

MINUTES**THE STATE MEDICAL BOARD OF OHIO****February 13, 2013**

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

Also present were: Kimberly Anderson, Interim Executive Director; Susan Loe, Assistant Executive Director, Program Management and Operations; Michael Miller, Interim Assistant Executive Director, Licensure and Renewal; Sallie J. Debolt, General Counsel; Joan K. Wehrle, Education & Outreach Program Manager; Rebecca Marshall, Chief Enforcement Attorney; Marcie Pastrick, Karen Mortland, Mark Blackmer, Dan Zinsmaster, and Cheryl Pokorny, Enforcement Attorneys; Kyle Wilcox, Melinda Snyder, and Heidi Dorn, Assistant Attorneys General; Gregory Porter, Acting Chief Hearing Examiner; Danielle Blue, Hearing Examiner; Danielle Bickers, Compliance Supervisor; Annette Jones, Compliance Officer; Kay Rieve, Administrative Officer, Nicole Weaver, Chief of Licensure; Barbara Jacobs, Senior Executive Staff Attorney; Jacqueline A. Moore and Fonda Brooks, Public Information Assistants; and Benton Taylor, Executive Assistant to the Executive Director.

MINUTES REVIEW

Dr. Madia moved to approve the draft minutes of the January 9-10, 2013, Board meeting, as written. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

EXECUTIVE SESSION

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

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

The motion carried.

Pursuant to Section 121.22(G)(3), Ohio Revised Code, the Board went into executive session at 1:02 p.m., with Ms. Anderson, Ms. Loe, Ms. Debolt, Ms. Wehrle, Ms. Marshall, the Enforcement Attorneys, the Assistant Attorneys General, Ms. Bickers, Ms. Jones, Ms. Rieve, Ms. Weaver, Ms. Jacobs, Ms. Moore, Ms. Brooks, and Mr. Taylor in attendance.

The Board returned to public session.

FINDINGS, ORDERS, AND JOURNAL ENTRIES

Dr. Steinbergh noted that Mr. Gonidakis is currently absent because he is meeting with representatives from the Governor's office on Medical Board matters. To give Mr. Gonidakis a chance to participate in the Reports and Recommendations, Dr. Steinbergh stated that the topic of Findings, Orders and Journal Entries will be addressed at this time.

Dr. Steinbergh 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. Steinbergh stated that these items are non-disciplinary in nature. Therefore, all Board members may vote.

SAKA ROTIMI DISU, M.D., Case No. 12-CRF-131

Dr. Steinbergh noted that Dr. Disu made a request for hearing, but the request was not received in a timely manner.

Dr. Madia moved to find that the allegations as set forth in the November 20, 2012 Notice in the matter of Saka Rotimi Disu, 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 his application for a license to practice medicine and surgery in Ohio. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Mr. Kenney stated that in September 2012, Dr. Disu submitted an application to practice medicine and surgery in Ohio. Dr. Disu passed Step I of the United States Medical Licensing Examination (USMLE) on the ninth attempt, Step II on the twelfth attempt, and Step III on the seventh attempt. In accordance with the Board's rules on licensure eligibility, Mr. Kenney agreed that Dr. Disu's application should be denied.

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

ROLL CALL:	Dr. Strafford	- aye
	Dr. Bechtel	- aye
	Dr. Mahajan	- aye

Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Ms. Elsass - aye
Mr. Kenney - aye

The motion carried.

CHRISTINA ANNA STASIUK, D.O., Case No. 12-CRF-097

Dr. Madia moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Christina Anna Stasiuk, D.O., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, approving her application for a license to practice osteopathic medicine and surgery in Ohio, provided that she takes and passes the Comprehensive Osteopathic Medical Variable-Purpose Examination (COMVEX) or the American Osteopathic Association (AOA) internal medicine examination within one year of November 6, 2012. Ms. Elsass seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Steinbergh stated that Dr. Stasiuk has not been engaged in the practice of medicine for more than two years. Dr. Steinbergh agreed that Dr. Stasiuk's license should be approved, contingent upon her passing the COMVEX examination or AOA internal medicine examination within one year of November 6, 2012.

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

ROLL CALL:

Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Ms. Elsass - aye
Mr. Kenney - aye

The motion carried.

JESSICA ANN GRAU, Case No. 12-CRF-140

Dr. Madia moved to find that the allegations as set forth in the November 20, 2012 Notice in the matter of Jessica Ann Grau have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, denying her application for a license to practice massage therapy in Ohio. Ms. Elsass seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Mahajan stated that Ms. Grau does not hold a diploma or certificate from a school or institution that has a Certificate of Good Standing from the Medical Board. Further, Ms. Grau fails to meet the Board's required course instruction and she has not held a license to practice massage therapy in another state for at least five preceding years. Dr. Mahajan noted that Ms. Grau's course of instruction included 225 hours of anatomy, physiology, and pathology, while 4731-1-16, Ohio Administrative Code, requires 325 hours in this area.

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

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

The motion carried.

STEVE S. KISHIMOTO, Case No. 12-CRF-132

Dr. Bechtel moved to find that the allegations as set forth in the November 20, 2012 Notice in the matter of Steve S. Kishimoto have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, denying his application for a license to practice massage therapy in Ohio. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Ramprasad stated that in September 2012, Mr. Kishimoto submitted an application for a license to practice massage therapy in Ohio. Dr. Ramprasad stated that Mr. Kishimoto's course of instruction does not meet the Board's requirements under 4731-1-16, Ohio Administrative Code. Though Mr. Kishimoto holds a license to practice massage therapy in Hawaii, he has not held that license for at least five preceding years.

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

ROLL CALL:	Dr. Strafford	- aye
	Dr. Bechtel	- aye
	Dr. Mahajan	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye

Dr. Madia - aye
Ms. Elsass - aye
Mr. Kenney - aye

The motion carried.

WENZHONG MA, Case No. 12-CRF-098

Dr. Madia moved to find that the allegations as set forth in the November 20, 2012 Notice in the matter of Wenzhong Ma have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, denying his application for a license to practice massage therapy in Ohio. Dr. Bechtel seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Madia stated that Mr. Ma does not hold a diploma or certificate from a school or institution that has a Certificate of Good Standing from the Medical Board. Further, Mr. Ma fails to meet the Board's required course instruction and he has not held a license to practice massage therapy in another state for at least five preceding years.

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

ROLL CALL:

Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Mahajan - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Madia - aye
Ms. Elsass - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion carried.

JUNFENG SUN, Case No. 12-CRF-108

Dr. Madia moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Junfeng Sun have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, denying his application for a license to practice massage therapy in Ohio. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Ms. Elsass stated that Mr. Sun submitted an application for a license to practice massage therapy in Ohio in

August 2012. Ms. Elsass stated that Mr. Sun does not hold a diploma or certificate from a school or institution that has a Certificate of Good Standing from the Medical Board. Further, Mr. Sun fails to meet the Board's required course instruction and he has not held a license to practice massage therapy in another state for at least five preceding years.

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

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

The motion carried.

BIN ZOU, Case No. 12-CRF-109

Dr. Bechtel moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Bin Zou have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, denying his application for a license to practice massage therapy in Ohio. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Mr. Kenney stated that Mr. Zou submitted an application for a license to practice massage therapy in Ohio in August 2012. Mr. Kenney stated that Mr. Zou does not hold a diploma or certificate from a school or institution that has a Certificate of Good Standing from the Medical Board. Further, Mr. Zou fails to meet the Board's required course instruction and he has not held a license to practice massage therapy in another state for at least five preceding years.

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

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

The motion carried.

KRISTINA LOUISE HEMMELGARN, M.T., Case No. 12-CRF-099

Dr. Steinbergh noted that Ms. Hemmelgarn made a request for hearing, but that request was later withdrawn.

Dr. Madia moved to find that the allegations as set forth in the November 6, 2012 Notice in the matter of Kristina Louise Hemmelgarn, M.T., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, approving her application for restoration of her license to practice massage therapy in Ohio, provided that she takes and passes the Massage and Bodywork Licensing Examination (MBLEx) within six months of November 6, 2012. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Ramprasad stated that in November 2012, the Board notified Ms. Hemmelgarn that the Board proposed to approve her application for restoration of her massage therapy license, provided she take and pass the MBLEx within six months. Dr. Ramprasad noted that Ms. Hemmelgarn has not practiced massage therapy for more than two years.

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

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

The motion carried.

Dr. Ramprasad noted that the emails exchanged between Ms. Hemmelgarn and Hearing Examiner Porter, included in the Board's materials, show that the Board cares about the matters before it and that Mr. Porter went to extra lengths to accommodate Ms. Hemmelgarn.

KATHIE ANNE STITAK, M.T., Case No. 12-CRF-142

Dr. Bechtel moved to find that the allegations as set forth in the December 6, 2012 Notice in the matter of Kathie Anne Stitak, M.T., have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective upon mailing, approving her application for restoration of her license to practice massage therapy in Ohio, provided that she takes and passes the Massage

and Bodywork Licensing Examination (MBLEx) within six months of December 6, 2012. Dr. Madia seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Mahajan stated that the proposed order will approve Ms. Stitak's application for restoration, provided she take and pass the MBLEx. Dr. Mahajan noted that Ms. Stitak has not practiced massage therapy for more than two years.

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

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

The motion carried.

APPLICANTS FOR LICENSURE

Dr. Madia 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," the physician assistant applicants listed in Exhibit "B," the massage therapy applicants listed in Exhibit "C," and the acupuncturist applicants listed in Exhibit "D." Ms. Elsass seconded the motion. A vote was taken:

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

The motion carried.

REPORTS AND RECOMMENDATIONS

Dr. Steinbergh announced that the Board would now consider the Reports and Recommendations

appearing on its agenda.

Dr. Steinbergh 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: Shaban A. E. Mahmoud, M.D.; and Jessica Marie Soto.

A roll call was taken:

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

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

Dr. Steinbergh noted that, in accordance with the provision in Section 4731.22(F)(2), Ohio Revised Code, specifying that no member of the Board who supervises the investigation of a case shall participate in further adjudication of the case, the Secretary and Supervising Member must abstain from further participation in the adjudication of any disciplinary matters. In the matters before the Board today, Dr. Strafford served as Secretary, Dr. Bechtel served as Supervising Member, and Dr. Talmage served as Secretary and/or Acting Supervising Member.

Dr. Steinbergh 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.

SHABAN A. E. MAHMOUD, M.D., Case No. 12-CRF-022

Dr. Steinbergh directed the Board's attention to the matter of Shaban A. E. Mahmoud, M.D. She advised

that objections to Ms. Blue's Report and Recommendation were filed and were previously distributed to Board members. However, the objections were not filed in a timely manner. Dr. Steinbergh asked if any member wished to make a motion regarding Dr. Mahmoud's objections.

Dr. Mahajan moved to accept Dr. Mahmoud's objections. Mr. Kenney seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Madia opined that Dr. Mahmoud had enough time to file objections to the Report and Recommendation. Dr. Madia opined that the objections should not be accepted.

Dr. Mahajan asked how late the objections were. Ms. Jacobs answered that the objections were one day late. Dr. Mahajan opined that being one day late is not a significant matter. Dr. Steinbergh stated that the rule regarding the filing of objections is an important one and the Board should abide by it. Dr. Steinbergh agreed with Dr. Madia, stating that if one day late is acceptable, then it will be argued that two days late is also acceptable, then three days, and so forth.

A vote was taken on Dr. Mahajan's motion to accept the objections:

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

The motion to accept the objections did not carry.

Dr. Steinbergh continued that a request to address the Board has been timely filed on behalf of Dr. Mahmoud. Five minutes will be allowed for that address.

Dr. Mahmoud was represented by his attorney, Gregory Peterson.

Mr. Peterson stated that, in fact, the objections to the Report and Recommendation were delivered on the tenth day after their receipt of the Report and Recommendation. Ms. Debolt stated that there is no appeal to the Board's decision regarding Dr. Mahmoud's objections except through the courts.

Mr. Peterson stated that he wished to highlight three points from Dr. Mahmoud's extensive objections. First, the report from the State's expert, Keyvan Ravakhah, M.D., was extensively identified and clarified to be factually inaccurate and contained many mistakes and misunderstandings, which Dr. Ravakhah acknowledged in his testimony. Mr. Peterson stated that the Hearing Examiner struggled with the objection to admitting Dr. Ravakhah's report before ultimately deciding to accept the report.

Second, Dr. Mahmoud's expert, Frank A. Kunkel, M.D., testified that Dr. Mahmoud's practice was within the standard of care. Mr. Peterson opined that the Hearing Examiner did not consider Dr. Kunkel's report appropriately in the Report and Recommendation.

Third, Mr. Peterson stated that Dr. Mahmoud's objections had cited four previous decisions by the Medical Board which were factually similar to Dr. Mahmoud's case but did not result in permanent revocation of license, as is proposed for Dr. Mahmoud. Instead, these previous cases involved extensive remedial measures such as consent agreements, probation, and suspension. Mr. Peterson stated that the facts of Dr. Kay's case were virtually identical to Dr. Mahmoud's, and that case resulted in a suspension followed by probation. Mr. Peterson noted that Dr. Mahmoud has never been the subject of any prior disciplinary action by the Board and opined that nothing in the hearing record is aggravating enough to warrant permanent revocation.

Dr. Mahmoud stated that he is fully aware of the prescription drug epidemic in the United States and that more people die from prescription drug overdose than from heroin and cocaine combined. Dr. Mahmoud stated that he made every effort in his practice to prevent contributing to the prescription drug epidemic. Dr. Mahmoud stated that his policy of the last three years is to refuse walk-in patients, patients under the age of 25, and patients from outside a 60-mile radius of his office. Dr. Mahmoud stated that patients must apply to be a member of his practice, fill out a demographic sheet, sign a release of information form, and sign a pain management agreement.

Dr. Mahmoud continued that he practices within the standard of care and monitors his patients very closely with random urine screens and random pill counts. Dr. Mahmoud stated that when a red flag appears, he addresses it. Dr. Mahmoud stated that he acts on any sign of drug abuse or diversion, noting that he terminated eight of the 10 patients that were of concern to the Board. Dr. Mahmoud further noted that all of his patients had been seen previously by another doctor who had treated their chronic pain with opioid therapy.

Dr. Mahmoud stated that he is not aware of any patient in the last 20 years of his practice who had a bad outcome due to his treatment. Dr. Mahmoud stated that he is always looking for ways to do things better and he had recently attended two courses at Case Western Reserve University on record keeping and controlled substance management. Dr. Mahmoud stated that he is open to any recommendation to improve his patient care.

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

Mr. Wilcox stated that Dr. Mahmoud either willfully ignored the standard of care or is incapable of practicing within the standard of care in an area of medicine in which he has no formal training. Mr. Wilcox stated that both experts essentially agreed that Dr. Mahmoud failed to properly evaluate and document appropriate care for these 10 patients throughout their course of treatment to determine if they were appropriate for chronic pain management. Mr. Wilcox stated that, in fact, these patients were not appropriate candidates for such treatment and Dr. Mahmoud failed to take even basic steps to discover that.

Mr. Wilcox noted that Dr. Mahmoud's expert, Dr. Kunkle, wrote in his report that Dr. Mahmoud seems to have admitted almost anyone to his pain clinic regardless of age or medical complaint.

Mr. Wilcox continued that Dr. Mahmoud's practice only accepted cash payment and did not accept insurance. Mr. Wilcox further noted that Dr. Mahmoud never obtained patient records from previous treatment providers, which must be done before embarking on long-term chronic pain treatment. The patients reported that they had been on opioid medications from previous physicians, but Dr. Mahmoud did nothing to discover if that was actually the case. Mr. Wilcox stated that some patients provided MRI's that were allegedly obtained in Florida, but both Dr. Ravakhah and Dr. Kunkle testified that the MRI's did not necessarily indicate a legitimate presence of pain.

Mr. Wilcox stated that the 10 patient records in question show that Dr. Mahmoud does not follow the Board's rules for treatment of intractable pain. Specifically, the patient records included no individualized treatment plan and no documentation of the reason for initiating long-term opioid treatment for any of the patients. Mr. Wilcox noted that Dr. Mahmoud always began treatment with two short-term narcotics, namely Oxycodone and Percocet, which even his own expert testified is not acceptable. Mr. Wilcox stated that there is no documentation of physical examinations, especially on follow-up visits.

Mr. Wilcox stated that Dr. Mahmoud ignored numerous red flags. Mr. Wilcox stated that, though Dr. Mahmoud claims to assess patients for risk in his current practice, there is no evidence that he did so in the timeframe in question, 2010-2012. Mr. Wilcox stated that many of his patients came from Mansfield, Ohio, more than a two-hour round-trip from Dr. Mahmoud's office. Mr. Wilcox noted that many of his patients broke their drug treatment contracts by testing positive for drugs not prescribed by Dr. Mahmoud or negative for drugs that were prescribed by Dr. Mahmoud. Dr. Mahmoud's own expert stated, "The most obvious sin was the fact that Dr. Mahmoud obtained toxicology tests for patients 1-10 and routinely explained away any inappropriate results with stories from the patients."

Mr. Wilcox opined that this case comes down to Dr. Mahmoud's judgment. Mr. Wilcox opined that Dr. Mahmoud does not have the judgment necessary to practice medicine in Ohio. Mr. Wilcox agreed with the Proposed Order of permanent revocation.

Dr. Madia moved to approve and confirm Ms. Blue's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Shaban A. E. Mahmoud, M.D. Dr. Ramprasad seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Madia briefly reviewed Dr. Mahmoud's education and career. Dr. Madia stated that in 2008, Dr. Mahmoud decided to leave his internal medicine practice in Lima, Ohio, and started moonlighting in Mount Vernon, Ohio. In 2010, Dr. Mahmoud opened a pain treatment clinic in Dublin, Ohio, named Global Health Advocates.

Dr. Madia briefly reviewed the backgrounds of the two experts in this case. The State's expert, Dr. Ravakhah, has served as the head of the internal medicine department at Huron Hospital, medical director

of the residency program, and director of palliative medicine. Dr. Mahmoud's expert, Dr. Kunkle, has served as chief of cardiothoracic anesthesia at a hospital in Altoona, Pennsylvania, has conducted research as an associate professor at the University of Pittsburgh, and is board certified in anesthesiology and palliative medicine.

Dr. Madia continued that, according to his testimony, Dr. Mahmoud decided to open a pain management clinic because he had seen many chronic pain patients in his internal medicine practice whom he felt were not being treated properly. Dr. Mahmoud testified that he intended to provide chronic pain treatment to indigent patients and patients with no insurance. However, Dr. Madia noted that Dr. Mahmoud's clinic only accepted cash and charged \$320.00 for initial visits and \$220.00 for follow-up visits. Dr. Madia opined that these rates are not indicative of a desire to treat indigent patients.

Dr. Madia further stated that Dr. Mahmoud accepted walk-in patients at that time, though he claims he no longer does so. Dr. Mahmoud had testified that he saw about 10 patients per day. Dr. Madia noted that despite this light patient load, Dr. Mahmoud still did not have enough time to perform and document a true physical examination. In addition, patients were coming from outside the Columbus area to see Dr. Mahmoud; some patients had primary care physicians in Florida and North Carolina. Dr. Madia stated that none of Dr. Mahmoud's new patients had any prior medical records.

Though Dr. Mahmoud claims to have faxed requests for records to the patients' primary care physicians, there were no copies of faxes in the medical records. Dr. Mahmoud also claimed that he always obtained a pharmacy print-out of the patients' prior medications, but there is no such documentation in the charts. Dr. Madia stated that according to Dr. Mahmoud's testimony, he would tell new patients that if they could not provide prior medical records and pharmacy print-outs, then Dr. Mahmoud would only treat them as an acute pain patient and would not prescribe narcotics. However, the records of the 10 patients in question show that on the first visit, Dr. Mahmoud prescribed short-acting narcotics around the clock, which is not the standard of practice without a proper physical examination and proper risk assessment.

Dr. Madia stated that when some patients returned for a follow-up visit one month later, they reported that their pain had reduced from an eight or nine on a 10-point scale to a two or three. Despite this, Dr. Mahmoud would increase the patient's dose or add another narcotic, namely methadone, on top of the previous narcotic. Dr. Madia stated that it makes no sense to increase a patient's narcotics or add a new narcotic when they report that their pain has improved.

Dr. Madia stated that Dr. Mahmoud ordered urine toxicology tests on his patients that showed different medications than Dr. Mahmoud had prescribed and, in some cases, were positive for cocaine or marijuana. Despite the fact that the patients had signed pain contracts mandating action in such cases, Dr. Mahmoud took no action and did not refer the patients to an addiction specialist. Dr. Madia noted that Dr. Mahmoud has no training in pain management and commented that pain specialists provide more treatments than simply prescribing narcotics.

Mr. Gonidakis entered the meeting at this time.

Dr. Madia stated that, looking at the case as a whole, he has no doubt that Dr. Mahmoud practiced below

the standard of care. Dr. Madia noted that both experts in this case agreed that Dr. Mahmoud practiced below the standard of care and had very poor documentation. Dr. Madia stated that all the facts in this case lead him to support the Proposed Order of permanent revocation.

Dr. Steinbergh noted that Mr. Gonidakis joined the meeting during this discussion. Dr. Steinbergh asked whether Mr. Gonidakis 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: Shaban A. E. Mahmoud, M.D.; and Jessica Marie Soto. Mr. Gonidakis replied affirmatively. Dr. Steinbergh asked whether Mr. Gonidakis 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. Mr. Gonidakis answered affirmatively.

Dr. Steinbergh stated that she has reviewed the records in this case and expressed great concern about Dr. Mahmoud's lack of judgment and lack of documentation. Dr. Steinbergh agreed with Dr. Madia that permanent revocation is appropriate in this case.

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

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

The motion to approve carried.

JESSICA MARIE SOTO, Case No. 12-CRF-056

Dr. Steinbergh directed the Board's attention to the matter of Jessica Marie Soto. She advised that objections were filed and were previously distributed to Board members. Ms. Blue was the Hearing Examiner.

Dr. Steinbergh stated that Ms. Soto has made a request to address the Board, but the request was not filed in a timely manner. Dr. Steinbergh asked if any member wished to make a motion regarding Ms. Soto's request to address.

Dr. Mahajan moved to grant Ms. Soto's request to address the Board. Mr. Kenney seconded the motion. A vote was taken:

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

The motion carried.

Dr. Steinbergh stated that five minutes will be allowed for Ms. Soto's address.

Ms. Soto stated that she made a terrible decision in 2006 to traffic marijuana. Consequently, Ms. Soto was sentenced to 30 days in jail, three years of probation, and had to pay a large fine. Ms. Soto stated that she began GED classes while serving her jail sentence. Following the completion of her GED, Ms. Soto began college but could not complete it due to lack of an income. Ms. Soto stated that she later went to massage therapy school, which is something she had always wanted to do.

Ms. Soto stated that she is trying to work through things and make a better life for herself and her children. Ms. Soto stated that she is willing to do anything the Board requests in order to become a licensed massage therapist in Ohio.

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

Ms. Snyder reiterated that Ms. Soto has two felony convictions for drug trafficking for selling marijuana. Ms. Snyder opined that Ms. Soto was very honest and forthcoming in her hearing. Ms. Snyder believed that Ms. Soto will do what is asked of her and she supported the Proposed Order.

Dr. Madia moved to approve and confirm Ms. Blue's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Jessica Marie Soto. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Ms. Elsass stated that this case is based on allegations that in September 2006, Ms. Soto pleaded guilty to and was found guilty of two felony counts of trafficking, for which she served 30 days of incarceration and three years of community control. Ms. Soto also paid a large fine. Ms. Soto graduated from the Institute of Therapeutic Massage in Ottawa, Ohio, in March 2010. Since that time, Ms. Soto has been employed at a Subway restaurant and, since June 2012, has been employed as an assistant manager at Padrone's Pizza.

Ms. Elsass stated that Ms. Soto applied for a license to practice massage therapy in Ohio. Ms. Elsass noted that Ms. Soto was very honest and answered "yes" to the question regarding being "charged with, convicted of, sentenced for, or pled guilty or no contest to, or any charges pending against you, for any

felony, misdemeanor or any other offence other than minor traffic violation.” Ms. Elsass further noted that Ms. Soto submitted an explanation that she had grown up in a rough environment and had had an unhealthy relationship with someone who was dealing drugs. Ms. Soto had explained that she had learned from her mistakes and realized that living in that lifestyle was not healthy or safe for her.

Ms. Elsass continued that Ms. Soto completed her GED in 2007, completed 50 hours of community service, attended addiction classes and classes at a community college, and underwent random urine screens for one year. A letter from Ms. Soto’s parole officer stated that she was given early release from supervision based on his recommendation.

Ms. Elsass stated that Ms. Soto has worked hard to change her life. Ms. Elsass stated that the State has some concern because Ms. Soto has reconciled with her boyfriend, who is also the father of her children, and therefore the Hearing Examiner recommends that the Board monitor Ms. Soto for a period of time to ensure she continues on the right path. The Proposed Order would grant Ms. Soto’s license, suspend it for at least 30 days, require a personal ethics course as a condition for reinstatement of her license, and establish a probationary period of at least two years. Ms. Elsass stated that Ms. Soto has agreed with these recommendations. Ms. Elsass stated that she supports the Proposed Order.

Dr. Steinbergh agreed with Ms. Elsass and stated that the clients Ms. Soto will see rely heavily on the medical board to license qualified and ethical massage therapists. Dr. Steinbergh opined that Ms. Soto will be successful and advised her not to compromise her value system.

Dr. Ramprasad expressed appreciation for where Ms. Soto has come from and what she has done. Dr. Ramprasad thanked Ms. Soto for her forthrightness.

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

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

The motion to approve carried.

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

BRIAN D. HEIM, 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. Madia moved to send the Citation Letter to Dr. Heim. Dr. Mahajan seconded the motion. A vote was taken:

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

The motion to send carried.

MAHENDRAKUMAR CHIMAN SHAH, 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. Madia moved to send the Citation Letter to Dr. Shah. Ms. Elsass seconded the motion. A vote was taken:

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

The motion to send carried.

RATIFICATION OF SETTLEMENT AGREEMENTS

JAMIE LYNNE GLADDEN, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE MEDICINE AND SURGERY

Dr. Madia moved to ratify the Proposed Permanent Surrender with Dr. Gladden. Ms. Elsass

seconded the motion. A vote was taken:

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

The motion to ratify carried.

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

Dr. Steinbergh noted that this matter has come before the Board because the physician has no computer in his office and has never used the Ohio Automated Rx Reporting System (OARRS). Dr. Steinbergh asked if there is any other way for a physician to access OARRS. Ms. Marshall replied that a physician can check OARRS on any computer, including a computer at a public library, as long as the physician has applied for access with the Board of Pharmacy.

Dr. Madia opined that if this set of facts had come to the Board as a Report and Recommendation, the Board would not permanently revoke the physician's license. Dr. Steinbergh pointed out that the physician stipulates that he operates a medical practice wherein he has treated patients for chronic pain on a protracted basis with controlled substances. Ms. Marshall stated that she cannot provide the Board with the background facts of this case, but noted that the Secretary and Supervising Member are always consulted on negotiated settlements and they have the full factual picture. Ms. Marshall commented that physicians do not normally agree to permanently surrender their license.

Mr. Kenney asked for the age of the practitioner. Ms. Marshall was uncertain of the practitioner's exact age, but estimated that he was in his 70's. Mr. Kenney agreed with Dr. Madia that the proposed Permanent Surrender seems harsh. Mr. Kenney asked if a physician is unable to practice medicine if he or she cannot use a computer. Ms. Anderson stated that under House Bill 93, physicians are allowed to delegate up to three non-licensed individuals to check OARRS on their behalf.

Dr. Madia moved to ratify the Proposed Permanent Surrender with Dr. Beyer. Ms. Elsass seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Ramprasad opined that this current case is acceptable because the physician has agreed to it. However, Dr. Ramprasad echoed the same concerns raised by other members. Dr. Ramprasad speculated that a

physician in a similar circumstance may be a very good physician and may be willing to surrender his or her prescriptive authority for controlled substances rather than surrender his or her medical license.

Dr. Steinbergh opined that this is a good discussion for the Board to have and offered it as proof that the Board considers the proposed settlement agreements carefully. Dr. Steinbergh stated that the Board respects the Secretary and Supervising Member and feels confident that their approach would have been similar to the Board's in deliberation.

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

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

The motion to ratify carried.

CHARLES EDWARD MERRILL, SR., D.O. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE OSTEOPATHIC MEDICINE AND SURGERY

Dr. Madia moved to ratify the Proposed Permanent Surrender with Dr. Merrill. Dr. Mahajan seconded the motion. A vote was taken:

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

The motion to ratify carried.

ERIC PAUL MACDONALD, M.D. – STEP II CONSENT AGREEMENT

Dr. Madia moved to ratify the Proposed Step II Consent Agreement with Dr. MacDonald. Ms. Elsass seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford	- abstain
Dr. Bechtel	- abstain
Dr. Mahajan	- aye
Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Dr. Madia	- aye
Ms. Elsass	- aye
Mr. Kenney	- aye
Mr. Gonidakis	- aye

The motion to ratify carried.

SHEILA S. REDDY, M.D. – STEP II CONSENT AGREEMENT

Dr. Madia moved to ratify the Proposed Step II Consent Agreement with Dr. Reddy. Dr. Ramprasad seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford	- abstain
Dr. Bechtel	- abstain
Dr. Mahajan	- aye
Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Dr. Madia	- aye
Ms. Elsass	- aye
Mr. Kenney	- aye
Mr. Gonidakis	- aye

The motion to ratify carried.

SEAN A. F. BUTURLA, M.D. – STEP II CONSENT AGREEMENT

Dr. Madia moved to ratify the Proposed Step II Consent Agreement with Dr. Buturla. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford	- abstain
Dr. Bechtel	- abstain
Dr. Mahajan	- aye
Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Dr. Madia	- aye
Ms. Elsass	- aye
Mr. Kenney	- aye
Mr. Gonidakis	- aye

The motion to ratify carried.

JENNIFER KITZEL, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE
MEDICINE AND SURGERY

Dr. Madia moved to ratify the Proposed Permanent Surrender with Dr. Kitzel. Dr. Mahajan seconded the motion. A vote was taken:

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

The motion to ratify carried.

LEONARD ROGER JANIS, D.P.M. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE
PODIATRIC MEDICINE AND SURGERY

Dr. Madia moved to ratify the Proposed Permanent Surrender with Dr. Janis. Ms. Elsass seconded the motion. A vote was taken:

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

The motion to ratify carried.

PAUL W. DUNCAN, D.O. – VOLUNTARY PERMANENT RETIREMENT FROM THE PRACTICE
OF OSTEOPATHIC MEDICINE AND SURGERY

Dr. Madia moved to ratify the Proposed Permanent Surrender with Dr. Duncan. Ms. Elsass seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford	- abstain
Dr. Bechtel	- abstain
Dr. Mahajan	- aye
Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Dr. Madia	- aye
Ms. Elsass	- aye
Mr. Kenney	- aye
Mr. Gonidakis	- aye

The motion to ratify carried.

JEFFREY TAIT NELSON, M.D. – STEP II CONSENT AGREEMENT

Dr. Madia moved to ratify the Proposed Permanent Surrender with Dr. Nelson. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford	- abstain
Dr. Bechtel	- abstain
Dr. Mahajan	- aye
Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Dr. Madia	- aye
Ms. Elsass	- aye
Mr. Kenney	- aye
Mr. Gonidakis	- aye

The motion to ratify carried.

GREGORY G. YOUNG, D.P.M. – CONSENT AGREEMENT

Dr. Madia moved to ratify the Proposed Permanent Surrender with Dr. Young. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford	- aye
Dr. Bechtel	- aye
Dr. Mahajan	- aye
Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Dr. Madia	- aye
Ms. Elsass	- aye
Mr. Kenney	- aye
Mr. Gonidakis	- aye

The motion to ratify carried.

The Board took a brief recess at 2:45 p.m. and resumed the meeting at 3:10 p.m.

PROBATIONARY APPEARANCES

ROBERT L. BRANDT, JR., M.D.

Dr. Brandt was making his final appearance before the Board pursuant to his request for release from the terms of his February 13, 2008 Consent Agreement. Ms. Bickers reviewed Dr. Brandt's history with the Board.

Dr. Madia noted that Dr. Brandt practices at Wright State University and asked if he is on faculty there. Dr. Brandt replied that he is not full-time faculty and he is employed by Wright State Physicians, Inc. Dr. Madia asked if Dr. Brandt is teaching students. Dr. Brandt answered that he has medical students with him at least three days a week, as well as a resident.

Dr. Madia was pleased that Dr. Brandt is doing well, but cautioned him that a relapse would have serious repercussions with the Board. Dr. Madia asked if Dr. Brandt is taking anything in addition to Wellbutrin for his depression. Dr. Brandt responded that he only takes Wellbutrin and that it works well. Dr. Madia asked how often Dr. Brandt sees his psychiatrist. Dr. Brandt replied that he sees his psychiatrist once every six months.

Dr. Madia asked if Dr. Brandt would address the medical students in attendance regarding his situation. Dr. Brandt informed the students that being in a solo practice was not a good thing for him and he hadn't known himself well enough to recognize the disease process of alcoholism. Dr. Brandt also stated that he had experimented with the drug Ecstasy. Dr. Brandt stated that had it not been for the intervention of the Medical Board, he would be in a much worse place today, possibly death. Dr. Brandt stated that he has learned to reconnect with a higher power and to believe in God. Dr. Brandt learned that it is not good to self-isolate and he is no longer in a solo practice. Dr. Brandt also learned that it is not a bad thing to ask for help.

Dr. Madia moved to release Dr. Brandt from the terms of his February 13, 2008 Consent Agreement. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

NAKISHA HINES, M.T.

Ms. Hines was making her final appearance before the Board pursuant to her request for release from the terms of her July 8, 2009 Consent Agreement. Ms. Bickers reviewed Ms. Hines' history with the Board.

Dr. Steinbergh asked Ms. Hines what she is doing currently. Ms. Hines replied that she continues to practice as a private solo massage therapist. Dr. Steinbergh asked if Ms. Hines' work has been successful. Ms. Hines answered that it has been successful, though there have been some ups and downs.

Dr. Steinbergh asked how Ms. Hines' experience with the Board has affected her choices both professionally and personally. Ms. Hines responded that the experience has allowed her to be more conscious of her actions and their consequences. Ms. Hines stated that she has learned to make better choices for herself and her daughter.

Dr. Ramprasad asked if Ms. Hines has family support besides her young daughter. Ms. Hines replied that her mother, father, and stepfather are supportive, but her family is having a very stressful time currently. Dr. Ramprasad wished Ms. Hines the best.

Dr. Madia moved to release Ms. Hines from the terms of her July 8, 2009 Consent Agreement. Ms. Elsass seconded the motion. All members voted aye. The motion carried.

TOBY JAMES TIPPIE, P.A.

Mr. Tippie was making his final appearance before the Board pursuant to his request for release from the terms of his February 13, 2008 Consent Agreement. Ms. Bickers reviewed Mr. Tippie's history with the Board.

Dr. Madia asked about Mr. Tippie's current practice. Mr. Tippie replied that he is practicing in an orthopedic practice that includes 16 physicians and 12 physician assistants.

Dr. Madia noted that Mr. Tippie is taking Lexapro but there is no psychiatric diagnosis. Mr. Tippie stated that the Lexapro is prescribed by his family physician for anxiety issues. Mr. Tippie stated that he takes 10 mg of Lexapro daily. Dr. Madia asked for Dr. Mahajan's opinion on taking Lexapro long-term in the absence of a psychiatric diagnosis. Dr. Mahajan stated that 10 mg is a very low dose and he had no concerns.

Dr. Madia asked if Mr. Tippie's practice is going well. Mr. Tippie responded that his practice is going well and he has become very comfortable in the practice.

Dr. Madia moved to release Mr. Tippie from the terms of his February 13, 2008 Consent Agreement. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

RICHARD A. ZINNI, D.O.

Dr. Zinni was making his final appearance before the Board pursuant to his request for release from the terms of his February 13, 2008 Consent Agreement. Ms. Bickers reviewed Dr. Zinni's history with the Board.

Dr. Steinbergh asked Dr. Zinni to describe his practice and his recovery. Dr. Zinni replied that he currently works in an urgent care of a large hospital and he has also has the privilege of working with Dr. Adelman at Glenbeigh Hospital. Dr. Mahajan asked what Dr. Zinni does at Glenbeigh Hospital. Dr. Zinni replied that he goes on detox rounds and he talks to anyone who has any issues, as well as generally helping the

medical director. Dr. Zinni commented that he had been at Glenbeigh Hospital on February 7 and realized that he had been there as a patient eight years earlier. Dr. Zinni shared this with patients who were struggling with their addiction that day and he was grateful to have the ability to understand their plight.

Dr. Steinbergh asked if Dr. Zinni wished to address the medical students in attendance. Mr. Zinni informed the students that all he had ever wanted to be was a doctor, and that was taken away from him seemingly overnight due to his bad choices. Dr. Zinni stated that at that time, he was no longer willing to be teachable. Dr. Zinni stated that addiction destroys lives, both one's own and those of one's family and friends, as well as one's relationships with patients and co-workers. Dr. Zinni stated that he was angry with the Medical Board at first, but now he is a better person thanks to the Board. Dr. Zinni stated that he did not want to forget where he came from and recalled his first meeting at the Board, including Mr. Albert, who served as Supervising Member at that time. Dr. Zinni told the students that there is nothing wrong with asking for help.

Dr. Madia moved to release Dr. Zinni from the terms of his February 13, 2008 Consent Agreement. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

CRAIG L. BIERER, D.O.

Dr. Bierer was making his initial appearance before the Board pursuant to the terms of his November 14, 2012 Consent Agreement. Dr. Bierer was also requesting approval of Bruce C. Gray, M.D., to serve as the monitoring physician, and determination of the frequency and number of charts to be reviewed. Ms. Bickers reviewed Dr. Bierer's history with the Board.

Dr. Madia asked Dr. Bierer to describe his current practice. Dr. Bierer stated that he has a solo orthopedic practice in Oxford, Ohio, focusing on joint surgeries and sports medicine. Dr. Bierer stated that he had been out of practice for 15 months before reinstatement, but he has wonderful patients who have come back to him and he has a lot of support in the community.

Dr. Madia noted that Oxford is a relatively small community and asked how this experience has affected his practice. Dr. Bierer stated that there are some people who will probably never come back to his practice. Dr. Bierer stated that, if the Board approves Dr. Gray to serve as his monitoring physician, a local hospital will have a special meeting on Friday to grant him privileges.

Dr. Steinbergh noted that Dr. Gray is an anesthesiologist. Dr. Steinbergh stated that she can appreciate Dr. Gray's evaluation of Dr. Bierer's hospital charts, but asked how the review of Dr. Bierer's private practice charts will work. Ms. Bickers stated that the recommendation to the Board is to approve Dr. Gray to review the private practice charts as well. Ms. Bickers noted that Dr. Gray had also reviewed Dr. Bierer's private practice charts under a previous agreement.

Dr. Steinbergh questioned if it is appropriate for an anesthesiologist to review the records of an orthopedic surgeon. Dr. Madia opined that having charts reviewed by an orthopedic surgeon would be best, but the next best choice would be an anesthesiologist because they observe the surgery. Dr. Madia asked how many orthopedic surgeons are in Oxford. Dr. Bierer responded that with his departure, a large orthopedic

group from Cincinnati moved in and began taking cases, doing very little work at the hospital. Dr. Bierer stated that this group wants nothing to do with him. Also, an orthopedic surgeon he had previously practiced with is retiring in about a year. Consequently, there is not a large pool of orthopedic surgeons to select from to review his charts.

Dr. Steinbergh noted that Dr. Bierer's case does not involve minimal standards of care. Dr. Steinbergh stated that the Secretary approves of Dr. Gray's review, and therefore she will support it as well.

Dr. Ramprasad noted that, according to the materials, Dr. Bierer is divorcing or separating and his children are moving away from him. Dr. Bierer stated that in December, he reconciled with his wife. Dr. Ramprasad was pleased to hear this news because he had been concerned that a divorce and being separated from his children would be detrimental to his recovery.

Dr. Ramprasad asked why the new orthopedic group in Oxford did not want Dr. Bierer. Dr. Bierer stated that he had had a practice beforehand and that, with his history, he was not the most desirable physician from their perspective. Dr. Ramprasad advised Dr. Bierer not to sell himself short.

Dr. Mahajan noted that Dr. Bierer is on psychiatric medications and asked if he sees a psychiatrist regularly. Dr. Bierer replied that he sees a psychiatrist and a psychologist regularly.

Dr. Madia moved to continue Dr. Baus under the terms of his November 14, 2012 Consent Agreement. Dr. Madia further moved to approve Bruce C. Gray, M.D., to serve as the monitoring physician, and to determine the number and frequency of charts to be reviewed at 10 charts per month. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

SEAN A. F. BUTURLA, M.D.

Dr. Buturla was making his initial appearance before the Board pursuant to the terms of his November 14, 2012 Consent Agreement. Ms. Bickers reviewed Dr. Buturla's history with the Board.

Dr. Madia noted that Dr. Buturla is a young physician and asked when his problems began. Dr. Buturla replied that his problems with alcohol began when he was a teenager. Dr. Madia asked how Dr. Buturla is doing now. Dr. Buturla responded that he is doing well and is attending conferences with his residency program at the University of Toledo. Dr. Buturla commented that his residency program wants him back soon. Regarding alcohol, Dr. Buturla stated that he is attending meetings and following the stipulations of his Consent Agreement.

Dr. Ramprasad asked if Dr. Buturla is on any medications. Dr. Buturla answered that he is on Celexa and Wellbutrin. Dr. Ramprasad asked if these medications are to treat depression. Dr. Buturla replied that he has technically been diagnosed with "mood disorder not otherwise specified," but stated that it is essentially depression.

Dr. Ramprasad asked if Dr. Buturla has a family history of alcohol abuse. Dr. Buturla stated that his maternal grandfather had had alcohol problems. Dr. Ramprasad asked if Dr. Buturla has a family structure

to help him. Dr. Buturla replied that his family is very supportive and are in Vermont where he grew up. Dr. Buturla stated that he has a good support system in his residency program. Dr. Ramprasad asked how Dr. Buturla manages financially. Dr. Buturla answered that he is struggling and he owes quite a bit of money to his parents and brothers. Dr. Buturla stated that he is anxious to get back to work again.

Dr. Ramprasad asked Dr. Buturla to describe his recovery program. Dr. Buturla stated that he attends Alcoholics Anonymous meetings and is in a relapse prevention program at Arrowhead Behavioral Health, where he had gone through rehabilitation. Dr. Buturla also attends caduceus meetings in Ann Arbor, Michigan. Dr. Ramprasad asked if Dr. Buturla found Arrowhead Behavior Health useful. Dr. Buturla stated that he learned a lot about himself at Arrowhead and believes that he is a stronger person now.

Dr. Ramprasad expressed concern because Dr. Buturla is at very high risk for relapse due to his young age, his early start with abuse in his teenage years, and his family history. Dr. Ramprasad stated that practicing emergency medicine will require long work hours and advised Dr. Buturla to take any breaks that are offered to him. Dr. Steinbergh agreed and opined that recovery will be more difficult than Dr. Buturla thinks. Dr. Steinbergh advised Dr. Buturla to be vigilant every day of his life.

Dr. Ramprasad asked if Dr. Buturla is involved in a church. Dr. Buturla stated that his is not very religious. Dr. Ramprasad commented that many people have a successful recovery after connecting to a higher power. Dr. Ramprasad suggested that Dr. Buturla may want to consider doing that, whatever the religion.

Ms. Elsass agreed with Dr. Ramprasad and stated that it will be easier said than done for Dr. Buturla to change his lifestyle. Dr. Buturla agreed and stated that he has already noticed a drastic change in his life and who he can associate with. Ms. Elsass advised Dr. Buturla to be careful.

Dr. Ramprasad commented that, despite the common belief that binge drinking does not cause liver disease, it does lead to cirrhosis. Dr. Ramprasad advised Dr. Buturla to be checked for that if he hasn't been already.

Ms. Elsass moved to continue Dr. Buturla under the terms of his November 14, 2012 Consent Agreement. Dr. Madia seconded the motion. All members voted aye. The motion carried.

JOHN R. KERNS, D.O.

Dr. Kerns was making his initial appearance before the Board pursuant to the terms of his November 14, 2012 Consent Agreement. Ms. Bickers reviewed Dr. Kerns' history with the Board.

Dr. Steinbergh asked what Dr. Kerns' sobriety date is. Dr. Kerns replied that his sobriety date is July 27, 2012. Dr. Steinbergh asked if Dr. Kerns is being treated for any psychiatric diagnosis. Dr. Kerns answered that he is only being treated for alcoholism.

Dr. Steinbergh asked Dr. Kerns to describe his recovery. Dr. Kerns felt that he has a very complete understanding of his disease. Dr. Kerns attends Alcoholics Anonymous meetings three to four times per

week and aftercare at Shepherd Hill. Dr. Kerns stated that he has no problems and that he will not have any problems.

Dr. Ramprasad asked if Dr. Kerns understands his Consent Agreement. Dr. Kerns replied that he understands his Consent Agreement.

Dr. Ramprasad asked how the emergency department is working out for Dr. Kerns. Dr. Kerns answered that it is wonderful and he loves his job. Dr. Kerns stated that he was called to be a physician at the age of 10 due to a life-changing event and it is the only thing he has known to do. Dr. Kerns stated that the six months when he was not a physician took a terrible toll on him and made him re-evaluate his life. Dr. Kerns stated that he has rededicated his life and career to medicine and doing God's work. Dr. Kerns stated that the Board will see him again at the end of his five-year probation with a smile on his face.

Dr. Steinbergh asked how Dr. Kerns' requirements regarding the breathalyzer are working out for him. Dr. Kerns stated that when he gets into his truck, he has to blow into the breathalyzer; if the reading is fine, he can start his truck. Dr. Kerns has to blow into the breathalyzer every fifteen minutes thereafter while driving. Dr. Steinbergh expressed concern that blowing into a breathalyzer while driving is a safety issue. Dr. Kerns agreed. Ms. Bickers stated that the breathalyzer is a court-ordered requirement. Ms. Bickers stated that the requirement also appears in Dr. Kerns' Consent Agreement because one of his return-to-work assessors recommended that the court-ordered requirement be included there.

Dr. Steinbergh asked why the court imposed the requirement. Ms. Bickers was unable to answer Dr. Steinbergh's question, but noted that the court ordered the breathalyzer following Dr. Kerns' DUI. Dr. Kerns commented that this practice is routine in Arizona and he believed that Ohio may be adopting it as well.

The Board discussed this issue thoroughly and agreed that the practice of blowing into a breathalyzer while driving represents a safety hazard. Mr. Wilcox advised that any change in Dr. Kerns' court-ordered breathalyzer requirements would have to go through the court's probation department. Dr. Steinbergh stated that no action will be taken today, but opined that the Board ought to engage in further discussion of this matter in the future.

Mr. Kenney advised the Dr. Kerns could pull over every fifteen minutes to blow into the breathalyzer, rather than do it while driving. Dr. Steinbergh agreed.

Dr. Madia moved to continue Dr. Kerns under the terms of his November 14, 2012 Consent Agreement. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

ERIC P. MACDONALD, M.D.

Dr. MacDonald was making his initial appearance before the Board pursuant to the terms of his November 14, 2012 Consent Agreement. Ms. Bickers reviewed Dr. MacDonald's history with the Board.

Dr. Madia asked if Dr. MacDonald is currently practicing anesthesiology or pain medicine. Dr.

MacDonald replied that he is practicing cardiac and general anesthesiology in Portsmouth, Ohio. Responding to further questions, Dr. MacDonald stated that he has practiced at his hospital for 16 to 17 years and serves as the chief of anesthesiology. Dr. MacDonald stated that he enjoys his job and his co-workers are supportive of him.

Dr. Madia noted that Dr. MacDonald abused alcohol, but not narcotics. Dr. MacDonald confirmed that that is the case. Dr. Madia asked where Dr. MacDonald underwent inpatient treatment. Dr. MacDonald replied that he went through 29 days of treatment at The Ridge in Batavia, Ohio. Dr. MacDonald stated that he is working the 12-step program, he has a sponsor, he attends meetings frequently, and he engages in prayer.

Dr. Madia asked if Dr. MacDonald has any questions regarding his Consent Agreement. Dr. MacDonald replied that he has no questions.

Dr. Madia moved to continue Dr. MacDonald under the terms of his February 13, 2013 Consent Agreement. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

EXECUTIVE SESSION

Dr. Mahajan moved that the Board declare Executive Session to consider the discipline of a public employee. Ms. Elsass seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Bechtel	- aye
	Dr. Mahajan	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Dr. Madia	- aye
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Mr. Gonidakis	- aye

The motion carried.

Pursuant to Section 121.22(G)(3), Ohio Revised Code, the Board went into executive session with Ms. Anderson, Ms. Loe, Ms. Debolt, and assistant attorneys general from the Employment Law Section of the Attorney General's office in attendance.

The Board entered Executive Session at 4:05 p.m. and returned to public session at 4:30 p.m.

DISCUSSION OF THE MEDIA

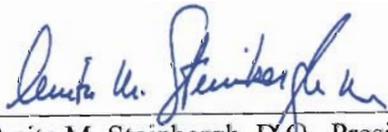
Dr. Steinbergh noted that a member of the local media had been present earlier in the meeting, but the Board members had not been informed that that would be the case. Ms. Debolt stated that the staff had

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been notified very shortly before the meeting that a member of the media would be attending; that word somehow did not reach the Board members. Dr. Steinbergh opined that the Board members should be made aware when the media is present. All Board members agreed that the presence or absence of the media had no effect on the Board members' comments or actions.

Thereupon, at 4:35 p.m., the February 13, 2013 session of the State Medical Board of Ohio was adjourned by Dr. Steinbergh.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio meeting on February 13, 2013, as approved on March 13, 2013.



Anita M. Steinbergh, D.O., President



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

(SEAL)



MINUTES**THE STATE MEDICAL BOARD OF OHIO****February 14, 2013**

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

Also present were: Kimberly Anderson, Interim Executive Director; Susan Loe, Assistant Executive Director, Program Management and Operations; Sallie J. Debolt, General Counsel; Joan K. Wehrle, Education & Outreach Program Manager; Michael Miller, Interim Assistant Executive Director, Licensure and Renewal; Rebecca Marshall, Chief Enforcement Attorney; Karen Mortland, Enforcement Attorney; Danielle Bickers, Compliance Supervisor; Annette Jones, Compliance Officer; Kyle Wilcox, Assistant Attorney General; Kay Rieve, Administrative Officer; Nicole Weaver, Chief of Licensure; Barbara Jacobs, Senior Executive Staff Attorney; April Battle, Licensure Assistant; and Benton Taylor, Executive Assistant to the Executive Director.

REQUEST FOR AUTHORITY TO ACCEPT UNCLAIMED FUNDS

Ms. Anderson stated that the Board has been notified by the Auditor of State that \$1,098.50 in miscellaneous unclaimed funds has been identified as belonging to the Medical Board.

Dr. Madia moved to authorize Susan Loe, Assistant Executive Director for Program Management and Operations, to accept the unclaimed funds due to the Medical Board on the Medical Board's behalf. Dr. Ramprasad seconded the motion. All members voted aye. The motion carried.

Dr. Mahajan entered the meeting at this time.

PROBATION AND REINSTATEMENT CONSENT AGENDA

Dr. Steinbergh advised that at this time she would like the Board to consider the probationary reports and probationary requests on today's consent agenda. Dr. Steinbergh asked whether any Board member wished to consider a probationary report or request separately. Mr. Taylor noted that the probationary request of Jennifer Kitzel, M.D., is no longer part of the consent agenda because the Board ratified the permanent surrender of her license yesterday.

Dr. Ramprasad asked if Bobby C. Lenox, Jr., D.O., has completed his five-year probationary period, as stipulated in his January 9, 2008 Consent Agreement. Ms. Bickers replied that Dr. Lenox will be eligible

for release in March 2013.

Dr. Ramprasad noted that Ravi Dutt Madan, M.D., has stated that he will possibly be going to India. Dr. Ramprasad asked how Dr. Madan could continue to meet the terms of his Consent Agreement if he travels to India. Ms. Bickers replied that Dr. Madan has already returned from his trip to India.

Dr. Steinbergh noted that Nicholas A. Atanasoff, D.O., had requested approval of the *Intensive Course in Medical Ethics, Boundaries, and Professionalism* offered by Case Western Reserve University to fulfill both the professional ethics course and prescribing course requirements. Dr. Steinbergh stated that she supported the Secretary's recommendation that the course be approved to fulfill the ethics course requirement only. Dr. Stafford commented that Dr. Betchel and he are reluctant to grant requests of this nature because they want the physicians to expose themselves to a broader-based understanding of their roles as clinicians. Dr. Steinbergh agreed.

Dr. Steinbergh also agreed with the Secretary's recommendation regarding Dr. Hanzlik, which is different from what Dr. Hanzlik initially requested.

Dr. Steinbergh noted that the dates "December 11 and 27, 2011" in the documentation concerning Dr. Lottes' psychiatric sessions should be corrected to read "December 11 and 27, 2012."

Dr. Madia moved to accept the Compliance staff's Reports of Conferences on January 7 & 8, 2013, with: Mohammad A. Adas, M.D.; Malcolm A. Brahms, M.D.; James E. Breidenstein, D.O.; Carolyn A. Chambers, M.D.; Aimee V. Chappelow, M.D.; Janice Electa Green Douglas, M.D.; Terry A. Dragash, D.O.; Paul E. Duncan, M.D.; Lynne A. Eaton, M.D.; Matthew H. Evenhouse, M.D.; Jackson L. J. Flanigan, M.D.; Philip M. Goldman, M.D.; Mark E. Goldsmith, M.D.; Michael S. Grinblatt, M.D.; Marjorie M. Haas, M.D.; Josh U. Hill, P.A.; Gregory Gene Johnson, M.D.; Kavita A. Kang, D.O.; Christopher J. Karakasis, M.D.; Sean M. Klepper, M.D.; Thomas D. Kramer, Jr., M.D.; Bobby C. Lenox, Jr., D.O.; Ravi Dutt Madan, M.D.; Anna M. Marcinow, M.D.; Siva Rao Murthy, M.D.; Kimberly M. Nemeth, D.O.; Sheila S. Paul, D.O.; Leonard G. Quallich, Jr., M.D.; Chris Allen Rhoades, M.D.; Matthew C. Riesen, M.D.; Madelyn R. Sartain, D.O.; Rick Skibicki, M.D.; and Kyle Wayne Stephens, M.D.

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

- **In the matter of Nicholas A. Atanasoff, D.O., to approve the recommendation of the Secretary to approve *Intensive Course in Medical Ethics, Boundaries & Professionalism*, administered by Case Western Reserve University, to fulfill the professional ethics course requirement;**
- **To grant Mark E. Blair, M.D.'s request for acceptance of the Compliance staff's report of conference on January 7, 2013, and approval of Trupti V. Patel, M.D., to serve as the new monitoring physician;**
- **To grant Joseph F. Daugherty, III, M.D.'s request for approval of *Intensive Course in Controlled***

Substance Management, administered by Case Western Reserve University to fulfill the controlled substances prescribing course requirement for reinstatement, and approval of ***Getting it on Record and Getting it Right***, administered by the Massachusetts Medical Society to fulfill the medical records course requirement for reinstatement;

- In the matter of Shane R. Hanzlik, M.D., to approve the recommendation of the Secretary to accept the Compliance staff's report of conference on January 7, 2013; reduce required drug and alcohol rehabilitation meetings to two per week with a minimum of 10 per month; reduce appearances to every six months; and reduce the frequency of testosterone testing from four per year to three per year;
- To grant Paul D. Lopreato, P.A.'s request for approval of ***Personal and Professional Ethics in Medicine*** course tailored by Donna F. Homenko, Ph.D., to fulfill the personal/professional ethics course requirement for reinstatement;
- To grant Elizabeth B. Lottes, D.O.'s request for acceptance of the Compliance staff's report of conference on January 7, 2013; reduction in psychiatric sessions from every four months to every six months; discontinuance of the chart review requirement; and approval of Michael R. Mizenko, D.O., to serve as the new monitoring physician;
- To grant Bruce J. Merkin, M.D.'s request for acceptance of the Compliance staff's report of conference on January 7, 2013, and approval of a revised practice plan;
- To grant Wendy A. Millis, M.D.'s request for permission to travel from Ohio to Michigan without prior permission;
- To grant Ronica A. Neuhoff, M.D.'s request for approval of John P. Geisler, 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 Michael J. Palma, M.D.'s request for acceptance of the Compliance staff's report of conference on January 7, 2013, and approval of the New York Committee for Physicians Health to conduct monitoring while Dr. Palma resides in New York;
- To grant Jerry G. Purvis, Jr., M.D.'s request for approval to continue under the terms of his August 8, 2012 Step II Consent Agreement while residing in Georgia;
- To grant Terry L. Thomas, D.O.'s request for approval of the West Virginia Medical Professionals Health Program to conduct monitoring while Dr. Thomas resides in West Virginia;
- To grant Wayne Marshall Williams, M.D.'s request for approval of the Georgia Professional Health Program to conduct monitoring while Dr. Williams resides in Georgia; and
- To grant Adil Y. Yamour, M.D.'s request for approval of ***Prescribing Controlled Substances in Ohio During a Prescription Drug Abuse Crisis***, offered by the Ohio State Medical Association in

partnership with Kettering Medical Center, to fulfill the controlled substance prescribing course requirement.

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

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

The motion carried.

ADMINISTRATIVE REPORT

Ms. Anderson stated that about 16 members of the staff have participated in the LeanOhio process, and many of the participants are present in the meeting today. Ms. Anderson stated that it was a very positive experience. The purpose of the week-long process was to design a way to improve the efficiency of the Board's complaint process, with the help of facilitators from LeanOhio. Ms. Anderson noted several productive ideas which emerged from the process, including changes to administrative triage, having each section close its own complaints after approval from the Secretary and Supervising Member, and asking hospitals and other facilities to accept subpoenas delivered by certified mail rather than by Board investigators. Dr. Madia questioned why the Board required permission from hospitals to deliver subpoenas via certified mail. Ms. Anderson replied that the law requires that Board subpoenas to non-licensee entities such as hospital be hand-delivered unless the entity agrees otherwise. Ms. Anderson anticipated that hospitals will agree to this request.

Mr. Miller commented that the LeanOhio process led to staff members having a better appreciation of the work done in other sections. Mr. Miller stated that long-delayed projects, such as updating the consumer guide and redesigning the complaint form, were accomplished in a relatively short time during the LeanOhio process.

Ms. Jacobs further explained the process, commenting that it was sometimes difficult and emotional. Ms. Jacobs stated that emotions ran high because the staff is truly dedicated to the Board's work. Ms. Jacobs stated that the end result was a conceived "future state" with drastic reductions in time and steps in the complaint process. Ms. Jacobs opined that the process was ultimately a healthy one. While some parts of the future state were implemented immediately, others are more systemic changes that must be embraced as long-term goals. Ms. Jacobs estimated that the full future state can be in place within six months.

Mr. Gonidakis stated that he attended the report-out following the process and found it to be an eye-

opening experience. Mr. Gonidakis stated that representatives from the Governor's office expressed support for the Medical Board's LeanOhio process during a meeting with Dr. Bechtel, Mr. Kenney, and himself.

Dr. Strafford stated that he also attended the report-out and opined that he observed the birth of a learning organization that is looking at its processes and procedures to enhance its output. Dr. Strafford stated that the Board offices are now an environment of hope and positive expectation. Dr. Strafford recounted a specific instance of a significant time-saving change in procedure implemented under the philosophy of LeanOhio. Dr. Strafford stated that the leadership of Ms. Anderson, Mr. Miller, and Ms. Marshall in seizing the opportunity to participate in LeanOhio is exactly what was needed at this time.

Dr. Steinbergh asked if Ms. Anderson envisioned reviewing other Board functions through the LeanOhio process. Ms. Anderson replied that Licensure and Enforcement have been identified as processes that would benefit from a LeanOhio analysis. Dr. Steinbergh asked if LeanOhio will return to view the Board's progress in implementing the new ideas. Mr. Miller stated that LeanOhio will perform 30-day, 60-day, and 90-day reviews.

The Board and staff continued to discuss the positive changes that have resulted and will result from the LeanOhio process. Staff members expressed thanks to the Board members and to Ms. Anderson for approving participation in LeanOhio, stating that positive change of this sort has been needed for some time. Several Board members agreed.

Ms. Anderson stated that the staff focus groups continue to meet and implement ideas for improving the Board's functions. Ms. Anderson stated that Focus Group #4 will now address the Board members regarding their chosen project. Focus Group #4 was represented by Licensure Assistant April Battle, Enforcement Attorney Karen Mortland, and Executive Assistant Benton Taylor. Other members of Focus Group #4 who were unable to attend were Public Inquiries Supervisor Sue Bigham, Investigator Shawn McCafferty, Information Technology Systems Chief Patrick Randall, Standards Review and Intervention Specialist Mary Sparks, R.N., and Investigator Jan Sussex.

Ms. Battle explained that many members of staff feel little or no connection to the members of the Board for whom they work, noting that most staff members cannot name or recognize all of the members of the Board. Focus Group #4 seeks to foster a greater sense of identification the Board members and the staff. Pursuant to that, Ms. Battle asked the Board members to consider submitting very brief biographic information, including personal interests, that can be coupled with a photograph to be published in the employee newsletter or the *Grand Rounds* newsletter that is sent to all licensees.

The Board members discussed this issue and opined that publication of a brief bio in the employee newsletter would be more appropriate than publication in *Grand Rounds*. The Board members were generally supportive of the concept and filled out a short biographical information form.

Continuing, Ms. Anderson stated that the Governor's Opiate Action Team, on which Dr. Strafford and Dr. Bechtel had served, has proposed adoption of a recommendation that the prescription of more than 80 Morphine Equivalent Dos (MED) for more than 12 weeks will trigger certain actions that the prescriber

should perform. These actions include:

- Informed consent
- Having a written treatment plan
- Providing written information on the risks of opioids
- Checking the Ohio Automated Rx Reporting System (OARRS)
- Examining the functional aspects of the patient's improvement.

Ms. Anderson stated that meetings on this topic continue with the Ohio Department of Health, the Ohio Department of Aging, the Ohio Department of Alcohol and Drug Addiction Services (ODADAS), the Ohio Board of Pharmacy, and other agencies. Ms. Anderson stated that the agencies are indicating that they would like the Medical Board to issue these recommendations as a policy statement, pending approval from the Governor. Ms. Anderson stated that the Medical Board would then work with the Board of Pharmacy on ways to measure outcomes.

Ms. Anderson stated that another aspect would be some metric that would trigger notification from the Medical Board to a practitioner. Ms. Anderson stated that the notification would not be a complaint, but simply a link to the policy. A positive aspect of the proposal is that it would include both education and some action. Ms. Anderson stated that the Ohio Board of Nursing and Ohio Board of Dentistry are also included since they also license prescribers; under the proposal, the Boards of Nursing and of Dentistry would also issue policy statements similar to the Medical Board's.

Ms. Anderson stated that another portion of the proposal involves asking physicians for their DEA numbers upon renewal of their license so that information can be overlain on OARRS data and demographic information regarding specialties. Ms. Anderson noted the example a hospice physician prescribing high doses of opioids. Due to the specialty, this hypothetical physician would probably not need to be sent a notice, but the specialty would not be known unless the demographic information was included in the OARRS data.

Dr. Steinbergh commented that metrics should also be included for hospice physicians and other end-of-life physicians, noting that it is also possible for those physicians to mishandle these medications. Dr. Mahajan commented that hospice physicians and oncologists interact vigorously with hospitals and the hospice agency, and this provides significant oversight. Ms. Anderson noted that the draft recommendation has an exception for terminal conditions, but agreed that physicians treating terminal conditions must still follow the standard of care.

Dr. Ramprasad noted that if the recommendations are part of a policy statement rather than a rule or statute, the Board would not be able to enforce compliance. Ms. Anderson agreed that the lack of an enforcement component is a concern. Dr. Steinbergh commented that sometimes a policy statement is easier than a rule or statute because it gives the Board flexibility. Dr. Steinbergh noted that if other agencies and the Governor's office agree with this approach, then the policy statement can be used to take action if the Board feels it is appropriate. Mr. Miller added that one aspect is that so many physicians currently prescribe more than 80 MED that the Board would never have the resources necessary to enforce it as a rule.

Dr. Ramprasad asked for Dr. Strafford's opinion in this matter. Dr. Strafford opined that the limit of 80 MED is too low and will include far too many physicians. Dr. Strafford opined that the limit for the triggers should be 120 MED. Dr. Strafford commented that part of the issue is that the Medical Board is complaint-driven, and this is the first opportunity to reach out in an investigatory way, which will use many resources. Dr. Strafford commented that it would be very helpful if the Medical Board could demonstrate a trend of change following the issuing of the policy.

The Board continued to discuss this issue very thoroughly. Ms. Anderson asked if the Board would be comfortable with a policy statement that would be effective July 1, 2013. The Board indicated that it would be comfortable. Ms. Anderson stated that she will continue to discuss this matter with other agencies.

Ms. Anderson stated that the staff has been looking into implementation of Senate Bill 301, which authorizes inspections of pain management clinics. Ms. Anderson stated that the Board is working with the Bureau of Worker's Compensation (BWC) and the Ohio Board of Pharmacy to identify individuals who may be prescribing pain medications to more than 50% of their patients without a pain clinic license. Ms. Anderson described further details of how pain clinic inspections will be put into effect.

Regarding compounding pharmacies, Ms. Anderson stated that the Ohio Board of Pharmacy and the Ohio Department of Health are seeking help in educating physicians regarding compounding pharmacies and the fact that out-of-state compounding pharmacies require a license from the Board of Pharmacy to sell to clinics in Ohio. Ms. Anderson also stated the Medical Board will work with the Board of Pharmacy on related enforcement matters, as needed. Ms. Anderson stated that these initiatives have arisen from last year's New England compounding pharmacy tragedy.

Ms. Anderson stated that Dr. Strafford and Mr. Miller attended a meeting at the Federation of State Medical Boards (FSMB) regarding medical licensure. Mr. Miller stated that the meeting occurred over two days in Dallas, Texas, and dealt with the push for national licensure. Mr. Miller stated that one of the primary drivers of the national licensure concept is telemedicine. Mr. Miller stated that one bill working through the U.S. Congress would allow payments for federal healthcare services to be paid based on the location of the provider rather than the location of the patient. Mr. Miller stated that the opportunity for true national licensure was much more limited. The concept of multi-state compacts was extensively discussed at the meeting as a way to maintain some state autonomy. Mr. Miller stated that this topic will be further discussed at the FSMB 2013 Annual Meeting.

Dr. Strafford stated that the people driving the process towards national licensure are the same people who are selling kiosks and internet connections for the delivery of telehealth services. Dr. Strafford stated that the keynote speaker, former Wyoming Governor Jim Geringer, gave an excellent presentation on the current state of healthcare delivery in this country. Dr. Strafford summarized the five points of Mr. Geringer's presentation:

- Getting people to take personal responsibility for their own healthcare
- With the emergence of effective genetic testing, prediction of health issues will become a very important

subject

- The focus is on interactions between the patient and provider, regardless of where they are at the time of the interaction
- There will be pressure for more uniformity in licensure standards between states
- Most disciplinary actions by medical boards are for ethical and moral trespass, not violations of the standards of care

The Board engaged in further discussion of this topic. The Board thanked Dr. Strafford and Mr. Miller for their report on the meeting.

FINANCIAL DISCLOSURE FORMS

At the request of a Board member, Mr. Taylor reviewed the requirements for Board members to file Financial Disclosure Forms with the Ohio Ethics Commission, as is required yearly. Mr. Taylor stated that the Financial Disclosure Forms will be due this year on May 15, 2013, and can be submitted online for the first time. Mr. Taylor stated that he will send more information by email and encouraged the Board members to contact him with any questions.

LEGISLATIVE UPDATES

Mr. Miller stated that there is no legislative update at this time.

REPORTS BY ASSIGNED COMMITTEE

AD HOC BUDGET REVIEW COMMITTEE

Ms. Anderson stated that the Governor's proposed budget does not include the proposed increase in license renewal fees requested by the Board. Ms. Anderson noted that Dr. Bechtel, Mr. Kenney, and Mr. Gonidakis met with representatives from the Governor's office yesterday to discuss this issue. Dr. Bechtel commented that the meeting in the Governor's office was very productive. Dr. Bechtel noted that there has not been an increase in the physician license renewal fees since 1999, the proposed \$50.00 increase amounts to \$25.00 per year, and the Board now has increased investigatory pressure due to the pill mill issue. Dr. Bechtel stated that failure to gain approval for the increase could lead to the loss of 10 to 12 employees and adversely affect the functions of the Board. Dr. Bechtel stated that there is no active opposition to a fee increase.

Mr. Miller stated that the Governor's proposed budget is now being considered by the House. Mr. Miller stated that any increase will have to be obtained in the House, later in the Senate, or in conference between the House and Senate. Mr. Kenney commented that requests for fee increases from all agencies were eliminated in the Governor's budget proposal. Mr. Kenney agreed with Dr. Bechtel that it was a positive meeting. Mr. Kenney commented that if the proposed increase is not approved, that may bolster the argument for approval of cost-recovery measures.

Regarding timeframe, Mr. Miller stated that the budget usually leaves the House in March or early April

and goes to the Senate. Mr. Miller further explained that a conference committee to reconcile the House and Senate budgets usually occurs in mid-June or late June. Mr. Miller stated that the Budget has to be complete by June 30.

Dr. Steinbergh thanked Dr. Bechtel, Mr. Kenney, and Mr. Gonidakis for their work on this issue.

Ms. Anderson stated that, at the request of the Committee, some changes were made to the draft proposal for cost recovery. Ms. Anderson stated that she added a table of estimated investigative costs and enforcement costs. Ms. Anderson also calculated the average cost of a contract for expert review in minimal standards cases at about \$4,500.00. With these figures, the total estimated cost of a case to be between \$5,000.00 and \$10,000.00. Ms. Anderson stated that over the last three years, the average number of formal actions is 205. Therefore, if one assumes an average fine of \$5,000.00, with no exception for any type of case, that would represent about \$1,000,000.00.

Mr. Kenney recommended putting the cost recovery draft on hold until more is known about the prospects for an increase in the physician license renewal fee.

PLAN FOR RULE DRAFTING AND REVIEW

Ms. Debolt stated that a three-year plan has been developed for adopting rules to implement the significant amount of legislation that was passed in the last General Assembly which impacts the Medical Board, as well as performing the required five-year review of all rules. Ms. Debolt stated that an outline of the three-year plan has been provided to Board members.

Mr. Gonidakis asked if the state constitution or any regulatory framework allows the Board to put fines or opportunities for funding into rules. Ms. Debolt replied that rules implemented by the Board cannot be broader than the statute they are implementing, and therefore fines cannot be placed into rule unless the statute specifically allows it.

Ms. Debolt reviewed the rule-making process for the benefit of the Board members, including the significant time involved.

REPORTS BY ASSIGNED COMMITTEES

FEDERATION OF STATE MEDICAL BOARDS ANNUAL MEETING 2013

Dr. Steinbergh stated that the Federation of State Medical Boards (FSMB) is providing scholarships for travel expenses for non-physician board members to attend the 2013 Annual Meeting, and one such scholarship will be made available to Ohio. Dr. Steinbergh stated that Mr. Kenney will accept the scholarship and attend the meeting, if his schedule permits. If Mr. Kenney is unable to attend, Mr. Gonidakis will accept the scholarship and attend the meeting.

FISCAL REPORT

Ms. Loe stated that the December 2012 Fiscal Report has been provided to Board members. Ms. Loe stated that because December is half-way through fiscal year, these numbers can be roughly doubled to give a picture of what the annual numbers may be. Ms. Loe observed that higher-than-expected revenue resulted from the fact that credit card processing shut down early in Fiscal Year 2012 and the leftover transactions were processed in Fiscal Year 2013. Ms. Loe also observed that the expenses do not reflect any rent payments because the Board just recently received its first rent bill of the fiscal year; rent is about \$200,000.00 per year.

Ms. Loe stated that normally, the Board would be drawing down the fund at this time because odd-numbered years are typically low-revenue years. However, due to the number of vacant positions and intentional cuts in spending, the Board's fund is holding steady with a balance of approximately \$3,000,000.00.

Dr. Ramprasad asked if there are plans to hire another hearing examiner. Ms. Anderson replied that the Board will see if it can get by with just three hearing examiners and use contractors as a cost-saving measure. Ms. Anderson stated that there is a request to fill the position of Chief Hearing Examiner which is currently on hold in the Governor's office.

Responding to a question from Mr. Gonidakis, Ms. Loe stated that the Controlling Board's approval is needed to contract with hearing examiners. Mr. Gonidakis noted that a line item in the budget is not required for contractors. Ms. Loe stated that the Board has never taken that approach and inquired further into that option. Mr. Gonidakis opined that, overall, it is more cost-effective to use contracted hearing examiners.

LICENSURE APPLICATION REVIEWS

SHEEN CHERIAN, M.D.

Dr. Madia stated that the Group 1 Committee recommended approval of Dr. Cherian's request to deem his training and experience, along with his 12 months of fellowship training, to be equivalent to 24 months of graduate medical education and to approve his application for licensure.

Dr. Madia moved to approve Dr. Cherian's request to deem his training and experience in India and the United Kingdom and his 12 months of fellowship in the United States to be equivalent to 24 months of graduate medical education through the second-year level and to grant his application for licensure. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Bechtel	- aye
	Dr. Mahajan	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Dr. Madia	- aye
	Ms. Elsass	- aye

Mr. Kenney - aye
Mr. Gonidakis - aye

The motion carried.

TASHA JENKINS, M.D.

Dr. Madia stated that Dr. Jenkins has requested a waiver of the United States Medical Licensing Examination (USMLE) ten-year rule on the basis of 4731-6-14(C)(3)(c)(ii), Ohio Administrative Code, which allows an applicant to “demonstrate good cause, as determined by the Board, for not having passed all three steps or levels within a ten year period...” Dr. Madia stated that the Group 1 Committee recommended that Dr. Jenkins’ request be denied.

Dr. Madia moved to deny Dr. Jenkins’ request for a good-cause exception of the 10-year rule as outlined in 4731-6-14(C)(3)(c)(ii), Ohio Administrative Code. Dr. Bechtel seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Steinbergh stated that Dr. Jenkins explained that an illness and an injury, as well as her role as a caretaker for her uncle, delayed her medical education. Dr. Steinbergh also noted that Dr. Jenkins went over the 10-year limit by only one year and eight months. Dr. Steinbergh opined that Dr. Jenkins should be granted a good-cause exception. Dr. Mahajan agreed with Dr. Steinbergh.

Dr. Ramprasad observed that 14 years elapsed between Dr. Jenkins’ first attempt to pass USMLE Step I and her successful passage of USMLE Step III. Ms. Rieve stated that the 10-year period specified in the Board’s rule begins upon passage of USMLE Step I, not on the first attempt. Ms. Rieve noted that Dr. Jenkins was not engaged in medical education between the completion of her residency in 2001 and her passage of USMLE Step III in 2009.

Dr. Mahajan noted that Dr. Jenkins holds a medical license in Michigan and asked if there have been any problems with her practice in that state. Ms. Rieve stated that she is unaware of any problems in Michigan.

A vote was taken on Dr. Madia’s motion to deny:

ROLL CALL:

Dr. Strafford	- nay
Dr. Bechtel	- aye
Dr. Mahajan	- nay
Dr. Ramprasad	- aye
Dr. Steinbergh	- nay
Dr. Madia	- aye
Ms. Elsass	- aye
Mr. Kenney	- aye
Mr. Gonidakis	- nay

The motion to deny carried.

CLINICAL RESEARCH FACULTY CERTIFICATE APPLICATION REVIEW

HIBINO NARUTOSHI, M.D.

Dr. Madia stated that the Group 1 Committee recommended approval of Dr. Narutoshi's application for a Clinical Research Faculty Certificate.

Dr. Madia moved to approve Dr. Natutoshi's application for a Clinical Research Faculty Certificate. Dr. Mahajan seconded the motion. A vote was taken:

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

The motion carried.

PETER EMANUEL PETROS, M.D.

Ms. Rieve noted that the Group 1 Committee recommended approval of this application, pending correction of some information on the application. Dr. Ramprasad noted that the application stated that Dr. Petros will be teaching new procedures and diagnostic techniques, but did not specify the procedure. Dr. Madia stated that the matter could be tabled rather than approved with a contingency.

Dr. Bechtel moved to table this topic. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

CERTIFICATE OF CONCEDED EMINENCE APPLICATION REVIEW

MOHAMED NAGUIB ATTALA, M.D.

Dr. Madia stated that Dr. Attala has practiced in Egypt, the United Arab Emirates, and Saudi Arabia. If Dr. Attala's application for a Certificate of Conceded Eminence is approved, he will be practicing at the Cleveland Clinic. Dr. Madia stated that Dr. Attala meets the eligibility requirements, and therefore the Group 1 Committee recommended approval of Dr. Attala's application for a Certificate of Conceded Eminence.

Dr. Madia moved to approve Dr. Attala's application for a Certificate of Conceded Eminence. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Ramprasad opined that Dr. Attala's credentials are very borderline for a Certificate of Conceded Eminence, noting that the procedures he will be performing do not seem unduly challenging. Dr. Ramprasad also questioned the distinction of Dr. Attala's prizes and awards. Mr. Kenney asked if Ms. Rieve has enough information to feel comfortable that Dr. Attala is an extraordinary person. Ms. Rieve replied that Dr. Attala meets the criteria and the information has been verified. Dr. Madia commented that the term "extraordinary" has a very subjective meaning.

Mr. Kenney expressed misgivings, but stated that the Board is required to approve the application if Dr. Attala meets all the requirements. Dr. Steinbergh advised Mr. Kenney that he can vote to not approve a license on an individual basis if he feels uncomfortable with any applicant.

Dr. Steinbergh asked if Dr. Attala can ask for a hearing if his application is denied. Ms. Debolt replied that Dr. Attala would have the right to ask for a hearing, as can anyone who is denied licensure. Ms. Debolt advised the Board that it must have grounds to deny an application. Dr. Ramprasad expressed concern that the items on the application listed under "received nationally/internationally recognized prizes and awards of excellence" are arguably not international in nature.

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

ROLL CALL:	Dr. Strafford	- nay
	Dr. Bechtel	- aye
	Dr. Mahajan	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Dr. Madia	- aye
	Ms. Elsass	- aye
	Mr. Kenney	- nay
	Mr. Gonidakis	- nay

The motion carried.

Dr. Bechtel exited the meeting at this time.

Dr. Madia asked for clarification of whether Dr. Attala could request a hearing if his application is denied. Ms. Debolt replied that Dr. Attala could request a hearing if his application is denied.

Dr. Madia moved to reconsider the application of Mohamed Naguib Attala, M.D., for a Certificate of Conceded Eminence. Dr. Ramprasad seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Mahajan	- nay
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Dr. Madia	- aye
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Mr. Gonidakis	- aye

The motion to reconsider carried.

Dr. Steinbergh stated that she would now entertain further discussion in this matter.

Dr. Madia stated that he made the motion to reconsider because Dr. Attala has the right to a hearing if he is denied. Dr. Madia observed that many Board members are expressing concerns regarding this applicant. Dr. Madia opined that the application should be denied and that Dr. Attala can come to hearing to demonstrate why he meets the requirements for a Certificate of Conceded Eminence.

Mr. Miller commented that if the Board chooses to deny Dr. Attala's application, a basis of the denial is needed. Dr. Mahajan stated that Dr. Attala's application can be denied on the basis that the awards and prizes he has listed on his application do not have international recognition.

Dr. Ramprasad read the awards and prizes which Dr. Attala listed on his application:

- Cleveland Clinic Mason Sones award (a local award, as noted by Dr. Ramprasad)
- International Society of Anesthetic Pharmacology, Best Scientific Contribution
- Honorary Professor, Facultad De Medicina, Fundacion Universitaria De Ciencias De La Salud, Bogota, Columbia
- Best of Show Honorable Mention, 20th Annual Meeting of International Society of Anesthetic Pharmacology
- International Society of Anesthetic Pharmacology Elmer Zsigmund Award for Best Scientific Contribution
- Best Teacher of the Year, Department of Anesthesia, College of Medicine, King Saud University, 1998
- Best Teacher of the Year, Department of Anesthesia, College of Medicine, King Saud University, 1997
- Best Teacher of the Year, Department of Anesthesia, College of Medicine, King Saud University 1996
- Best Teacher of the Year, Department of Anesthesia, College of Medicine, King Saud University, 1990
- Congress Medal of 5th Pan Arab Congress on Anesthesia, Intensive Care and Pain Relief, Cairo, Egypt, 1997
- Abdel Hameed Shooman Foundation Aware in Clinical Medical Sciences; "this award may well be the equivalent of the Pulitzer Prize in the Arab World," according to the application
- Cairo University College of Medicine Scholarship award.

Dr. Ramprasad opined that these prizes and awards do not seem to rise to the level of nationally or

internationally-recognized prizes or awards. Dr. Ramprasad stated that this is the reason he will vote to deny Dr. Attala's application.

Dr. Madia moved to deny Dr. Attala's application for a Certificate of Conceded Eminence. Dr. Ramprasad seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Mahajan	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Dr. Madia	- aye
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Mr. Gonidakis	- aye

The motion to deny carried.

CLINICAL RESEARCH FACULTY CERTIFICATE APPLICATION REVIEW

HERMANN KESSLER, M.D.

Ms. Rieve stated that there is an issue with Dr. Kessler's German medical license, in that the license did not technically put an expiration date on it. However, Ms. Rieve stated that Dr. Kessler does hold the right to practice medicine in Germany

Dr. Madia moved to grant Dr. Kessler's application for a Clinical Research Faculty Certificate. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Mahajan	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Dr. Madia	- aye
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Mr. Gonidakis	- aye

The motion carried.

Dr. Ramprasad noted that Dr. Kessler will be performing laparoscopic colorectal surgery at the Cleveland Clinic, according to the application. Dr. Ramprasad stated that this procedure is very common and the Cleveland Clinic has been ranked #1 in colorectal surgery for many years. Dr. Ramprasad opined that it is very specious to have someone come from Germany to teach laparoscopic colorectal surgery at the Cleveland Clinic.

TREATMENT PROVIDER APPLICATION REVIEWSCENTER FOR CHEMICAL ADDICTIONS TREATMENT

Dr. Madia moved to approve the renewal application for the Certificate of Good Standing as a Treatment Provider for Impaired Practitioners from the Center for Chemical Addictions Treatment. Dr. Strafford seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Mahajan	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Dr. Madia	- aye
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Mr. Gonidakis	- aye

The motion carried.

DUBLIN SPRINGS, LLC

Dr. Madia moved to approve the application for a Certificate of Good Standing as a Treatment Provider for Impaired Practitioners from Dublin Springs, LLC. Dr. Mahajan seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford	- aye
	Dr. Mahajan	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Dr. Madia	- aye
	Ms. Elsass	- aye
	Mr. Kenney	- aye
	Mr. Gonidakis	- aye

The motion carried.

RULE 4731-6-14, ELIGIBILITY FOR LICENSURE BY EXAMINATION

Mr. Miller stated that the Group 1 Committee has had discussions for a few months concerning this rule. Mr. Miller provided a draft of proposed legislation to address this issue which reflects the nature of the Committee's conversations. The draft proposed legislation will change the number of acceptable failures for any part of the United States Medical Licensing Examination (USMLE) or the Comprehensive Osteopathic Medical Licensing Examination (COMLEX) from three failures to five failures. Mr. Miller

stated that this change is reflective of USMLE and COMLEX policy recommendations.

Mr. Miller also stated that in the current rule, any individual who failed a step more than three times could complete an additional year of graduate medical education and retake the sequence. Mr. Miller stated that this provision has been removed because no individual taking that route has come before the Board.

Mr. Miller stated that the final change in the draft would allow the Board to grant a good cause exception on the attempt limit based upon the applicant holding specialty board certification or recertification from the American Board of Medical Specialties (ABMS) or the American Osteopathic Association (AOA)

Dr. Steinbergh expressed concern regarding approving licensure for physicians who need six attempts to pass a step of the USMLE or COMLEX. Dr. Steinbergh stated that she opposes this provision and opined that Ohio should have a high standard for its physicians. Dr. Steinbergh stated that medical students who have that much trouble passing these examinations will have a very difficult time getting into a residency. Dr. Steinbergh stated that she opposes the concept that it takes that long for a physician to pass the examinations.

Dr. Mahajan stated that he supports the ability to grant good cause exceptions based on specialty certification. Dr. Mahajan noted some recent cases in which well-qualified board-certified physicians were denied licensure due to the attempt limit. Dr. Mahajan stated that physicians who have advanced in their careers are very unlikely to go back and retake the entire testing sequence, as the Board has seen. Dr. Madia agreed, but cautioned that increased discretion can also lead to inconsistency.

Dr. Steinbergh noted that the Ohio University Heritage College of Osteopathic Medicine, which she serves as an assistant dean, is moving in the direction of not allowing students to move into the clinical years if they have not passed the first step of the COMLEX. Currently, students who have not passed the second step of the COMLEX are not allowed to graduate. Dr. Steinbergh opined that there are some medical students who ought not move forward and practice medicine. Dr. Steinbergh stated that the Board's mission is public protection and opined that to allow an individual five failures before passing an examination is very dubious. Dr. Steinbergh agreed with Dr. Mahajan regarding requirements to re-take the testing sequence.

Dr. Steinbergh asked why USMLE and COMLEX have decided to allow students to take their examinations so many times. Mr. Miller replied that the rationale he has seen is that if people have taken the test more than six times without passing, they are unlikely to ever pass it. Dr. Steinbergh commented that "unlikely to ever pass it" is different from "being competent."

Dr. Ramprasad stated that there is no data suggesting that someone who passes in three attempts is a better physician than someone who passes in six attempts. Dr. Ramprasad stated that if the USMLE and COMLEX allow six attempts, he does not see why the State Medical Board of Ohio should set a different standard in the absence of data showing that that standard is not good. Dr. Ramprasad further opined that if the Board does not approve, other interested organizations will lobby the legislature to adopt that standard anyway. Dr. Ramprasad also noted that the current draft to authorize expedited licensure makes no reference to the number of attempts to pass the examinations.

Dr. Madia stated that the Group 1 Committee reviewed all of these issues and recommended approval of the draft.

Dr. Madia moved to approve the draft proposed legislation as presented. Dr. Mahajan seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Mr. Miller stated that he has provided some comments from interested parties to the Board members. One comment from the American Osteopathic Association regards a suggestion to recognize some older examination sequences for osteopathic physicians to be parallel with that of allopathic physicians. Mr. Miller stated that he can work on including that in the draft and present it to the Board in March.

Dr. Madia moved to table this topic. Dr. Ramprasad seconded the motion. All members voted aye. The motion carried.

IMPLEMENTATION OF ORIENTAL MEDICINE LICENSURE

Mr. Miller stated that last month, the Board approved an application for practitioners of Oriental medicine. Some updates to the application are now required due to new things in the law. One requirement is that Oriental medicine practitioners, as well as acupuncturists, are required to demonstrate proficiency in spoken English as part of the licensure process. Mr. Miller stated that the current rule for physicians requires them to obtain a total score of 90, a score of 26 in the listening component, and a score of 26 in the speaking component. Mr. Miller stated that he examined the standards used by other allied practitioners, such as physical therapists and chiropractors, and the most common requirement was a total score of 80, a score of 23 in the listening component, and a score of 23 in the speaking component. Mr. Miller noted that the statute does not specify a score, and therefore it is left to the Board to decide.

Dr. Madia stated that the Group 1 Committee recommends that the same standards as those for physicians should be used for Oriental medicine practitioners. Mr. Miller stated that the Committee based this recommendation on the fact the Oriental medicine practitioners will have the ability to practice herbal medicine, which brings them on par with prescriptive authority.

Dr. Steinbergh asked how the examination for proficiency in English is administered. Ms. Rieve stated that it is a recorded internet-based examination with four parts: Listening, speaking, writing, and reading. The Board places greater emphasis on the listening and speaking components. Ms. Rieve stated that it is an all-day examination. Dr. Steinbergh asked if the Board has ever had any concerns with the test regarding physicians. Ms. Rieve replied that few physicians still take the examination because they can use the United States Foreign Medical Graduate testing and social skills assessment as a waiver. However, Ms. Rieve stated that the test is not simple and some individuals need two or three times to pass it.

Mr. Gonidakis asked who will take the examination. Mr. Miller stated that all Oriental medicine applicants are required to take it, including those who currently hold licensure as an acupuncturist. Mr.

Miller stated that there are currently about 150 licensed acupuncturists in Ohio and many of them are expected to apply for the Oriental medicine license. Mr. Miller noted that, as currently written, the statute requires all applicants to take the examination, even those who have lived in the United States their entire lives. Mr. Miller opined that that provision of the statute may be altered in the future.

Dr. Madia moved to require applicants for licensure as an Oriental medicine practitioner or acupuncturist be required to obtain a passing total score of 90 on the Test of English as a Foreign Language (TOEFL), a passing score of 26 on the listening component, and a passing score of 26 on the speaking component. Ms. Elsass seconded the motion. All members voted aye. The motion carried.

Mr. Miller stated that Oriental medicine practitioners are required to take a course in Food and Drug Administration (FDA) dispensary and compounding guidelines and procedures. Mr. Miller stated that the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) offers these courses. Mr. Miller asked the Board to amend the application to indicate that the NCCAOM must send the Board certification that the applicant has completed the appropriate course.

Dr. Strafford moved to amend the application for Oriental medicine to specify that the NCCAOM must provide the Board with certification that the applicant has completed the appropriate course. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

Mr. Miller stated that newly-licensed acupuncturists are required to undergo a supervisory period with a physician or chiropractor. Mr. Miller stated that this requirement also applies to Oriental medicine practitioners. The Group 1 Committee recommends that all Oriental medicine practitioners be required to undergo the supervisory period, even if they underwent such a period as an acupuncturist. The Committee felt that this is appropriate because the Oriental medicine practitioners will be potentially utilizing herbal medication.

Dr. Madia moved to require newly-licensed Oriental medicine practitioners to undergo a supervisory period with a physician or chiropractor, regardless of whether the individual underwent a similar supervisory period as an acupuncturist. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

Dr. Steinbergh commented that the public will expect that the Medical Board will be experts at Oriental medicine since the Board is licensing them and has responsibility over them. Because of this, Dr. Steinbergh favors a strong supervisory period for newly-licensed Oriental medicine practitioners. Dr. Mahajan asked if Oriental medicine practitioners and acupuncturists can be invited to present to the Board regarding their practices. Ms. Anderson replied that that can be arranged.

Dr. Steinbergh asked for clarification that out-of-state applicants for an Oriental medicine license will also be required to undergo a supervisory period. Mr. Miller confirmed that that is the case.

INQUIRY REGARDING MINIMAL STANDARDS OF CARE

Dr. Steinbergh stated that this inquiry regarding a specialty physician's responsibility relative to the receipt of testing results ordered by a primary care physician has been discussed by the Board at previous meetings. Dr. Steinbergh stated that the Group 2 Committee has approved a draft response to the inquiry which reads, in part, "It is recommended that the policy should identify the ordering physician, no matter the specialty or routine relationship to the patient, as the person responsible for initiating follow-up abnormal results. At the same time, it is recognized that your policy might incorporate other process that reflects the make-up and needs of the practitioners who participate in your EHR system. It is imperative that each provider who participates in the system should be expected to comply with that particular policy, i.e. the policy of your system."

Dr. Mahajan exited the meeting at this time.

Dr. Steinbergh stated that this response places the onus on the ordering physician to respond to abnormal lab values. Dr. Steinbergh stated that Ms. Debolt found the rationale for this position as a recommendation from the Joint Commission Journal on Quality and Patient Safety (Joint Commission). The Group 2 Committee felt it would be appropriate to attach the Joint Committee's recommendations to the response.

Dr. Madia moved to approve the draft response. Dr. Ramprasad seconded the motion.

Dr. Steinbergh stated that she would now entertain discussion in the above matter.

Dr. Madia stated that in making this response, the Board is making a policy. Dr. Madia asked if the Board can send this policy as an e-Blast to its licensees. Ms. Debolt agreed that the response, if approved, does become a policy and would be appropriate to send in an e-Blast to licensees.

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

Dr. Mahajan returned to the meeting at this time.

PHYSICIAN ASSISTANT MATTERS

SPECIAL SERVICES PLAN

DERMATOLOGY ASSOCIATES

Dr. Steinbergh stated that this topic was tabled in the Group 2 Committee.

ORTHOPAEDIC FOOT AND ANKLE

Dr. Steinbergh stated that last month, the Board tabled the special service plan applications of Orthopaedic Foot and Ankle for ultrasound guidance of various joint injections. Dr. Steinbergh stated that Orthopaedic Foot and Ankle has addressed the Board's concerns and provided an algorithm for their decision-making regarding ultrasound guidance, as well as a number of articles in support of using ultrasound guidance.

Dr. Steinbergh stated that the Group 2 Committee recommends approval of the Special Service Plans, with added language indicating that the ultrasound would be used with the professional judgment of the clinician and that ultrasound guidance would not be necessary for all procedures. Dr. Mahajan stated that the added language was included because the Committee wanted to emphasize that ultrasound guidance is not being established as the standard of care for these injections.

Dr. Mahajan moved to approve the Special Service Plan applications of Orthopaedic Foot and Ankle and to include language indicating that the use of ultrasound guidance will be used with the professional judgment of the clinician and that ultrasound guidance is not necessary for all procedures. Dr. Strafford seconded the motion. All members voted aye. The motion carried.

FORMULARY CHANGE

Dr. Steinbergh stated that the Physician Assistant Policy Committee (PAPC) is in the process of developing changes to the physician assistant formulary. When the formulary is complete and approved by the PAPC, it will come to the Group 2 Committee and the Board.

CHANGES TO CERTIFICATE TO PRESCRIBE APPLICATION

Ms. Rieve asked the Board to approve an amendment to the application for a certificate to prescribe as a physician assistant. The amendment would add a place for the applicant to indicate if he or she has prescriptive authority in another state.

Dr. Mahajan moved to approve the proposed amendment. Dr. Madia seconded the motion. All members voted aye. The motion carried.

AD HOC EXECUTIVE DIRECTOR SEARCH COMMITTEE

Dr. Steinbergh stated that the Executive Director Search Committee met yesterday afternoon and reviewed approximately 70 applicants for the position. The Committee identified a few applicants for interview. Dr. Steinbergh stated that the interview process will begin next month and will continue into April. Other Board members will be able to participate in interviewing those who are chosen for the second round of interviews. Dr. Steinbergh stated that the goal is to have an Executive Director in place by June. Dr. Steinbergh stated that the Board is fortunate to have a strong Interim Executive Director while the selection process continues.

BUCKEYE OSTEOPATHIC PHYSICIAN MAGAZINE

Dr. Strafford noted that Dr. Steinbergh has been identified as one of seven Women Leaders in the current edition of *Buckeye Osteopathic Physician* magazine. The Board and staff applauded this recognition of Dr. Steinbergh's contributions to the profession.

NEWSLETTER

February 14, 2013

Ms. Wehrle asked for approval to send the Board's newsletter and to select between the "Grand Round" title page and the "Your Report" title page. Dr. Steinbergh stated that the Executive Committee recognized the value of the yellow "Your Report" had to Ohio physicians over the years and there is consideration of sending out hardcopies, has had been done in the past. The Board had no objection to sending the newsletter with the "Your Report" title.

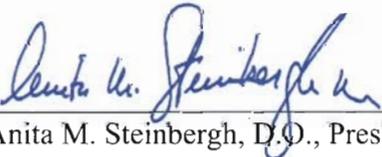
MINUTES OF DECEMBER 13, 2012 BOARD MEETING

Mr. Taylor asked the Board to amend the approved minutes of the December 13, 2012 Board meeting regarding the probationary request of Martin R. Hobowsky, D.O., to read as follows: "To approve the Secretary's recommendation to reduce Martin R. Hobowsky, D.O.'s appearances to once every six months."

Dr. Madia moved to amend the minutes of the December 13, 2012 Board meeting as requested. Dr. Mahajan seconded the motion. All members voted aye. The motion carried.

Thereupon at 11:45 am, the February 14, 2013, meeting of the State Medical Board of Ohio was duly adjourned by Dr. Steinbergh.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio meeting on February 13-14, 2013, as approved on March 13, 2013.


Anita M. Steinbergh, D.O., President


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

(SEAL)

