. Bickers.

Dr. Steinbergh moved to release Dr. O'Brien from the terms of the Board's Order of September 11, 2002. Dr. Bechtel seconded the motion. All members voted aye. The motion carried.

JEFFREY E. SHOOK, D.P.M.

Dr. Shook was making his final appearance before the Board pursuant to his request for release from the terms of his March 12, 2009 Consent Agreement. Ms. Bickers reviewed Dr. Shook's history with the Board.

Dr. Suppan asked Dr. Shook to describe the nature of his practice. Dr. Shook stated that he currently practices in Logan, West Virginia, and Charleston, West Virginia, and his practice mostly involves surgical reconstruction and trauma work from emergency departments. Dr. Suppan asked if Dr. Shook is the only physician in his practice. Dr. Shook responded that he works for a hospital system which employs about 20 physicians who work together in a collaborative effort, though not under the same roof. Dr. Shook stated that the system functions like a large multi-specialty group. Dr. Suppan noted that this arrangement should allow Dr. Shook to take vacation from time to time. Dr. Shook agreed that he is now able to take vacation.

Dr. Suppan asked what type of support network Dr. Shook has and if he attends caduceus or Narcotics Anonymous. Dr. Shook replied that there are no Narcotics Anonymous meetings available in his location, but he attends Alcoholics Anonymous and caduceus, primarily the latter. Dr. Shook stated that he has developed a supportive relationship with a co-worker, an orthopedist who is also in the program.

Dr. Suppan asked if Dr. Shook's experience in the recovery process has impacted how he cares for patients. Dr. Shook answered that the volume of his patients has been reduced considerably, which Dr. Shook opined allows him to practice in a more effective manner. Dr. Shook stated that he has always been very diligent about his prescribing habits. Dr. Shook stated that this experience has had a positive effect on his personal life and that he is now remarried and has four children. Dr. Shook stated that the stability in his personal life has given him a much better approach to his practice.

Dr. Suppan commented that Dr. Shook seems much happier than he did the last time he appeared before the Board. Dr. Shook agreed and stated that at the time of his prior meeting he had significant marital problems and significant practice problems.

Dr. Suppan asked if Dr. Shook had any questions for the Board. Dr. Shook replied that he had no questions, but wished to address the family practice residents in attendance. Dr. Shook stated that the most important principle that is taught in medical school is to do no harm. Dr. Shook stated that many of his past actions indirectly caused harm to his patients. Dr. Shook asked the residents to be cognizant of that possible consequence of their actions.

Dr. Shook also expressed appreciation for Ms. Bickers, who was always attentive and listened to Dr. Shook's ideas even when she did not agree with them.

Dr. Suppan moved to accept the compliance staff's report of Dr. Shook's conference on February 7, 2012. Dr. Suppan further moved to release Dr. Shook from the terms of his March 12, 2009 Consent Agreement. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Dr. Amato returned to the meeting at this time.

DUNCAN STEARNS, M.D.

Dr. Stearns was making his final appearance before the Board pursuant to his request for release from the terms of his December 9, 2009 Consent Agreement. Ms. Bickers reviewed Dr. Stearns' history with the Board.

Dr. Steinbergh asked how Dr. Stearns is. Dr. Stearns replied that he is well. Dr. Steinbergh asked Dr. Stearns to describe his pediatric hematology/oncology practice. Dr. Stearns answered that he has an academic practice at Case Western Reserve University and he splits his time between laboratory research and patient care. Dr. Stearns stated that his practice is going well.

Dr. Steinbergh asked Dr. Stearns to describe his recovery and his plans for the future. Dr. Stearns stated that he continues to attend meetings and he keeps in contact with his sponsor. Dr. Stearns stated that his approach to recovery has been trying to lead as balanced a life as possible. Dr. Stearns stated that his wife, family, and workplace have been very supportive of him.

Dr. Steinbergh moved to release Dr. Stearns from the terms of his December 9, 2009 Consent

Agreement. Ms. Elsass seconded the motion. All members voted aye. The motion carried.

PAUL HENRY GOODMAN, D.O.

Dr. Goodman was making his initial appearance before the Board pursuant to the terms of his December 14, 2011 Consent Agreement. Ms. Bickers reviewed Dr. Goodman's history with the Board.

Dr. Steinbergh asked if Dr. Goodman practices emergency medicine in Erie, Pennsylvania. Dr. Goodman responded that he practices in Lorain County, Ohio.

Dr. Steinbergh asked how Dr. Goodman's recovery is going and why this recovery is different from his prior recovery. Dr. Goodman answered that previously he had made a very serious lapse of judgment and had not taken his recovery program as seriously as he should have. Dr. Goodman stated that he had been out with some friends and consumed beer. Dr. Goodman stated that, though he thought little of it at the time, one week later he reported his relapse to Ms. Bickers. Dr. Goodman stated that since that time, he has entered into an intensive outpatient program and has redoubled his efforts. Dr. Goodman stated that he intends to make sobriety his number one priority and associate with sober people. Dr. Goodman stated that he now attends five to six Alcoholics Anonymous (AA) meetings per week and participates in other AA activities.

Dr. Steinbergh stated that if Dr. Goodman is committed to his sobriety and recovery, he will be able to continue as a productive physician. Dr. Goodman stated that he must renew that commitment on a daily basis.

Dr. Steinbergh asked if Dr. Goodman understands his Consent Agreement. Dr. Goodman responded that he has no questions.

Dr. Steinbergh moved to continue Dr. Goodman under the terms of his December 14, 2011 Consent Agreement. Dr. Bechtel seconded the motion. All members voted aye. The motion carried.

MICHAEL JOSEPH HARPER, M.D.

Dr. Harper was making his initial appearance before the Board pursuant to the terms of his December 14, 2011 Consent Agreement. Ms. Bickers reviewed Dr. Harper's history with the Board.

Dr. Steinbergh noted that family medicine residents are in attendance and asked Dr. Harper to explain what he has learned from this unfortunate experience. Dr. Steinbergh also asked Dr. Harper to comment on his professional ethics course. Dr. Harper stated that the most important thing for physicians is maintaining balance, both professionally and in their personal life. Dr. Harper advised the residents that physicians can get themselves into trouble when they forget they are human beings who are no more important than other people.

Dr. Steinbergh asked if Dr. Harper understands his Consent Agreement. Dr. Harper replied that he has no questions.

Dr. Steinbergh hoped that Dr. Harper continues to demonstrate growth in his professional decision-making and to educate others on these issues. Dr. Harper stated that since he has returned to practice, he has spent time educating his patients on why he had been gone and why what he did was bad.

Dr. Steinbergh moved to continue Dr. Harper under the terms of his December 14, 2011 Consent Agreement. Ms. Elsass seconded the motion. All members voted aye. The motion carried.

BRIAN D. HESLER, M.D.

Dr. Hesler was making his initial appearance before the Board pursuant to the terms of his December 14, 2011 Consent Agreement. Ms. Bickers reviewed Dr. Hesler's history with the Board.

Dr. Steinbergh noted that Dr. Hesler's situation can be a learning moment for the family practice residents in attendance, because Dr. Hesler himself is a resident. Dr. Steinbergh asked how Dr. Hesler's recovery is going. Dr. Hesler replied that his recovery is going very well and he is in full compliance. Dr. Hesler stated that he attends four to five meetings per week and a weekly caduceus meeting.

Dr. Steinbergh asked if Dr. Hesler has returned back to his residency program. Dr. Hesler replied that he has not yet been able to return. Ms. Bickers explained that when Dr. Hesler fulfills the conditions for reinstatement, a step II consent agreement will be negotiated. Ms. Bickers stated that when a training certificate is suspended, it cannot be reinstated until there is a training program willing to accept the practitioner. Ms. Bickers stated that Dr. Hesler is having trouble getting into a training program. Dr. Hesler stated that Ms. Bickers has written a letter to his previous training program explaining that he cannot reinstate his training certificate until he is accepted back, and the program is considering the matter.

Dr. Suppan noted that Dr. Hesler had abused Sevoflurane and asked if Sevoflurane is an inhalant. Dr. Hesler replied that that is correct and he had inhaled Sevoflurane. Dr. Suppan asked if practicing anesthesiology would act as a trigger for Dr. Hesler if he administered it to a patient. Dr. Hesler responded that he did not believe it would be a trigger, noting that circulation in the operating room is a closed system and filters are used.

Dr. Suppan observed that Dr. Hesler also used Lidocaine. Dr. Hesler stated that he never used Lidocaine, but it is listed as a drug of choice because he had inappropriately obtained Lidocaine and contemplated using it. Dr. Suppan asked what Dr. Hesler would have done with the Lidocaine had he decided to use it. Dr. Hesler replied that he would have used the Lidocaine intravenously.

Dr. Steinbergh wondered what decision-making led to these events and asked if Dr. Hesler had a prior history of inappropriate use of drugs or alcohol. Dr. Hesler answered that he had no prior history of abuse and that his decision to use was very impulsive. Dr. Hesler stated that he had been up for six days, was exhausted, and was looking to get some sleep. Dr. Hesler stated that he has no good reasoning or excuse for his actions. Dr. Hesler stated that the most disturbing aspect of this incident is that he did not ask for help. Dr. Hesler stated that his 28-day rehabilitation treatment was very interesting and required a great deal of introspection from him.

Dr. Steinbergh asked how many times Dr. Hesler abused Sevoflurane. Dr. Hesler answered that he abused Sevoflurane only once. Dr. Hesler stated that he had administered Sevoflurane daily in the controlled environment of the operating room, but his use was uncontrolled and extremely dangerous. Dr. Hesler stated that he was fortunate not to have suffered a serious injury or death. Dr. Hesler stated that he has learned a great deal of humility through this process and is no longer afraid of asking for help or admitting he cannot do something.

Dr. Steinbergh asked if Dr. Hesler appreciates why his training program may be hesitant to accept him back. Dr. Hesler replied that he appreciates the program's position.

Dr. Steinbergh asked if Dr. Hesler is considering specialties other than anesthesiology. Dr. Hesler stated that he has spoken to another program at the Cleveland Clinic, but he is not currently eligible for a residency because he is not yet eligible for his training certificate. Dr. Hesler stated that he is uncertain if he will be able to continue in the field of medicine.

Dr. Suppan questioned if anesthesiology is the best specialty for Dr. Hesler and opined that a less stressful specialty maybe more appropriate for him. Dr. Steinbergh agreed and stated that not everyone follows their initial career path. Dr. Mahajan cautioned that relapse seems to be higher among anesthesiologists.

Dr. Mahajan asked if Dr. Hesler takes medication for his anxiety disorder. Dr. Hesler replied that he takes Zoloft for anxiety.

Dr. Steinbergh moved to continue Dr. Hesler under the terms of his December 14, 2011 Consent Agreement. Dr. Suppan seconded the motion. All members voted aye. The motion carried.

Dr. Amato exited the meeting at this time.

MYRON LYLE SHANK, M.D.

Dr. Shank was making his initial appearance before the Board pursuant to the terms of the Board's Order of December 14, 2011. Ms. Bickers reviewed Dr. Shank's history with the Board.

Dr. Steinbergh asked where Dr. Shank is in the process of taking the required courses in controlled substance prescribing, professional ethics, and medical record-keeping. Dr. Shank stated that no one becomes an endocrinologist for the money. Dr. Shank stated that he subsidized his practice for as long as he could because it was what he loved. Dr. Shank stated that he kept his office open until he was no longer able to pay his liability insurance premiums. Dr. Shank stated that he has lost his practice and his home. Dr. Shank stated that he is living in his former office with no furnace and a leaky roof. Dr. Shank stated that he is donating plasma, has applied for food stamps, and his wife, who holds a master's degree in nursing, has been forced to take a factory job for \$7.80 per hour. Dr. Shank stated that it is impossible for him to take time off and expend the money necessary to take the required courses.

Dr. Steinbergh asked about the next step in this situation. Ms. Bickers stated that Dr. Shank is required to

complete the courses within 180 days of the effective date of the Board Order; if he fails to do so, he will be in violation of the Order. Ms. Bickers suggested that Dr. Shank can explore online courses. Dr. Shank stated that he has been unable to find appropriate courses online. Ms. Bickers offered to provide a list of online courses that have been approved in the past.

Dr. Steinbergh noted that Dr. Shank has an active medical license and asked if there are any work opportunities for him as a physician. Dr. Shank stated that he cannot find work under the current circumstances. Dr. Steinbergh asked if “current circumstances” referred to Dr. Shank’s Board Order. Dr. Shank replied that that is correct.

Dr. Steinbergh asked if there is anything the Board can do to help Dr. Shank. Ms. Bickers stated that she can continue to communicate with Dr. Shank to see what aid could be rendered. Ms. Bickers expressed confusion as to what terms of Dr. Shank’s Board Order are causing him difficulty in finding employment. Dr. Steinbergh opined that the existence of a Board Order alone can be a deterrent to someone hiring a physician. Dr. Shank related that a correctional medical center had expressed interest in hiring him and asked for a copy of his Board Order. Dr. Shank stated that since he sent the Board Order, the correctional medical center has refused to take his calls.

Dr. Steinbergh stated that the Board can communicate with prospective employers and explain Dr. Shank’s Board Order and probationary terms. Ms. Bickers agreed, but stated that in order for her to report that Dr. Shank is in compliance with the Board Order, he must pursue things like coursework. Dr. Shank stated that he is financially unable to pursue coursework at this time, and no one can call him because his telephone has been cut off. Ms. Bickers stated that she will do what she can.

Dr. Talmage asked when Dr. Shank was board certified in endocrinology. Dr. Shank replied that he was board certified in endocrinology in 2009. Dr. Talmage noted that Dr. Shank’s board-certification is time-limited. Dr. Shank agreed and stated that, unless he can persuade the specialty board otherwise, he will lose that certification because of the actions of the Medical Board. Dr. Talmage asked if Dr. Shank has been taking continuing medical education each year. Dr. Shank replied that he has.

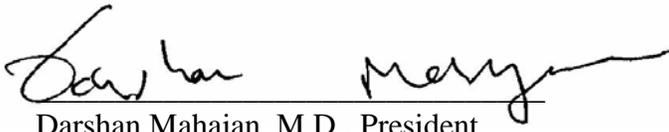
Dr. Steinbergh asked if Dr. Shank’s specialty board has a Maintenance of Competency program, whereby Dr. Shank can participate in ongoing continuing medical education rather than sitting for a board examination in several years. Dr. Shank replied that, to the best of his knowledge, that is not an option for him.

Ms. Bickers felt it important for Board members and for Dr. Shank to understand that the reaction of most employers and certification bodies is not the result of the existence of a Board action, but rather is the result of the underlying facts of and reasons for the Board action. Dr. Steinbergh encouraged Dr. Shank to continue a dialogue with Ms. Bickers to see what the Board can do to help him. Dr. Steinbergh stated that part of staying in compliance with the Board Order will be taking the required courses. Dr. Shank stated that he can only do what he can do.

Dr. Steinbergh moved to continue Dr. Shank under the terms of the Board’s Order of December 14, 2011. Dr. Bechtel seconded the motion. All members voted aye. The motion carried.

Thereupon, at 5:00 p.m., the March 14, 2012 session of the State Medical Board of Ohio was adjourned by Dr. Mahajan.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio meeting on March 14, 2012, as approved on April 11, 2012.


Darshan Mahajan, M.D., President


J. Craig Strafford, M.D., M.P.H., Secretary

(SEAL)



MINUTES**THE STATE MEDICAL BOARD OF OHIO****March 15, 2012**

Darshan Mahajan, M.D., President, called the meeting to order at 8:00 a.m., in the Administrative Hearing Room, 3rd Floor, the James A. Rhodes State Office Tower, 30 E. Broad St., Columbus, Ohio 43215, with the following members present: Anita Steinbergh, D.O., Vice-President; J. Craig Strafford, M.D., Secretary; Jack C. Amato, M.D., Supervising Member; Lance A. Talmage, M.D.; Marchelle L. Suppan, D.P.M.; Kris Ramprasad, M.D.; Mark A. Bechtel, M.D.; and Donald R. Kenney, Sr. The following member entered the meeting at a later time: Laurie O. Elsass. The following members did not attend the meeting: Dalsukh Madia, M.D.; and W. Frank Hairston.

Also present were: Richard Whitehouse, Executive Director; Sallie J. Debolt, General Counsel; Kimberly C. Anderson, Assistant Executive Director; Sara Vollmer, Assistant Executive Director; William J. Schmidt, Senior Counsel; Mike Miller, Program Manager for Policy and Governmental Affairs; Joan K. Wehrle, Education & Outreach Program Manager; Rebecca J. Marshall, Chief Enforcement Attorney; Danielle Bickers, Compliance Supervisor; Annette Jones, Compliance Officer; Heidi Dorn, Assistant Attorney General; Nicole Weaver, Chief of Licensure; and Benton Taylor, Executive Assistant to the Executive Director.

PROBATION AND REINSTATEMENT CONSENT AGENDA

Dr. Mahajan advised that at this time he would like the Board to consider the probationary reports and probationary requests on today's consent agenda. Dr. Mahajan asked whether any Board member wished to consider a probationary report or request separately.

Dr. Steinbergh stated that she would like to discuss the probationary requests of Aiyappan Menon, M.D., and Stephen A. Schemenauer, P.A., separately.

Dr. Ramprasad asked if the online course requested by Franklin H. Baker, P.A., was supported by the Secretary and Supervising Member. Dr. Strafford replied that, generally speaking, he and Dr. Amato have been very careful about substituting standard courses with online courses. Dr. Strafford stated that he and Dr. Amato have concurred in approving the courses submitted by Mr. Baker.

Dr. Steinbergh moved to accept the Compliance staff's Reports of Conferences on February 6 & 7, 2012, with: David B. Axelson, M.D.; Michael R. Baum, M.D.; Andrew J. Beistel, D.O.; Paul Lewis Blanchard, M.D.; Celeste D. Brewer-Edwards, P.A.; Kory D. Brownlee, D.P.M.; Samuel Francis Cornicelli, Jr., M.D.; William B. Cullen, M.D.; Ericka L. Davis P.A.; Franklin D. DeMint, D.O.; Mark E. DiLuciano, M.D.; Kelly Kaye Elenniss, L.M.T.; Mary Jo Foote, P.A.; Thomas A. Gibbs, D.O.; Christine M. Graham, L.M.T.; Brian F. Griffin, M.D.; Carey K. Gross, D.O.; Timothy Ross Halstead, P.A.; William Clark Harlan, D.O.; Nilesh B. Jobalia, M.D.; Matthew D. Kellems, M.D.; Krzysztof J. Kubicki, M.D.; Brian Francis Lane, M.D.; William G. Martin, M.D.; Imran Raza

Naqvi, M.D.; Matthew Proctor Noyes, M.D.; Karen M. Orlosky, M.T.; Kurt J. Palazzo, M.D.; William Popovich, M.D.; Bud E. Quintana, D.O.; Lawrence Gene Ratcliff, M.D.; Paul D. Reikowski, Jr., L.M.T.; Richard J. Ryan, M.D.; Dan Ryu, M.D.; Denise J. Signs, M.D.; Joseph P. Sitarik, D.O.; Arthur H. Smith, M.D.; Rick D. St. Onge, M.D.; Rodney E. Stone, M.D.; Stephen A. Straubing, M.D.; Aladdin Zafar Syed, M.D.; Gregory M. Thomas, M.D.; Randall G. Whitlock, Jr., P.A.; and Carmen L. Woolums, P.A.

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

- To grant Franklin H. Baker, P.A.'s request for approval of an additional ethics course, *Ethical Problems; What Guides your Decisions*, administered by LearnWell.org;
- To grant Thomas M. Bender, A.A.'s request for reduction in appearances from every three months to every six months, reduction of random drug screens from four to two times per month, and reduction of weekly AA meetings from three to two per week with a minimum of 10 meetings per month;
- To grant Paul P. Chu, M.D.'s request for approval of Kamel S. Abraham, M.D., to serve as the monitoring physician, and determination of the frequency and number of charts to be reviewed at 10 charts per month;
- To grant Allison C. Grauer, M.D.'s request for approval of Nathan J. O'Dorisio, M.D., to serve as the new monitoring physician, determination of the frequency and number of charts to be reviewed at 10 charts per month, and approval of Anne McVey, Ph.D., as the mental health professional conducting psychotherapy;
- To grant Elizabeth J. (Martin) Gross, P.A.'s request for approval of Wendy L. Summerhill, M.D., to serve as the new primary supervising physician/reporting physician;
- To grant Marjorie M. Haas, M.D.'s request for reduction in 12-Step meeting attendance from three per week to twice per week with a minimum of ten per month, and reduction in psychiatric sessions from semi-weekly to once per month;
- To grant Timothy J. Heyd, M.D.'s request for approval of *Professional Boundaries and Boundary Violations*, administered by Professional Boundaries, Inc.;
- To grant Howard C. Larky, D.O.'s request for approval of *Intensive Course in Medical Ethics, Boundaries, and Professionalism*, offered by Case Western Reserve University;
- To grant Mark C. Leeson, M.D.'s request for approval for reduction in personal appearances from every three months to twice per year, and reduction in drug and alcohol rehabilitation meeting attendance to two per week with a minimum of 10 per month;

- To grant Carol E. Lewis, M.D.'s request for approval of Patrick D. Enders, M.D., to serve as the new treating psychiatrist;
- To grant Leonard G. Quallich, Jr., M.D.'s request for approval of S. Erfan Ahmed, M.D., to serve as the treating psychiatrist, and approval of Eugene A. Benedetto, M.A., to serve as the mental health professional conducting the psychotherapy;
- To grant Adil Y. Yamour, M.D.'s request for approval of *Intensive Course in Medical Records Keeping Course*, administered by Case Western Reserve University, to fulfill the record keeping course requirement; and approval of *Pain Management Course*, administered by the Ohio State Medical Association, to fulfill the pain management course requirement; and
- To grant Dawn M. Zacharias, M.D.'s request for approval of *Medical Record Keeping Course*, offered by P.B.I. to fulfill the medical records course requirement for reinstatement.

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

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion carried.

AIYAPPAN MENON, M.D. AND STEPHEN A. SCHEMENAUER, P.A.

Dr. Steinbergh stated that she supports Dr. Menon's request for Dr. Kosnosky to serve as the new monitoring physician and that she requested to remove Dr. Menon's case from the Consent Agenda for discussion purposes only. Dr. Steinbergh expressed concern about Dr. Menon's deficiency in reports from his monitoring physician. Dr. Steinbergh stated that Dr. Menon was informed that he would need to find a new monitoring physician who is more accessible and this led to Dr. Menon's current request for Dr. Kosnosky to be his new monitoring physician. Ms. Bickers stated that the Board did subsequently receive a report from Dr. Menon's prior monitoring physician, though not within the appropriate timeframe. Dr. Steinbergh suggested that this information be included in Dr. Menon's reports so that she can understand why those reports are absent.

Regarding Mr. Schemenauer, Dr. Steinbergh commented that he is requesting approval of a psychiatrist and a psychologist, though the two names are inadvertently reversed on the documentation. Dr. Steinbergh noted that Mr. Schemenauer's psychiatrist and psychologist are in West Virginia. Dr. Steinbergh agreed

with the Secretary and Supervising Member's recommendation to approve Mr. Schemenauer's request, provided that Ohio licensees are nominated to provide those services once Mr. Schemenauer obtains employment in Ohio.

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

- **To grant Aiyappan Menon, M.D.'s request for approval of David P. Kosnosky, D.O., to serve as the new monitoring physician;**
- **To grant Stephen A. Schemenauer, P.A.'s request for approval of Ameila R. McPeak, D.O., to serve as the treating psychiatrist, and approval of Karen Schimmel, M.S.W., L.I.S.W., to serve as the mental health professional conducting the psychological treatment, with the condition that once employment in Ohio is obtained, Ohio licensees must be nominated to provide psychiatric and psychological treatment;**

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

ROLL CALL:	Dr. Strafford	- abstain
	Dr. Amato	- abstain
	Dr. Suppan	- aye
	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion carried.

ADMINISTRATIVE REPORT

Mr. Whitehouse stated that for the last several months, an Ohio State Highway Patrolman has been present at Board meetings due to the Board's concerns regarding safety and security. Mr. Whitehouse stated that some have raised the question, in the context of cost-saving, of whether the Board should continue to have an Ohio State Highway Patrolman present. Mr. Whitehouse noted the possibility that one of the Board's investigators, who are now armed, could potentially fulfill that function.

Dr. Steinbergh opined that having a uniformed officer in the Board meeting room is a deterrent against possible disruptive or dangerous actions. Dr. Steinbergh opposed having armed staff fulfill that function, opining that it is not the role of the Medical Board staff to protect Board members in the meeting room. Dr. Steinbergh felt that keeping a recognizable, uniformed officer in the room during meetings is a small investment.

Dr. Amato opined that it may behoove the Board to have a highway patrolman for high-profile cases. However, Dr. Amato felt that Board members are at greater risk outside of the Board meetings, where a patrolman cannot provide protection. Dr. Amato commented that the Board is spending money on a highway patrolman that is not necessarily needed on a monthly basis.

Dr. Talmage stated that the Federation of State Medical Boards Foundation conducted a survey and found that 80% of state medical boards reported some sort of threat to either an individual board member or to the board as a whole. Dr. Talmage noted one instance of violence in 2009, when the Chairman of the Arkansas State Medical Board was almost killed when his car was blown up.

Dr. Talmage asked what the expense is for having the highway patrolman present. Ms. Loe replied that the Board pays about \$30.00 per hour for four hours for that service. Dr. Talmage felt that this is a relatively small expense. Dr. Talmage agreed with Dr. Steinbergh that the presence of a uniformed officer is at least a deterrent and that Board investigators can better spend their time investigating in the field.

Dr. Suppan moved to maintain the Board's current practice of having a uniformed Ohio State Highway Patrolman present during Board meetings. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Mr. Whitehouse stated that the Board staff has been working very closely with the Governor's Opiate Cabinet Action Team. Mr. Whitehouse stated that he has provided the Board members with proposed language for signage relative to prescribing issues which will appear in emergency departments and urgent care centers throughout Ohio. Feedback from the Board has already been provided to the group and feedback is now being asked on this latest draft. Mr. Whitehouse stated that the Opiate Cabinet Action Team has established a very short timeframe for adopting the signage and the Medical Board has an opportunity to offer input and to have the Medical Board's name associated with it.

Dr. Steinbergh stated that, in general, she is very supportive of the proposed language. Dr. Steinbergh expressed some concern about item #5, which states:

“Prior to making a final determination regarding whether a patient will be provided a prescription for an OOCS [Opioids or Other Controlled Substances], the emergency clinician is encouraged to do the following...Contact the patient's routine provider who usually prescribes their opioid or other controlled substance...”

Dr. Steinbergh commented that it is time-consuming for an emergency physician to contact a provider's office to request and receive medical records, though some emergency physicians do attempt to do this. Dr. Steinbergh questioned whether the proposed language would be seen as a guideline or as an expectation of the Medical Board. Dr. Steinbergh hoped that emergency physician will not see this as a requirement and thus hold up patient care.

Dr. Talmage stated that he had two concerns. First, item #4 states that the emergency department personnel will not typically contact the patient's physician after normal office hours. Dr. Talmage stated that this is not representative of most emergency departments. Second, item #10 states that emergency

department personnel will check a database, meaning the Ohio Automated Rx Reporting System (OARRS). Dr. Talmage opined that most laypersons are not aware of the existence of OARRS and felt that a better description of the database may be appropriate. Dr. Suppan agreed. Mr. Whitehouse commented that, regardless of details, the hope is that a mention of a prescription reporting system will deter drug-seekers.

Regarding item #4, Dr. Steinbergh opined that the language ought not to say that the patient's physician will not be contacted. Therefore, Dr. Steinbergh suggested that the phrase, "We typically will not call your doctor after normal office hours," should be deleted. Dr. Suppan agreed and opined that the phrase appears to create a rule that may not fit with the patient's circumstances and is antagonistic. Dr. Mahajan favored retaining the phrase, noting that it is not an absolute statement against contacting the physician. Dr. Amato stated that it is unrealistic to expect emergency physicians to call the patient's primary care physician in every case.

Dr. Strafford noted that item #10 is the only portion of the proposed language that makes reference to a physician. The remainder of the document uses the word "we," which presumably includes the non-physician members of the emergency department staff or urgent care staff. Dr. Strafford also noted a typographical error in item #8; the item includes an end parenthesis but has no beginning parenthesis.

Dr. Suppan moved that the Board endorse the document as it will be adopted by the Opiate Cabinet Action Team. Dr. Suppan further moved to suggest to the Opiate Cabinet Action Team that the language of item #4 be changed as discussed, that the typographic error in item #8 be corrected, and that item #10 be changed to use the term "we" and to better describe the nature of the database. Dr. Steinbergh seconded the motion.

Dr. Mahajan stated that he will now entertain discussion in the above matter.

Dr. Steinbergh stated that, if the motion passes, the Medical Board's name will be attached to the signage language. Dr. Steinbergh expressed concern that, although this is meant to be only a guideline, physicians may see the language as a directive from the Board, the violation of which could form the basis of a disciplinary action. Dr. Amato echoed Dr. Steinbergh's concerns, stating the documents from the Medical Board carry a great deal of weight with physicians. Mr. Whitehouse stated that he expressed similar concerns to the Opiate Cabinet Action Team, and so the language was drafted such that there should be no confusion in that regard.

A vote was taken on Dr. Suppan's motion. All members voted aye. The motion carried.

Mr. Whitehouse stated that the staff has been exploring ways to improve the licensure process and has discussed the issue with the Federation of State Medical Boards (FSMB). Mr. Whitehouse stated the FSMB is interested in Proactive Credential Reporting, by which a medical school would electronically provide information to the Federation Credentials Verification Service (FCVS) rather than waiting for an application to be filed. This process should reduce the time it takes to license an individual.

Mr. Whitehouse continued that he and Ms. Vollmer accepted an invitation to speak to the Ohio Council of

Medical School Deans. Ms. Vollmer gave a very good presentation explaining the Board's licensure process and why so much time is involved. The Council provided a very polite audience, and then made a very good case for why the licensure process must move more quickly. The Council offered to communicate with the legislature to help provide the means to accomplish this, and it was decided that a working group between the Council and the Board will be formed to pursue this matter. Mr. Whitehouse stated that any Board members who wish to be involved in this process should contact him or Ms. Vollmer.

Mr. Whitehouse informed the Board that representatives from Medscape will give a presentation at 11:00 a.m. regarding their Continuing Medical Education (CME) programs. Mr. Whitehouse expressed particular interest in Medscape's Performance Improvement CME. Mr. Whitehouse invited any and all interested Board members to attend.

REPORTS BY ASSIGNED COMMITTEES

AD HOC COMMITTEE ON MAINTENANCE OF LICENSURE

Mr. Whitehouse stated that the first meeting of the Maintenance of Licensure (MOL) *Ad Hoc* Committee was held on Wednesday. Mr. Whitehouse stated that the Committee had a spirited discussion on this topic and invited the members of the Committee (Dr. Steinbergh, Dr. Strafford, and Dr. Ramprasad) to address the Board.

Dr. Ramprasad stated that he does not like the concept of MOL. Dr. Ramprasad opined that there is no particular advantage to MOL and that it duplicates the work of the specialty board certifications. Dr. Ramprasad stated that there is no evidence that physicians are doing a bad job or that MOL will change how physicians practice. Dr. Ramprasad opined that MOL will increase physician expenditures, at a time when other expenditures are also increasing and reimbursements are decreasing.

Dr. Ramprasad stated that the issue that should be addressed is physicians who are grandfathered into lifetime certification. Dr. Ramprasad stated that grandfathered physicians, like himself, should be tested for continued competency. Dr. Ramprasad noted that the American Congress of Obstetricians and Gynecologists (ACOG) has developed a good system for testing the competency of non-certified and grandfathered OB/GYN's. Dr. Ramprasad opined that the FSMB's resources would be better spent on other activities, such as encouraging specialty boards to adopt competency-testing measures similar to ACOG's, developing telemedicine guidelines, or defining the roles of research fellows.

Dr. Ramprasad asked Dr. Talmage, as Chair-Elect of the FSMB, to comment on this subject.

Dr. Talmage stated that the FSMB began the effort to develop MOL following a resolution from its House of Delegates, which is made up of representatives from all state medical boards. Dr. Talmage stated that the FSMB cannot and will not dictate to the states how to operate an MOL system and each state will do it differently, though it is hoped that there will be some degree of standardization. Dr. Talmage stated that 25% of physicians in the United States are not certified by a specialty board, and one-third of physicians are grandfathered into lifetime certification; these physicians are not subject to the specialty boards' Maintenance of Certification requirements. Dr. Talmage stated that there are still physicians who do things

as they were done 10 or 20 years ago, despite newer guidelines to the contrary.

Dr. Talmage opined that MOL has its place, and will be done with guidelines from the FSMB which will be adopted or not adopted by each individual state. Dr. Talmage stated that the State Medical Board of Ohio is a large, respected board, and owes it to the FSMB and to the physicians of Ohio to begin a pilot project and make MOL the best it can be. Dr. Talmage acknowledged Dr. Ramprasad's concerns regarding expense and stated that the FSMB wants to minimize expense as much as possible. Dr. Talmage also stated that the FSMB does not favor a high-stakes examination.

Dr. Strafford noted that the Board is also currently considering changing the licensure fee structure for physicians. Dr. Strafford opined that if the Board actively pursues an endorsement of MOL at a time when physicians will also be asked to pay higher licensure fees, the results could be negative. Dr. Strafford felt that the concept of assuring the public that all licensed physicians are competent in their area of practice is essential. Dr. Strafford stated that MOL is one way to achieve that goal, but it does not have universal acceptance.

Dr. Strafford suggested that the Board make contact with the American Board of Obstetrics and Gynecology (ABOG) to inquire as to their justification for pursuing their competency-testing program.

Dr. Steinbergh agreed with Dr. Strafford regarding the timing of the exploration of both MOL and restructured licensure fees. Dr. Steinbergh stated that she supports the concept of MOL, but is not in favor of engaging in a pilot project at this time. Dr. Steinbergh emphasized that not starting a pilot project at this time does not mean that the Board is not considering MOL. Dr. Steinbergh felt it would be instructive to see how other states address this issue and what other pilot projects may look like. Dr. Steinbergh commented that even after the grandfathered physicians leave practice, MOL will be important because not all physicians will have specialty board certification.

Dr. Talmage stated that one of the principles of the FSMB is that the Maintenance of Certification (MOC) of the specialty boards will essentially satisfy the requirements of MOL. Dr. Talmage stated that MOL can also help address the problem of physicians migrating into practicing other specialties for which they are not properly trained, such as primary care physicians performing plastic surgery procedures.

Dr. Talmage acknowledged Dr. Strafford's point regarding the timing of the consideration of both MOL and possible licensure fee increases. Dr. Talmage stated that the pilot projects are meant to help determine what an MOL system may look like, and not to actually implement MOL in the states. Therefore, Dr. Talmage continued, a pilot project would be somewhat innocuous and would allow the Board to go forward in its quest for a licensure fee increase.

Mr. Whitehouse stated that in November 2010, the Board endorsed the concept of MOL and agreed to explore the possibility of becoming a pilot state. Mr. Whitehouse stated that the pilot projects will launch in July, and so the Board has until that time to decide if it wants to be involved in that. Mr. Whitehouse emphasized that, while he personally supports the concept of MOL, it is the Board's decision of whether or not to participate. Mr. Whitehouse stated that he will work to put whatever decision the Board makes into effect.

Dr. Steinbergh asked what data or statistics exist that demonstrates the value of the concept of MOL, that board-certified physicians are practicing competently, or that Continuing Medical Education (CME) changes the way physicians practice. Mr. Whitehouse stated that such data does not exist. Mr. Whitehouse noted that the medical profession as a whole has embraced the concept of life-long learning, and MOL is a natural extension of that. Mr. Whitehouse also noted that massage therapists are moving forward in developing a program to ensure continued competence.

Dr. Strafford stated that he is uncertain exactly what a pilot project in Ohio would entail and recommended postponing this discussion until after the FSMB 2012 Annual Meeting in late April. Dr. Steinbergh agreed and opined that the “life-long learning” aspect of MOL should be emphasized in a positive way. Mr. Whitehouse stated that this topic will receive a great deal of discussion at the Annual Meeting and the Board members in attendance will have the opportunity to engage with other state medical boards that are considering adopting an MOL pilot project.

The Board agreed to postpone discussion until after the FSMB 2012 Annual Meeting. Dr. Mahajan stated that the Board will decide in May or June whether it wishes to participate in the planned July launch of MOL pilot projects.

Dr. Ramprasad exited the meeting at this time.

PROPOSED STATEMENT ON CORPORATE PRACTICE OF MEDICINE

Ms. Debolt explained that the Board receives many calls concerning the corporate practice of medicine doctrine and if it still exists in Ohio. Due to this uncertainty among the public, Ms. Debolt proposed an explanation of Section 4731.226, Ohio Revised Code. The proposed statement states that only a licensed physician can practice medicine and that the physician must own the business entity in which he or she practices. Therefore, if a physician is employed by a hospital, then the hospital corporation or non-profit is practicing medicine, which is illegal because the physician is being forced to split their fee with the hospital in return for referral of the patient.

Ms. Debolt continued that when Section 4731.226, Ohio Revised Code, became law in 1998, the corporate practice of medicine became a non-entity in Ohio. The proposed statement explains the provisions of the current law and acknowledges the existence of old Attorney General opinions that had been based on the previous law. Ms. Debolt noted that a former member of the Medical Board, Bradley Sinnott, Esq., had been the impetus for the 1998 change in statute.

Ms. Debolt asked if the Board wished to replace the disclaimer at the end of the document with the phrase, “In this statement, the Medical Board does not announce a new rule, but instead gives licensees specific guidance regarding the Medical Practice Act, Chapter 4731, Ohio Revised Code.” Dr. Suppan and Dr. Strafford agreed that the disclaimer should be replaced with the language provided by Ms. Debolt.

Dr. Suppan moved to approve the proposed statement on the corporate practice of medicine, with the disclaimer replaced with the phrase, “In this statement, the Medical Board does not announce a

new rule, but instead gives licensees specific guidance regarding the Medical Practice Act, Chapter 4731, Ohio Revised Code.” Dr. Strafford seconded the motion.

Dr. Mahajan stated that he will now entertain discussion in the above matter.

Dr. Mahajan asked what steps the Board can take if a hospital, for business reasons, pressures a physician to take actions that are not in the best interest of the patient. Ms. Debolt replied that the State Medical Board only has authority over the practitioner, not the hospital. Therefore, while a physician can be subject to discipline for failing to comply with the minimal standards of care, the hospital is outside the Medical Board’s jurisdiction.

Dr. Amato exited the meeting at this time.

Dr. Suppan stated that most physicians have employment agreements with their hospital which specify that administrators will not interfere with the physician’s ability to make medical decisions. Dr. Strafford agreed, but stated that administrators can find another justification if they wish to terminate a physician. Dr. Steinbergh opined that physicians who find themselves in these circumstances should remove themselves from the situation. Dr. Suppan commented that avenues are available for the physician to report matters directly to the hospital board when there is a conflict with administration. Dr. Mahajan agreed, but stated that physicians can be shunted out before the matter goes to a board.

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

Dr. Suppan exited the meeting at this time.

PROPOSED STATEMENT ON ANESTHESIOLOGIST ASSISTANT RULE

Ms. Debolt explained that Section 4731-24-04, Ohio Administrative Code, sets out the scope of practice for an anesthesiologist assistant. In 2005, the Ohio Supreme Court ruled that a certain provision of this rule was unconstitutional because it conflicted with statute. Although the Board ceased to enforce that provision, the rule was left unamended for some time. The rule is currently in the process of being amended, but this cannot be accomplished for several months.

Ms. Debolt asked for the Board’s approval of a statement which clarifies that the provision of Section 4731-24-04, Ohio Administrative Code, which states that anesthesiologist assistants cannot perform epidural and spinal anesthetic procedures, is not enforceable. The statement further states that this provision is in the process of being removed.

Dr. Steinbergh moved to approve the proposed statement on the anesthesiologist assistant rule as written. Dr. Bechtel seconded the motion. All members voted aye. The motion carried.

REPORT ON INVESTIGATOR FIREARM TRAINING

Ms. Anderson stated that Board investigators completed training at the Ohio Peace Officers Training

Academy (OPOTA) two weeks ago.

Mr. Edwards reported that 14 investigators underwent a 40-hour class from February 27 to March 2, 2012. The instructors included two full-time OPOTA instructors and two SWAT team members of the Fairborn Police Department, who were also certified OPOTA instructors. Mr. Edwards stated that the first day was spent in the classroom learning the nomenclature of the Glock pistol and how to maintain it. Also, an assistant county prosecutor from Marion County spoke about deadly force issues and civil liability.

Mr. Edwards continued that on the second, third, and fourth days, the investigators field stripped and reassembled their weapons before going to the shooting range. During this time, the investigators shot 800 to 1,000 rounds of ammunition at different targets. One class was held at night so the investigators could shoot in low-light conditions.

On the final day, a written test was administered and all 14 investigators passed; a score of 90% was required to pass the test. Twelve of the investigators passed the test with a perfect 100% score. Mr. Edwards reported one instructor's comment that, in his 27 years as an OPOTA instructor, he had never seen that high a proportion of test takers earn a perfect score. That afternoon, the investigators had to qualify with their firearms and were required to hit 20 out of 25 shots on the target, or 80%. Thirteen of the investigators passed this qualifying course, with two receiving a perfect 100%. One investigator did not pass after three attempts, and will attempt to qualify again next week.

Mr. Edwards stated that the training was intense and the investigators were very supportive and encouraging to each other. Mr. Edwards commented that this training was the same training that any basic police officer in Ohio receives. Mr. Edwards thanked the Board for allowing the investigators to participate in the training.

LICENSURE UPDATE

Ms. Vollmer highlighted some portions of the licensure update she had previously provided to Board members. Ms. Vollmer stated that some technical difficulties have prevented the planned changes to the Medical Board's website, but work continues in that area. Also, the language of the recommendation form is being revised by the staff and will be presented to the Board for approval at a later date. Ms. Vollmer referenced Mr. Whitehouse's earlier statements regarding the Ohio Council of Medical School Deans and stated that one issue they wished to discuss with the Board is the streamlining of the licensure application process for individuals who already hold a training certificate.

Dr. Ramprasad returned to the meeting at this time.

Dr. Strafford exited the meeting at this time.

Ms. Vollmer stated that the Board staff continues to work with the Federation of State Medical Boards (FSMB) to find ways for each group's computer systems to communicate with each other so that data from the FSMB will not need to be data-entered by the licensure staff.

FISCAL REPORT

Ms. Loe stated that the January fiscal report has been provided to Board members. Ms. Loe noted that in January, the Board began to receive the increased massage therapy license renewal fee.

LICENSURE APPLICATION REVIEWSHALE EROSY, M.D.

Dr. Ramprasad stated that Dr. Erosy is from Turkey and has had 22 months of fellowship in the United States in radiology at the Weill Cornell Medical Center in New York. Following her fellowship, Dr. Erosy was a research associate at Brigham and Women's Hospital, Harvard University, and was later appointed attending radiologist at the same institution. Dr. Ramprasad stated that Dr. Erosy is board-certified in radiology in Turkey, as well as board-certified in the United States as of 2010. Dr. Erosy has passed the United States Medical Licensing Examination (USMLE).

Dr. Ramprasad stated that the Group 1 Committee recommends granting equivalency based on Dr. Erosy's time spent teaching and her passage of board certification, and to approve Dr. Erosy's application for licensure.

Dr. Steinbergh moved to deem Dr. Erosy's training and experience in Turkey, her 22 months of fellowship in the United States, and her experience in the United States to be equivalent to 24 months of graduate medical education through the second-year level, and to approve her application for licensure. Mr. Kenney seconded the motion. A vote was taken:

ROLL CALL:	Dr. Steinbergh	- aye
	Dr. Mahajan	- aye
	Dr. Bechtel	- aye
	Dr. Talmage	- aye
	Mr. Kenney	- aye
	Dr. Ramprasad	- aye

The motion carried.

NABIL A. MANNEH, M.D.

Dr. Ramprasad stated that Dr. Manneh is asking for restoration of his Ohio medical license. Dr. Manneh has not engaged in the practice of medicine since 2002. Dr. Ramprasad stated that the Group 1 Committee tabled this matter due to a lack of information on Dr. Manneh's previous practice, including his specialty.

LEGISLATIVE UPDATES

Senate Bill 301/House Bill 467, Healthcare Licensing Boards' Enforcement Powers: Mr. Miller stated that this legislation authorizes the Medical Board to inspect practices which are licensed as pain

management clinics, as well as practices which the Board suspects are unlicensed pain management clinics; a complaint would not be required for the inspection. This legislation would also permit the Board to take disciplinary action against a physician working in a practice which should be licensed as a pain management clinic, but is not.

Mr. Miller continued that the legislation would make a change to the definition of a facility which requires licensure as a pain management facility: Instead of the “treatment of pain or chronic pain” being a primary component of the practice, “treatment of chronic pain” will have to be the primary component. This change represents a move away from acute pain situations.

Lastly, Mr. Miller stated that nursing homes and clinical research programs would be added to the list of entities exempt from the licensure requirement.

Dr. Strafford returned to the meeting at this time.

Dr. Steinbergh stated that she has heard concerns from other physicians that the manner in which Medical Board investigators inspect practices applying for a pain management license is somewhat threatening. Dr. Steinbergh asked if a process could be put in place so that inspections are conducted in a more positive way. Mr. Whitehouse replied that it is never the intent of Board investigators to conduct themselves in a way that would be deemed threatening. Mr. Whitehouse stated that if there is evidence to the contrary, appropriate steps would be taken.

Dr. Steinbergh stated that some physicians are applying for the pain management clinic license from an over-abundance of caution and are uncertain if they truly need the license. Dr. Steinbergh suggested that a conversation with these physicians may help them determine whether they need the license. Dr. Steinbergh further suggested that communication with the physician should occur prior to the inspection so that the physician understands how the inspection process will unfold.

Ms. Anderson stated that she, the investigators, and other staff members have had conversations with physicians who are uncertain if they need the pain management clinic license. Ms. Anderson continued that the inspection process includes making an appointment and explaining what the physician needs to have ready when the investigator arrives. Ms. Anderson stated that patient charts are asked for on the day of the inspection in order to get a more random selection. Dr. Steinbergh asked if a letter is sent the physician prior to the inspection outlining the process. Ms. Anderson replied that no letter is sent. Dr. Steinbergh opined that a letter would be helpful.

Dr. Strafford stated that there is some desirability to not announcing all of the Board’s intentions up front, so that the Board can obtain a clearer picture of the practice as it normally operates rather than how the practitioner would like to present it. Dr. Strafford related one instance in which, during an interview between an investigator and a physician, a staff person brought the physician a stack of prescriptions and asked the physician to sign them; the prescriptions were for patients who had not been examined. Dr. Strafford did not oppose sending the physicians a letter, but felt that the letter should not divulge with exactness everything in the inspection process. Dr. Steinbergh agreed with Dr. Strafford.

Mr. Whitehouse asked what kind of feedback Ms. Anderson has received from investigators regarding possible apprehension, confusion, or fear on the part of the physician. Ms. Anderson replied that when these inspections began last summer, there was some confusion because it was a brand-new process. Ms. Anderson stated that the process has been adjusted in some ways in response to feedback from the investigators and from physicians.

Mr. Kenney opined that informing a physician of exactly what an investigator will be doing and looking for would negate the purpose of the investigation. Mr. Kenney stated that a physician thusly informed would have the opportunity to hide any problems that the investigator would otherwise uncover. Mr. Kenney acknowledged that many physicians would not appreciate not being informed of everything up front, particularly those physicians who may have problems with their practice.

Mr. Miller stated that most of the concerns he has heard stem from the fact that pain management clinic licensure involves dual processes, one from the Medical Board and one from the Pharmacy Board. These dual processes have caused some confusion on the part of physicians.

Dr. Suppan returned to the meeting at this time.

Dr. Steinbergh asked if House Bill 467 contains a specific list of medications. Mr. Miller replied that the first 30 pages of the legislation clarifies references to bath salts made in earlier legislation and categorizes them correctly.

Senate Bill 297/House Bill 438, Clinical Research Certificates: Mr. Miller stated that he provided testimony before the House Health Committee on this subject. Mr. Miller reported that the Chair of the Committee had strong words for the Medical Board and its involvement in the legislative process. The Chair blamed the Medical Board for the prescription drug abuse problem, stated that the Board is not a friend of business and economic development, and asked the Board to be a facilitator in the legislative process rather than a hurdle. Mr. Miller stated that, overall, the testimony went well.

Mr. Miller continued that House Bill 438 was moved to the floor and voted out of the House on the same day. However, Mr. Miller stated that it will be Senate Bill 297 that will be the vehicle for this legislation. Senate Bill 297 had its first hearing yesterday and the Senate is expected to pass it following a second hearing. Mr. Miller stated that the only amendment that was able to be secured was an outline of the renewal process for the clinical research certificate. Otherwise, the legislators were not open to amendments.

Dr. Steinbergh commented that she liked the testimony Mr. Miller provided to the Committee. Dr. Steinbergh expressed continued concern that clinicians who do not meet the Board's standards for licensure will be caring for patients in Ohio under this proposed certificate. Dr. Steinbergh asked if the legislation contains strong language in terms of responsibility for and supervision of these physicians. Mr. Miller replied that the legislation contains some acknowledgement that the clinical research certificate holder will have some level of oversight by the Chair of their department, who will be required to sign an affidavit attesting to the nature of the holder's research. Mr. Miller stated that he preferred stronger language in this regard, but the legislators were not amenable to that. There were also no changes

addressing the Board's concerns regarding informed consent.

Dr. Steinbergh thanked Mr. Miller for his efforts.

House Bill 251, Oriental Medicine: Mr. Miller stated that he and Dr. Strafford met with Representative Schuring, the sponsor of this legislation. Representative Schuring asked that the Board send an amendment request to require the test for spoken English for both acupuncturists and Oriental medicine practitioners. Mr. Miller stated that there will also be a requirement to provide educational materials when the Oriental medicine practitioner provides herbs to the patient. Also, any adverse events that are reported back to the Oriental medicine practitioner must be reported to the Board. The Board will also have rule-making authority with regards to herbal therapies. Mr. Miller stated that the educational requirements are still being developed.

Mr. Miller stated that this legislation will move quickly once the changes are included.

House Bill 417, Patient Notification of Terminated Physicians: Mr. Miller stated that this legislation will amend the Medical Practices Act and require that if a physician is terminated from a hospital, then either the hospital or the physician must provide notice to the physician's patients. Although the legislation says the Medical Board will have oversight in this area, it does not give the Board any enforcement tools to ensure compliance from the hospital. The Board has the ability to take disciplinary action against the physician, but the physician can only give notice if the hospital provides a list of patient names and addresses.

Dr. Steinbergh supported this legislation, stating that patient care is disrupted without proper notification. Dr. Steinbergh stated that oftentimes when a patient learns that his or her physician has been terminated, the hospital will not inform them of where the physician's practice has relocated. Dr. Bechtel stated that this legislation was stimulated by the Columbus Medical Association following the closure of many hospital-owned practices by a hospital system. Dr. Bechtel stated that there was no notification and a lack of continuity of care for many patients resulted. It was also very difficult for patients to locate their medical records.

House Bill 421, Physicians Civil Immunity: Mr. Miller stated that this legislation would provide physicians with some civil immunity for reporting a patient's use or abuse of a drug or other conditions that may impede the patient's driving abilities. Mr. Miller stated that previously, this immunity only extended to those driving commercial vehicles. Mr. Miller stated that the Northern Ohio Medical Association supports this legislation and he is unaware of any opposition.

Senate Bill 83, Advanced Practice Nurse Schedule II Prescribing Authority: Mr. Miller stated that this legislation was signed into law on March 9, 2012, and will go into effect 91 days from that date. The Nursing Board's Committee on Prescriptive Governance has been holding special meetings to prepare for the implementation of this law, and Dr. Bechtel will be working with the Committee on that. Mr. Miller noted that House Bill 284 will give Schedule II prescribing authority to physician assistants, so the Medical Board should be prepared to undergo a similar process.

Telemedicine: Mr. Miller stated that he has provided the Board members with a 2002 Federation of State Medical Boards (FSMB) statement about the use of the internet in medical practices. Mr. Miller stated that he and Dr. Strafford met with Senator Burke and had a very good preliminary conversation on this subject. Dr. Strafford agreed that the meeting was positive and stated that Senator Burke understands the potential abuse and lack of accountability surrounding this issue.

Mr. Miller stated that Cardinal Health has purchased 500 HealthSpot kiosks. Mr. Miller stated that he is in the process of arranging a meeting with the medical director of Central Ohio Primary Care (COPC) and a representative from HealthSpot Kiosk to see how they are currently using the system.

Dr. Steinbergh asked if COPC is currently using the kiosk in a pilot program. Mr. Miller replied that COPC currently has a kiosk in their lobby which is linked to physicians' offices upstairs within the same building. Dr. Steinbergh expressed interest in attending the meeting to see how the kiosks operate. Mr. Miller commented that Dr. Ted Wymyslo, Director of the Ohio Department of Health, has seen the kiosks and is in favor of them.

Mr. Miller stated that Dr. Strafford and Dr. Ramprasad participated in a conference call with the Ohio State Medical Association, the Ohio Osteopathic Association, a family practice group, and a psychiatric group to discuss the issue of telemedicine. Meetings have already been held with the Board of Nursing and the Board of Pharmacy to identify statutes and rules that will be affected by telemedicine.

Mr. Kenney stated that the kiosks represent a huge potential income stream and investors are very eager to become part of it. Mr. Kenney stated that there is no question that the kiosks will become a wide-spread reality, particularly in pharmacies. Mr. Kenney stated that the kiosks are very inexpensive, take up a very small footprint, and costs are recouped in a very short time. Mr. Miller agreed that this technology is inevitable and the Board is working to ensure that standards and accountability are in place. Dr. Steinbergh stated that she does not oppose new vehicles of treatment, as long as patient care is not compromised. Mr. Kenney agreed.

Intractable Pain Rules: Mr. Miller stated that the process of reviewing the intractable pain rules has begun. A multi-specialty panel is advising the Board, and the panel's recommendations will be brought to the Board once they are made. Mr. Miller hoped that this process will be completed by the end of May.

Dr. Suppan exited the meeting at this time.

PROPOSED AMENDMENTS TO RULE 4731-1-12, OAC

Ms. Debolt stated that when the Board administered its own massage therapy examination, the applicant paid a fee to sit for the examination; if the applicant passed and met all other requirements for licensure, then they would be licensed without any additional payment. A new law effective January 2012 allowed that Board to cease using its own examination and to instead accept the Massage and Bodywork Licensing Examination (MBLEx).

Ms. Debolt continued that the Board has proposed a change of rule which would say that if an applicant

applied to take the final Medical Board-administered examination in December 2011 but was unable to sit for it because they had not yet graduated from their training program, then that applicant's fee will be held by the Board and, if they passed the MBLEx at a later time, that fee would be credited to them. The Joint Committee on Agency Rule Review (JCARR) pointed out this this provision conflicts with statute, which states that everyone must pay an application fee for a certificate to practice. This conflicted with concerns expressed by the Common Sense Initiative (CSI), which stated that people will lose money over this. CSI was not assured by the Board's statement that even if this provision is removed from the rule, the fee would still be credited to the applicant administratively. CSI has opined that all of the money should be refunded to the 53 applicants in question.

Ms. Debolt stated the refunding the fees would mean that the Board will not recover any of the costs of having staff review those 53 applications, including those of the 11 applicants who had graduated and could have sat for the December 2011 examination but chose not to. Ms. Debolt stated that these fees total \$13,250.00 and will come out of the Board's spending authority, which will impact the Board's ability to pay for expenses such as court reporters and medical experts.

Ms. Debolt opined that the Board has very little choice in this matter. Ms. Debolt stated that a draft response to CSI has been given to the Board members which states that the Board will refund the application fees. The draft response also includes a footnote noting that this action will have a fiscal impact.

Dr. Steinbergh moved to approve the draft response as written. Dr. Strafford seconded the motion. All members voted aye. The motion carried.

Dr. Steinbergh asked if the licensure application documents can be revised so that an administrative cost fee comes out of the application fee if the applicant fails to sit for an examination. Ms. Vollmer answered that under the new rules, a person cannot apply for licensure until after they have passed an examination.

PHYSICIAN ASSISTANT MATTERS

FORMULARY REVIEW

REQUEST TO REVIEW/ADD SCHEDULE II MEDICATIONS TO P.A. FORMULARY

Dr. Talmage stated that the facts and comparisons were reviewed for all the medications in the physician assistant formulary and will be presented to the Board at a later date.

REQUEST TO ADD BOTOX TO P.A. FORMULARY

Dr. Talmage stated that the request to add Botox to the physician assistant formulary was considered at the request of a neurologist who is using Botox injections to treat migraine headaches. Dr. Talmage stated that the neurologist will be informed that he should look at and obey the formulary. Dr. Talmage also stated that the neurologist wanted physician assistants to do the injections. Dr. Talmage stated that since the neurologist is a hospital-based physician, the decision to allow physician assistants to do the injections

belongs with the hospital and is outside the Board's authority.

REQUEST TO ADD XARELTO TO P.A. FORMULARY

Dr. Talmage stated that Xarelto, a factor Xa inhibitor, is an anti-coagulant that is not easily reversible. It has been recommended that Xarelto be added to the physician assistant formulary as a physician-initiated medication only.

REVIEW OF SPECIAL SERVICES APPLICATIONS

OHIO PAIN AND REHABILITATION SPECIALISTS

Dr. Talmage explained that Ohio Pain and Rehabilitation Specialists have submitted a special services application for trigger point injection. The Group 2 Committee has recommended approving this request, conditioned on their consent to removing the phrase "during the training period" from the second sentence of the application. This will result in the physician seeing the patient and making the decision for the initial injection at all times, not just during the training period.

Dr. Talmage moved to approve the special services application from Ohio Pain and Rehabilitation Specialists for trigger point injections, conditioned upon their consent to removing the phrase "during the training period" from the second sentence of the application. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Dr. Talmage stated that Ohio Pain and Rehabilitation Specialists has also submitted a special services application for intramuscular injections. Dr. Talmage stated that intramuscular injections are a standard privilege of physician assistants, and therefore no action from the Board is required.

Dr. Talmage stated that Ohio Pain and Rehabilitation Specialists has also submitted a special services application for Botox injections. Dr. Talmage stated that this subject was tabled and will not be considered today.

BARRETT & GEISS DERMATOLOGY

Dr. Talmage stated that Barrett & Geiss Dermatology has submitted a special services application for incision of simple lesions. The Group 2 Committee has recommended approval of this application, as amended.

Dr. Talmage moved to approve the special services application from Barrett & Geiss Dermatology for incision of simple lesions, as amended. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

APPROVAL OF URGENT CARE SETTING

Dr. Talmage stated that the Group 2 Committee asked to be provided with further information before

approval is given. Specifically, the Committee wished to know how many other physicians are with the physician assistants and what level of supervision they have while working in the urgent care clinic. Therefore, this topic was tabled.

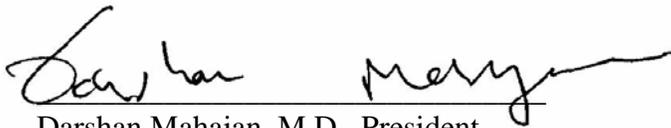
REVISION TO PROPOSED RULE 4731-1-16, OAC

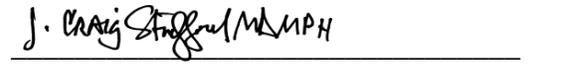
Ms. Debolt stated that while updating the curriculum requirements for massage therapy schools, one commenter at the public hearing noted that the proposed change refers to contact hours. The commenter stated that the rule should instead refer to semester or quarter hours. Otherwise, students may not be eligible for full financial aid under U.S. Department of Education regulations.

Ms. Debolt suggested that the entire language of the proposed rule should be changed to replace contact hours with semester and quarter hours. Ms. Debolt stated that she and Ms. Vollmer will discuss this issue with representatives from all the massage therapy schools in the state to determine the possible impact before proceeding.

Thereupon at 11:00 a.m., the March 15, 2012, meeting of the State Medical Board of Ohio was duly adjourned by Dr. Mahajan.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio meeting on March 14-15, 2012, as approved on April 11, 2012.


Darshan Mahajan, M.D., President


J. Craig Strafford, M.D., M.P.H., Secretary

(SEAL)

