Anita M. Steinbergh, D.O., President, called the meeting to order at 12:00 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; Donald R. Kenney, Sr.; Michael L. Gonidakis; Amol Soin, M.D.; Sushil M. Sethi, M.D.; and Bruce R. Saferin, D.P.M. The following member did not attend: Lance A. Talmage, M.D.

Also present were: Aaron Haslam, Executive Director; Kimberly Anderson, Assistant 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; K. Randy Beck, Interim Chief of Investigations; Rebecca Marshall, Chief Enforcement Attorney; David Katko, Marcie Pastrick, Karen Mortland, Mark Blackmer, Angela McNair; Cheryl Pokorny, and Dennis Tenison, Enforcement Attorneys; Katherine Bockbrader, Kyle Wilcox, Melinda Snyder, Heidi Dorn, and Henry Appel, Assistant Attorneys General; Gregory Porter, Interim Chief Hearing Examiner; Danielle Blue, Hearing Examiner; Gary Holben, Operations Administrator; Danielle Bickers, Compliance Supervisor; Annette Jones, Compliance Officer; Kay Rive, 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. Bechtel moved to approve the draft minutes of the September 11-12, 2013, Board meeting, as written. Dr. Saferin seconded the motion. All members voted aye. The motion carried.

EXECUTIVE SESSION

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

ROLL CALL: 

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<tr>
<td>Dr. Strafford</td>
<td>aye</td>
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<td>Dr. Bechtel</td>
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<tr>
<td>Dr. Soin</td>
<td>aye</td>
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<tr>
<td>Dr. Ramprasad</td>
<td>aye</td>
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<tr>
<td>Dr. Steinbergh</td>
<td>aye</td>
</tr>
<tr>
<td>Dr. Saferin</td>
<td>aye</td>
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<td>Dr. Sethi</td>
<td>aye</td>
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</table>
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 Mr. Haslam, Ms. Anderson, Ms. Loe, Ms. Debolt, Ms. Wehrle, Mr. Beck, Ms. Marshall, the Enforcement Attorneys, the Assistant Attorneys General, Ms. Rieve, Ms. Weaver, Ms. Jacobs, Ms. Moore, Ms. Brooks, and Mr. Taylor in attendance.

The Board returned to public session.

APPLICANTS FOR LICENSURE

Dr. Soin 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,” the radiologist assistant applicants listed in Exhibit “D,” and the Oriental medical practitioner applicants listed in Exhibit “E.” Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - 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: Steven Francis Brezny, M.D.; Ronald Michael Johns, P.A.; and Mahendrakumar Chiman Shah, M.D.

A roll call was taken:
ROLL CALL:
Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye (except in the matter of Dr. Brezny)
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

Dr. Steinbergh noted that she did not read or consider the hearing record and other materials concerning Dr. Brezny. Dr. Steinbergh will recuse from the discussion and vote in that matter.

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 or permanent denial. A roll call was taken:

ROLL CALL:
Dr. Strafford - aye
Dr. Bechtel - aye
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - 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. Steinbergh acted as Acting Secretary in the matter of Dr. Brezny.

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.

STEVEN FRANCIS BREZNY, M.D. Case No. 13-CRF-020

Dr. Steinbergh directed the Board’s attention to the matter of Steven Francis Brezny, M.D. She advised that no objections were filed. Mr. Porter was the Hearing Examiner.

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

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

Ms. Collis stated that in October 2010, the Medical Board issued a subpoena to Dr. Brezny for certain medical records. Dr. Brezny was able to submit some of the requested records to the Board, but he was unable to submit some records because his office-based computer system failed.

Ms. Collis continued that in November 2010, the Board ordered Dr. Brezny to a psychiatric evaluation, scheduled for December 2010. At that time, Dr. Brezny was in the midst of a divorce, his home was being foreclosed on, and his practice was failing because he was unable to maintain his bills. Because Dr. Brezny did not have the $1,400.00 required to pay for the psychiatric evaluation, he asked that it be rescheduled. The evaluation was rescheduled for January 2011, but Dr. Brezny still did not have the necessary funds at that time. Based on Dr. Brezny’s failure to submit to the evaluation and to fully comply with the Board’s subpoena request, the Board suspended Dr. Brezny’s medical license in February 2011, and it remains suspended at this time.

In July 2011, the Board issued an Order establishing conditions for reinstatement of Dr. Brezny’s medical license, including two psychiatric evaluations and compliance with the Board’s subpoena for medical records. Ms. Collis stated that Dr. Brezny has submitted two psychiatric evaluations with board-approved psychiatrists, both of which determined that Dr. Brezny is fit to practice medicine.

Ms. Collis continued that Dr. Brezny has submitted an application for reinstatement of his license; attached to that application is a document outlining all the steps Dr. Brezny has taken to comply with the Board’s subpoena, including retaining office-based computer experts in an attempt to retrieve the medical records. Unfortunately, those efforts were unsuccessful. Ms. Collis further noted that Dr. Brezny delivered his entire central processing unit (CPU) to the medical board intact so that the Board could attempt to retrieve the records itself.

In April 2013, the Board issued a Notice proposing to deny Dr. Brezny’s reinstatement application based solely on the fact that Dr. Brezny has failed to comply with the Board’s subpoena. Ms. Collis stated that following another hearing, the Hearing Examiner has recommended that the Board delete the requirement that he comply with the Board’s subpoena because it is impossible. Ms. Collis noted that Dr. Brezny is in compliance with all other requirements of the Board, his license has been suspended for two years, and he has never been determined to be mentally unfit to practice medicine. Ms. Collis asked the Board to affirm the Hearing Examiner’s recommendation and to reinstate Dr. Brezny’s medical license.

Dr. Brezny stated that he has taken all steps to comply with the Board’s July 2011 Order, including obtaining two psychiatric evaluations which found that he is fit to practice medicine. Dr. Brezny stated that he has taken extensive steps to comply with the Board’s subpoena, including working with two computer experts to retrieve the medical records from the computer system. When those attempts failed, Dr. Brezny delivered the computer server intact to the Board for its inspection. Dr. Brezny stated that the Hearing Examiner has ruled that the subpoena is impossible to meet.
Dr. Brezny stated that he has been out of practice for two years. Dr. Brezny stated that he has completed his return-to-work evaluations and has never been found to be mentally unfit to practice medicine. Dr. Brezny asked the Board to approve the Report and Recommendation and to reinstate his medical license.

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

Mr. Appel stated that the Board’s July 2011 Order required two things of Dr. Brezny. First, Dr. Brezny was required to obtain psychiatric evaluations from two board-approved psychiatrists, which Dr. Brezny has done. Mr. Appel noted that both psychiatrists opined that Dr. Brezny is able to resume the practice of medicine, though one psychiatrist strongly encouraged Dr. Brezny not to return to solo practice and to instead seek out a more structured environment.

Mr. Appel stated that the crux of the matter currently before the Board is the fact that Dr. Brezny has yet to provide 30 of 37 subpoenaed medical records. Mr. Appel stated that Dr. Brezny has presented evidence that he hired computer experts in an attempt to retrieve data from the computer server. Dr. Brezny also brought the server to the Board’s offices, though the Board staff was also unsuccessful in retrieving the data. Mr. Appel stated that the question before the Board is whether to waive the requirement that Dr. Brezny provide all of the subpoenaed documents. Mr. Appel stated that this matter turns on the Board’s expertise as physicians and as Board members. Mr. Appel stated that the Board must rely on its sound discretion as to whether Dr. Brezny should be required to provide the additional 30 patient records in light of the impossibility of pulling that data from the server.

Dr. Soin moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Steven Francis Brezny, M.D. Dr. Ramprasad seconded the motion.

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

Dr. Ramprasad stated that Dr. Brezny was sent a subpoena on October 5, 2010, and was required to provide 37 patient records by October 25, 2010. Dr. Brezny had provided seven patient records by January 2011, at which time Dr. Brezny was evicted from his office. Dr. Brezny had indicated that he had been extremely busy and could not turn over the patient records in October 2010, November 2010, or December 2010. When Dr. Brezny was evicted from his office in January 2011, he no longer had access to his computer server. Dr. Brezny has acknowledged that he did not ask his landlord to allow him access to the records following the eviction, nor did he ask the Medical Board to subpoena the records that were in a storage facility in the initial time period.

Dr. Ramprasad continued that, according to Dr. Brezny, one of the system’s hard drives failed in October 2010 and another failed in December 2010. Dr. Brezny hired a company to fix the system, which was unsuccessful. Dr. Brezny then brought the server to the Medical Board, but the Medical Board does not have the expertise to repair the server. Dr. Ramprasad stated that Dr. Brezny had time to recover the records when he was initially subpoenaed and for three months afterwards, but did not do so at that time.

Dr. Ramprasad suggested amending Finding of Fact #4 of the Report and Recommendation to indicate that
Dr. Ramprasad stated that, given the fact that Dr. Brezny could have provided the documents in the three months following the service of the subpoena and the possibility that he may still be able to retrieve the records, he wished to offer amendments to the Report and Recommendation. In addition to his suggestions regarding Finding of Fact #4, Dr. Ramprasad also suggested that the Conclusion of Law of the Report and Recommendation be amended to reflect the amended Finding of Fact #4. Dr. Ramprasad further suggested that the Proposed Order be amended to deny Dr. Brezny’s application for reinstatement.

**Dr. Ramprasad moved to amend Finding of Fact #4 of the Report and Recommendation to read as follows:**

4. The evidence is insufficient to support a finding that Dr. Brezny has taken all reasonable measures to comply with the Board’s October 2010 subpoena and paragraph B.2 of the July 2011 Board Order. The Board finds that Dr. Brezny should take additional measures to retrieve the missing data, to include seeking additional computer service provider(s) to examine his server and retrieve the necessary information.

**Dr. Ramprasad further moved to amend the Conclusion of Law of the Report and Recommendation to read as follows:**

As set forth in the Findings of Fact, although Steven Francis Brezny, M.D., has requested reinstatement of his certificate to practice medicine and surgery in Ohio, he has failed to fulfill the condition for reinstatement set forth in paragraph B.2 of the July 2011 Board Order. Moreover, the evidence does not establish that Dr. Brezny has exhausted all reasonable measures to fulfill that condition. Accordingly, his application for reinstatement must be denied.

**Dr. Ramprasad further moved to amend the Proposed Order of the Report and Recommendation to read as follows:**

It is hereby ORDERED that:

A. The application of Steven Francis Brezny, M.D., for reinstatement of his certificate to practice medicine and surgery in Ohio is DENIED.

B. All terms and conditions of the July 2011 Entry of Order shall remain in full force and effect.
This Order shall become effective immediately upon the mailing of the notification of approval by the Board.

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

**ROLL CALL:**

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<td>Dr. Soin</td>
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<td>Dr. Ramprasad</td>
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<td>Dr. Steinbergh</td>
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<td>Dr. Saferin</td>
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<td>Dr. Sethi</td>
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<td>Mr. Kenney</td>
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<td>Mr. Gonidakis</td>
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The motion to amend carried.

**Dr. Saferin moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Steven Francis Brezny, M.D. Dr. Soin seconded the motion.** A vote was taken:

**ROLL CALL:**

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<td>Dr. Saferin</td>
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<td>Dr. Sethi</td>
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<td>Mr. Kenney</td>
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<td>Mr. Gonidakis</td>
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The motion to approve carried.

**RONALD MICHAEL JOHNS, P.A., Case No. 13-CRF-039**

Dr. Steinbergh directed the Board’s attention to the matter of Ronald Michael Johns, P.A. She advised that no objections were filed. Ms. Blue was the Hearing Examiner.

**Dr. Soin moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Ronald Michael Johns, P.A. Dr. Ramprasad seconded the motion.**

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

Mr. Kenney stated that Mr. Johns was first licensed as a physician assistant in Ohio in 2006. In 2008, Mr.
Johns was released from his employment due to allegations of drug abuse. Mr. Johns’ physician assistant license expired in 2010 and was revoked by the Medical Board later that year. Also in 2010, Mr. Johns permanently surrendered his paramedic certificate. In 2012, Mr. Johns submitted an application to the Medical Board for another physician assistant license.

Reviewing Mr. Johns’ history, Mr. Kenney stated that Mr. Johns entered into a Step I Consent Agreement in 2009. At that time, Mr. Johns made admissions that he was chemically dependent and had inappropriately obtained controlled substances for his own use. The Step I Consent Agreement suspended Mr. Johns’ physician assistant license for no less than 180 days, subject to terms and conditions including successful completion of at least 28 days of inpatient treatment. In July 2010, the Board issued a citation to Mr. Johns based on allegations that he had failed to comply with his Step I Consent Agreement. Mr. Johns did not request a hearing, and subsequently the Board accepted the Proposed Findings that Mr. Johns was impaired and had failed to comply with his Consent Agreement’s stipulation that he complete 28 days of inpatient treatment in a Board-approved facility. In November 2010, Mr. Johns pleaded guilty to, and was found guilty of, several counts of aggravated possession of drugs and illegal processing of drug documents. Mr. Johns now claims that his sobriety dates from January 13, 2011, but he submitted no documentation to support this claim.

Mr. Kenney noted the Hearing Examiner’s Conclusions of Law, which stated that Mr. Johns’ acts, conduct, and/or omissions establish impairment of Mr. Johns’ ability to practice as a physician assistant based on acceptable and prevailing standards due to habitual or excessive use of drugs and alcohol. The Conclusions of Law also state that Mr. Johns does not qualify for a license to practice as a physician assistant because he does not hold a current certification by the National Commission on Certification of Physician Assistants.

Mr. Kenney stated that the Hearing Examiner recommends that the Board non-permanently deny Mr. Johns’ application for licensure. However, Mr. Kenney reiterated that Mr. Johns has not successfully completed 28 days of treatment by a Board-approved provider, there is no documentation of Mr. Johns’ continuing sobriety, and Mr. Johns was found guilty of 10 drug-related felonies. Further, Mr. Johns has permanently surrendered his paramedic certificate in Ohio. Mr. Kenney stated that he disagrees with the Hearing Examiner and, based on the Findings of Fact and Conclusions of Law, suggested that Mr. Johns’ application be permanently denied.

Mr. Kenney moved to amend the Proposed Order of the Report and Recommendation to permanently deny Mr. Johns’ application for a license to practice as a physician assistant in Ohio. Dr. Ramprasad seconded the motion. A vote was taken:

**ROLL CALL:**

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<td>Dr. Strafford</td>
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<td>Dr. Bechtel</td>
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<tr>
<td>Dr. Soin</td>
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<td>Dr. Ramprasad</td>
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<td>Dr. Steinbergh</td>
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<td>Dr. Saferin</td>
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<td>Dr. Sethi</td>
<td>- aye</td>
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Mr. Kenney - aye
Mr. Gonidakis - aye

The motion to amend carried.

**Dr. Soin moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Ronald Michael Johns, P.A. Mr. Kenney seconded the motion.** A vote was taken:

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<td>Dr. Strafford</td>
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<td>Dr. Bechtel</td>
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<td>Dr. Soin</td>
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<td>Dr. Ramprasad</td>
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<td>Dr. Steinbergh</td>
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<td>Dr. Saferin</td>
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<td>Dr. Sethi</td>
<td>aye</td>
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<tr>
<td>Mr. Kenney</td>
<td>aye</td>
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<td>Mr. Gonidakis</td>
<td>aye</td>
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The motion to approve carried.

**MAHENDRAKUMAR CHIMAN SHAH, M.D., Case No. 13-CRF-009**

Dr. Steinbergh directed the Board’s attention to the matter of Mahendrakumar Chimn Sha, M.D. She advised that no objections have been filed. Ms. Blue was the Hearing Examiner.

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

Dr. Shah was represented by his attorney, Jim McGovern.

Mr. McGovern stated that he fully supports the Hearing Examiner’s Report and Recommendation. Mr. McGovern stated that Dr. Shah practices in the relatively underserved Route 7 corridor in Meigs County. Because of this, Mr. McGovern asked the Board to provide a wind-down period, as the Board has done in the past, so that Dr. Shah’s suspension becomes effective 30 days after the effective date of the Board’s Order. Mr. McGovern stated that a wind-down period would allow Dr. Shah to transition his practice and would better serve the patients who are currently under his care.

Dr. Shah apologized for and regretted his actions in West Virginia. Dr. Shah thanked the Hearing Examiner, Ms. Blue, and the Assistant Attorney General, Ms. Snyder, for giving him the opportunity to explain everything at the hearing. Dr. Shah stated that he had practiced medicine in West Virginia for 30 years, but is now practicing in Meigs County, Ohio, which is a poor area with no physician within a 10-mile area. Dr. Shah stated that he practices without a Drug Enforcement Administration (DEA) certificate and has learned to treat pain and other conditions without prescribing controlled substances.
Dr. Shah stated that he has made some mistakes but he has learned from them. Dr. Shah stated that it is his lifelong commitment that these things will never happen again. Dr. Shah stated that he will undertake any education that the Board deems appropriate. Dr. Shah stated that he would like to retire in about five or ten years as a good doctor.

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

Ms. Snyder stated that this case is based on action taken by the West Virginia Board of Medicine. Following an investigation, the West Virginia Board found that Dr. Shah was prescribing controlled substances to patients who did not really need them. The West Virginia Board also found that Dr. Shah had sex with a patient. The West Virginia Board found these violations serious enough to warrant the permanent surrender of Dr. Shah’s West Virginia medical license. Dr. Shah was also required to turn in his DEA certificate to prescribe controlled substances.

In his Ohio hearing, Dr. Shah admitted that he had sex with a patient. Ms. Snyder found it striking that Dr. Shah had previously been approached by the West Virginia Board with concerns that he had been engaging in sex with a patient. While this was not the case at that time, Dr. Shah did have sex with a patient about six months later knowing that the West Virginia Board was watching and knowing that it was wrong. Ms. Snyder also noted that Dr. Shah applied to regain his DEA certificate to prescribe controlled substances, but was denied.

Ms. Snyder briefly reviewed the issues in the case. First, Dr. Shah permanently surrendered his West Virginia medical license. Second, Dr. Shah does not have a DEA certificate to prescribe controlled substances. Third, Dr. Shah admits that he had sex with a patient. Fourth, Dr. Shah engaged in questionable prescribing in West Virginia. Ms. Snyder stated that she supports the Report and Recommendation, but did not oppose Dr. Shah’s request for a 30-day wind-down period.

**Dr. Sethi moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Mahendrakumar Chiman Shah, M.D. Dr. Ramprasad seconded the motion.**

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

Dr. Soin stated that Dr. Shah was a solo practitioner in internal medicine in Point Pleasant, West Virginia, from 1983 to 2012. On May 9, 2010, the West Virginia Board of Medicine initiated a complaint based on an anonymous complaint that Dr. Shah was having sex with patients in exchange for prescriptions. On June 8, 2010, Dr. Shah submitted the following statement: “I, Dr. Shah, have never engaged a patient in sexual activity.”

Dr. Soin continued that on July 3, 2012, the West Virginia Board filed an Amended Complaint and Notice of Hearing to Dr. Shah. The West Virginia Board’s investigation revealed that Dr. Shah engaged in sexual intercourse with a patient in December 2010 or January 2011, in March or April 2011, and approximately
in August 2011. Dr. Shah concedes that he had brief, improper sexual contact with the patient on three occasions in 2011. Additionally, Dr. Shah had prescribed multiple controlled substances over periods of years to patients whose medical conditions did not warrant the use of multiple controlled substances over an extended period of time. Dr. Shah’s medical records did not justify his course of treatment for some patients. Dr. Soin noted that the West Virginia Office of Medical Examiner attributed the cause of death of one of Dr. Shah’s patients to drug intoxication. In September, 2012, Dr. Shah entered into a Consent Order with the West Virginia Board in which he permanently surrendered his West Virginia medical license and agreed to surrender his DEA certificate.

Dr. Soin stated that Dr. Shah is currently practicing internal medicine in Middleport, Ohio, where he employs a nurse and a secretary and sees eight to ten patients per day. In his West Virginia Consent Order, Dr. Shah stated that he intended to retire from the practice of medicine due to health problems. However, Dr. Shah now says that his health problems have resolved and he is practicing in Ohio. Dr. Shah testified that, “I will work till I die.”

Dr. Soin stated that the Proposed Order would suspend Dr. Shah’s Ohio medical license for at least one year. Dr. Soin opined that the Order should be amended to a permanent revocation. Dr. Soin based this suggestion on the fact that Dr. Shah has already surrendered his West Virginia medical license because he committed an egregious act of sexual contact with a patient. Dr. Soin found it very puzzling that Dr. Shah had denied to the West Virginia Board that he had had sexual contact with a patient, yet went on to have a sexual relationship with a patient six months later. Dr. Soin stated that his suggestion is also based on general medical practice issues, like over-prescribing of medications and prescribing controlled substances without appropriate documentation of medical necessity, resulting in a patient death.

**Dr. Soin moved to amend the Proposed Order of the Report and Recommendation to permanently revoke Dr. Shah’s license to practice medicine and surgery in Ohio. Dr. Ramprasad seconded the motion.**

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

Dr. Steinbergh supported Dr. Soin’s proposed amendment. Dr. Steinbergh stated that she was particularly bothered that Dr. Shah had been aware that the West Virginia Board had begun an investigation and had concerns about his behavior. Dr. Steinbergh noted that nothing in the hearing record states that Dr. Shah was having sex with a patient when the West Virginia Board began its investigation. However, Dr. Steinbergh had difficulty believing that Dr. Shah began that behavior only after the investigation began. Dr. Steinbergh also expressed concern that the patient Dr. Shah chose to have a sexual relationship with was being treated for chronic pain related to her cervical cancer and also suffered from chronic anxiety. Dr. Steinbergh noted that, according to Dr. Shah’s testimony, he may have touched the patient in her genitalia area at his office.

Dr. Steinbergh stated that these are egregious acts against a patient, and she therefore agreed with Dr. Soin’s amendment to permanently revoke Dr. Shah’s Ohio medical license.

A vote was taken on Dr. Soin’s motion to amend:
ROLL CALL:  
Dr. Strafford - abstain  
Dr. Bechtel - abstain  
Dr. Soin - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Saferin - aye  
Dr. Sethi - aye  
Mr. Kenney - aye  
Mr. Gonidakis - aye  

The motion to amend carried.  

Dr. Ramprasad moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Mahendrakumar Chiman Shah, M.D. Dr. Soin seconded the motion. A vote was taken:  

ROLL CALL:  
Dr. Strafford - abstain  
Dr. Bechtel - abstain  
Dr. Soin - aye  
Dr. Ramprasad - aye  
Dr. Steinbergh - aye  
Dr. Saferin - aye  
Dr. Sethi - aye  
Mr. Kenney - aye  
Mr. Gonidakis - aye  

The motion to approve carried. 

PROPOSED FINDINGS AND PROPOSED ORDERS 

CAROLINE ELIZABETH-MAE HOWALD, Case Nos. 11-CRF-038 and 11-CRF-039  

Dr. Steinbergh directed the Board’s attention to the matter of Caroline Elizabeth-Mae Howald. She advised that the Board issued a Notice of Opportunity for Hearing to Ms. Howald and documentation of service was received. There was no request for hearing filed, and more than 30 days have elapsed since the mailing of the Notice. This matter was reviewed by Hearing Examiner Porter, who prepared Proposed Findings and Proposed Order, and it is now before the Board for final disposition. 

Dr. Ramprasad moved to find that the allegations as set forth in the April 13, 2011 Notice of Opportunity for Hearing in the matter of Ms. Howald have been proven to be true by a preponderance of the evidence and to adopt the Proposed Findings and Proposed Order. Dr. Soin seconded the motion. 

Dr. Steinbergh stated that she will now entertain discussion in the above matter.
Mr. Gonidakis stated that Ms. Howald has applied for a license to practice massage therapy in Ohio. On her application, Ms. Howald confirmed that she had been arrested in the past: Once in Chicago, Illinois, and once in Wilmington, North Carolina, for possession of drug paraphernalia. However, Ms. Howald failed to disclose that she had also been arrested and convicted on numerous other occasions. In 2005, Ms. Howald was arrested in Toledo, Ohio, for soliciting sex and loitering; she pleaded guilty to an amended charge of disorderly conduct. In addition, Ms. Howald was actually arrested three times in North Carolina, all for possessing drug paraphernalia, to which she pleaded guilty. Mr. Gonidakis further noted that a Medical Board investigator learned that there is also an outstanding arrest warrant for Ms. Howald for solicitation. Mr. Gonidakis stated that these acts constitute making false statements in an attempt to secure a license from the Board, in violation of Section 4731.22(B)(5), Ohio Revised Code.

Mr. Gonidakis continued that the Medical Board sent a letter to Ms. Howald, dated February 2, 2011, ordering her to an outpatient examination to determine if she was impaired due to chemical dependency. Ms. Howald did not respond to the letter. Mr. Gonidakis stated that failure to submit to an examination ordered by the Board constitutes an admission to the allegations. Mr. Gonidakis supported the Proposed Order to permanently deny Ms. Howald’s application to practice massage therapy.

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

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion carried.

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

Dr. Steinbergh stated that the Board will now consider the proposed Citations, Orders of Summary Suspension, and Notices of Immediate Suspension on the agenda. Ms. Marshall will provide a brief synopsis of each prior to the Board voting on whether to send. Dr. Steinbergh advised the Board members that the identity of the practitioners are confidential and cannot be mentioned in public session unless and until the Citation, Order of Summary Suspension, or Notice of Immediate Suspension is approved by vote of the Board.

JAMES P. CLEARY, D.O. – CITATION LETTER
At this time the Board read and considered the proposed Citation Letter in the above matter, a copy of which shall be maintained in the exhibits section of this Journal.

**Dr. Ramprasad moved to send the Citation Letter to Dr. Cleary. Dr. Soin seconded the motion.** A vote was taken:

**ROLL CALL:**

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The motion to send carried.

**CLINTON J. CORNELL, P.A. – 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. Ramprasad moved to send the Citation Letter to Mr. Cornell. Dr. Soin seconded the motion.** A vote was taken:

**ROLL CALL:**

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The motion to send carried.

**NICHOLAS C. DIAMANTIS, 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. Ramprasad moved to send the Citation Letter to Dr. Diamantis. Dr. Sethi seconded the motion.***
A vote was taken:

**ROLL CALL:**

- Dr. Strafford - abstain
- Dr. Bechtel - abstain
- Dr. Soin - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Saferin - aye
- Dr. Sethi - aye
- Mr. Kenney - aye
- Mr. Gonidakis - aye

The motion to send carried.

**MATTHEW J. GOLDSCHMIDT, 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. Ramprasad moved to send the Citation Letter to Dr. Goldschmidt. Dr. Saferin seconded the motion.** A vote was taken:

**ROLL CALL:**

- Dr. Strafford - abstain
- Dr. Bechtel - abstain
- Dr. Soin - aye
- Dr. Ramprasad - aye
- Dr. Steinbergh - aye
- Dr. Saferin - aye
- Dr. Sethi - aye
- Mr. Kenney - aye
- Mr. Gonidakis - aye

The motion to send carried.

**TIMOTHY MICHAEL HICKEY, 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. Soin moved to send the Citation Letter to Dr. Hickey. Dr. Ramprasad seconded the motion.** A vote was taken:

**ROLL CALL:**

- Dr. Strafford - abstain
- Dr. Bechtel - abstain
The motion to send carried.

RAMANADHAM KILARU, 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. Ramprasad moved to send the Citation Letter to Dr. Kilaru. Dr. Sethi seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion to send carried.

JAMES E. LASSITER, M.D. – NOTICE OF IMMEDIATE SUSPENSION AND OPPORTUNITY FOR HEARING

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

Dr. Ramprasad moved to send the Notice of Immediate Suspension and Opportunity for Hearing to Dr. Lassiter. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
The motion to send carried.

DAVID EDWARD NOONAN, JR. – 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. Ramprasad moved to send the Citation Letter to Mr. Noonan. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL: Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion to send carried.

BABAR A. QADRI, P.A. – 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. Sethi moved to send the Citation Letter to Mr. Qadri. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL: Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye
The motion to send carried.

**STEPHEN L. PIERCE, M.D. – NOTICE OF IMMEDIATE SUSPENSION AND OPPORTUNITY FOR HEARING**

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

**Dr. Ramprasad moved to send the Notice of Immediate Suspension and Opportunity for Hearing to Dr. Pierce. Mr. Kenney seconded the motion.** A vote was taken:

**ROLL CALL:**

Dr. Strafford  - abstain
Dr. Bechtel   - abstain
Dr. Soin      - aye
Dr. Ramprasad - aye
Dr. Steinbergh- aye
Dr. Saferin   - aye
Dr. Sethi     - aye
Mr. Kenney    - aye
Mr. Gonidakis - aye

The motion to send carried.

**MARK A. WEINER, D.O. – NOTICE OF SUMMARY SUSPENSION AND OPPORTUNITY FOR HEARING**

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

**Dr. Sethi moved to send the Notice of Summary Suspension and Opportunity for Hearing to Dr. Weiner. Dr. Ramprasad seconded the motion.** A vote was taken:

**ROLL CALL:**

Dr. Strafford  - abstain
Dr. Bechtel   - abstain
Dr. Soin      - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin   - aye
Dr. Sethi     - aye
Mr. Kenney    - aye
Mr. Gonidakis - aye

The motion to send carried.
RATIFICATION OF SETTLEMENT AGREEMENTS

NICHOLAS ANTHONY ATANASOFF, D.O. – STEP II CONSENT AGREEMENT

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

ROLL CALL:

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The motion to ratify carried.

PHILICIA S. DUNCAN, M.D. – STEP II CONSENT AGREEMENT

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

A vote was taken on Dr. Soin’s motion to ratify:

ROLL CALL:

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The motion to ratify carried.

JOHN SHERMAN HENRY, M.D. – STEP I CONSENT AGREEMENT

Dr. Saferin moved to ratify the Proposed Step I Consent Agreement with Dr. Henry. Dr. Ramprasad seconded the motion. A vote was taken:
ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion to ratify carried.

CARLA MELINDA MYERS, D.O. – STEP I CONSENT AGREEMENT

Dr. Sethi moved to ratify the Proposed Step I Consent Agreement with Dr. Myers. Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion to ratify carried.

MONA REZAEL-MIRGHAED, M.D. – WITHDRAWAL OF APPLICATION FOR TRAINING CERTIFICATE

Dr. Saferin moved to ratify the Proposed Withdrawal of Application for Training Certificate with Dr. Rezaei-Mirghaed. Dr. Sethi seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye
The motion to ratify carried.

ROBERT C. TURNER, M.D. – PROBATIONARY CONSENT AGREEMENT

Dr. Ramprasad moved to ratify the Proposed Probationary Consent Agreement with Dr. Turner. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL: Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion to ratify carried.

MICHAEL THEODORE BANGERT, M.D. – PROBATIONARY CONSENT AGREEMENT

Dr. Saferin moved to ratify the Proposed Probationary Consent Agreement with Dr. Bangert. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL: Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion to ratify carried.

LAWRENCE M. RUBENS, M.D. – STEP I CONSENT AGREEMENT

Dr. Soin moved to ratify the Proposed Step I Consent Agreement with Dr. Rubens. Dr. Ramprasad seconded the motion. A vote was taken:

ROLL CALL: Dr. Strafford - abstain
Dr. Bechtel - abstain
The motion to ratify carried.

NICHOLAS VITO BORAGGINA, M.D. – VOLUNTARY PERMANENT RETIREMENT

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

ROLL CALL: Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion to ratify carried.

NICK LOUIS TEREZIS, M.D. – VOLUNTARY PERMANENT RETIREMENT

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

ROLL CALL: Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion to ratify carried.
THOMAS KEARNS DILLON, M.D. – VOLUNTARY PERMANENT RETIREMENT

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

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion to ratify carried.

HSIN CHUAN CHENG, M.D. – VOLUNTARY PERMANENT RETIREMENT

Dr. Saferin moved to ratify the Proposed Voluntary Permanent Retirement with Dr. Cheng. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion to ratify carried.

DONALD JAMES KELLON, M.D. – VOLUNTARY PERMANENT RETIREMENT

Dr. Soin moved to ratify the Proposed Voluntary permanent retirement with Dr. Kellon. Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye
Mr. Gonidakis - aye

The motion to ratify carried.

DAVID ALEXANDER TRACY, M.D. – CONSENT AGREEMENT

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

ROLL CALL:            Dr. Strafford    - abstain
                     Dr. Bechtel     - abstain
                     Dr. Soin        - aye
                     Dr. Ramprasad   - aye
                     Dr. Steinbergh  - aye
                     Dr. Saferin     - aye
                     Dr. Sethi       - aye
                     Mr. Kenney      - aye
                     Mr. Gonidakis   - aye

The motion to ratify carried.

Dr. Strafford moved to table this topic in case of possible additional settlement agreements. Dr. Soin seconded the motion. All members voted aye. The motion carried.

The Board took a brief recess at 1:20 p.m. and returned at 1:40 p.m.

ADMINISTRATIVE REPORT

Governor’s Cabinet Opiate Action Team (GCOAT): Mr. Haslam asked Ms. Anderson to provide an update on GCOAT’s prescribing guidelines. Ms. Anderson stated that GCOAT’s prescribing guidelines were launched this week along with a continuing medical education (CME) video and a website. Feedback has been positive so far. Ms. Anderson stated that a legislative briefing will be held later today with the organizations involved, including the Ohio Department of Health, the Ohio Department of Aging, the Ohio Board of Nursing, the Ohio Board of Pharmacy, the Ohio State Medical Association, and the Ohio Osteopathic Association. Ms. Anderson stated that more than 40 organizations were involved with the guidelines. Ms. Anderson stated that she will continue to keep the Board updated on this project.

Mr. Haslam noted that the Medical Board is hosting the website. Ms. Anderson gave special thanks to Mark Barr, the Board’s data systems manager, who put a great deal of work into developing the website. Mr. Haslam also credited Ms. Anderson, Dr. Strafford, and Dr. Bechtel for their efforts with the guidelines. Dr. Strafford found it remarkable that the project has come together so well considering the differences of
opinion when the group first met. Dr. Strafford noted that these are guidelines and not rules, except for the rule that a physician must check the Ohio Automated Rx Reporting System (OARRS) when prescribing controlled substances to a patient. Mr. Haslam stated that the OARRS system now has a morphine equivalent dose (MED) score built into it, which he opined will be an important and helpful tool.

Mr. Gonidakis noted that he attended a continuing legal education (CLE) course on Friday at which Ms. Anderson gave a presentation about the Medical Board. Mr. Gonidakis stated that the presentation was fantastic and encouraged all new Board members to see it. Mr. Gonidakis thanked Ms. Anderson for representing the Medical Board so well.

**Board Member Appointment:** Mr. Haslam stated that the Governor appointed Dr. Saferin as the podiatrist member of the Board last month for a term ending on December 27, 2017.

**Meetings:** Mr. Haslam stated that a Labor-Management Committee meeting was held on September 25. The Committee is reviewing the Board’s remote worker policies, which mainly affect the Board’s 20 investigators, as well as the Board’s state vehicle policy. Mr. Haslam stated that some of that work is in reference to the Inspector General’s report earlier this year and efforts to comply with their recommendations.

Mr. Haslam stated that he attended the Executive Telemedicine Summit meeting in Washington, D.C., on September 25. The meeting included the Federation of State Medical Boards (FSMB), some other state medical boards, insurance companies, and other healthcare organizations. The meeting also included telecommunication companies, which would provide the medium through which telemedicine services are provided. Mr. Haslam noted that Ohio has some of the toughest rules in the country related to telemedicine. Mr. Haslam opined that the FSMB did a good job representing the medical boards’ position that they are not trying to prevent technology, but want to make sure that patient care is delivered in a safe and proper manner.

Dr. Ramprasad asked for Mr. Haslam’s impressions from the Executive Telemedicine Summit. Mr. Haslam replied that he learned that telemedicine is not moving forward as quickly as had been thought and patients are not as interested in using this model as providers had anticipated. Part of this slow growth can be attributed to differing regulations from state to state. Mr. Haslam stated that he and Mr. Miller have concerns about some of the enticements that providers are using, such as offering a free iPad to patients who sign up for telemedicine. Mr. Haslam also noted discussion at the Summit about using employers as a mechanism to force telemedicine onto patients. Mr. Haslam opined that, ultimately, telemedicine is coming to the profession and that the Board is on the right track to deal with it.

Dr. Ramprasad asked if it was understood that any possible disciplinary actions related to telemedicine will be based on the location of the patient, not the location of the provider. Mr. Haslam replied that a large majority of state medical boards agree that any enforcement actions will take place at the patient’s location if there is a violation.

Dr. Steinbergh stated that on September 12, she, Mr. Haslam, Mr. Miller, and Mr. Schmidt met with the Ohio Association of Health Plans to discuss telemedicine and to articulate their concerns. Dr. Steinbergh
stated that members of the Association generally supported the concept of telemedicine with varying degrees of aggressiveness.

Mr. Haslam stated that Mr. Miller and Ms. Loe attended a Boards and Commissions meeting on September 26. One topic discussed was the VOIP phone system which all state agencies are required to move to. Mr. Haslam stated that the Medical Board’s new phones will be installed in January or February 2014.

Mr. Haslam stated that he met with Liz Heinrich of the Ohio Association of County Behavioral Health Authorities (OACBHA) on September 30. The OACBHA will hold a conference on mental health and addiction in December 2013 and they are working on getting some of the lectures at the conference approved for CME credits. Mr. Haslam stated that if CME is approved for the conference, the Medical Board will advertise that on their website.

Ms. Heinrich also asked Mr. Haslam to participate in the OACBHA’s annual opiate conference to be held in the spring of 2014 in order to bring the Medical Board’s perspective to the conference. Mr. Haslam stated that he has been on the conference’s planning committee every year and has agreed to do so again.

Mr. Haslam stated that several staff members met with a software developing company to discuss the possibility of developing software for the Board’s investigations and enforcement sections. This company also developed software that is currently used by the Ohio Board of Pharmacy. The staff will continue to explore this subject.

**Rules:** Mr. Haslam stated that he and Ms. Debolt attended a Joint Committee on Agency Rule Review (JCARR) meeting on September 23 on proposed rules regarding eligibility for physician licensure by examination, eligibility for physician licensure by endorsement of licenses from other states, and genetic counselors. Ms. Debolt stated that the proposed rules will go before the Board for adoption later in this meeting. Mr. Haslam continued that a public hearing will be held on November 8 for proposed rules regarding termination of the physician-patient relationship and criminal records checks.

**E-Licensing:** Mr. Miller stated that the new E-Licensing system will probably continue to see delays. Mr. Miller further opined that the costs for the system will continue to increase. Mr. Miller stated that overall, the new system is probably not as user-friendly as the Board’s current system. Mr. Miller stated that the different systems are created in module form by different sets of developers. The different modules communicate at some level, but not at the full level that is needed. Mr. Miller stated that the staff continues to meet with the Department of Administrative Services to try to get the system shifted to where it needs to be. Mr. Miller stated that the company is frequently requesting additional funds for the system and there will eventually need to be a discussion about when that will end. Mr. Miller stated that this has been continuing for four or five years and the company continues to push back the testing dates and implementation dates.

Mr. Haslam stated that he has grave concerns about the continuing requests for funds and when the Board will see a product that is more efficient than the current system. Mr. Haslam stated that he will keep the Board apprised and will at some point consider if the Board should continue contributing funds to the project. Mr. Haslam noted that the Board is driving much of the input and will probably be happy with a
finished product, but the question is when will that occur and at what cost.

**Education and Outreach Activities:** Mr. Haslam noted that the Board’s education and outreach activities are listed in the Administrative Report. Mr. Haslam noted that the Board has done 17 presentations in the last 22 business days and 78 presentations in 40 weeks so far this year. Mr. Haslam wished to continue these efforts so that people know what the Medical Board is doing and hopefully prevent licensees from coming before the Board in disciplinary matters.

**Fiscal Report:** Mr. Haslam stated that the Fiscal Report is attached. Monthly revenue for August was $451,869.00, while expenditures were $816,201.00. Mr. Haslam noted that expenditures were high in August because that month contained three pay periods instead of two. Revenue for July and August combined was $1,327,709.00 and expenditures were $1,351,148.00.

**Licensure Statistics:** Mr. Haslam stated that the number of days for completion of a license application went up to 95 this month. Mr. Haslam stated that this was mostly due to two very significant outliers and that, otherwise, the number would be close to what it has been for the last few months.

**Travel Requests:** Mr. Haslam asked the Board to approve Ms. Debolt to travel to the Annual Meeting of the Federation of State Massage Therapy Boards (FSMTB), to be held on October 11 through October 13. Mr. Haslam stated that the travel expenses, conference fee, and lodging will be paid by the FSMTB. The total cost to the Board, including travel per diem and airport parking, will be $335.00.

Mr. Haslam continued that a prescription drug abuse symposium will be held on Friday, November 1, in Indianapolis, Indiana. Based on the symposium’s agenda, Mr. Haslam opined that it is relevant to the work of the Board’s investigators and enforcement attorneys, especially considering the number of licensees who practice near the Ohio-Indiana border. Mr. Haslam noted that the registration fee is very reasonable at $25.00 per person. Mr. Haslam asked the Board to approve up to 14 medical board investigators and enforcement attorneys to attend the symposium. The cost to the Board for 14 attendees, including travel reimbursement and other items, would be $1,515.00.

Dr. Strafford moved to approve payment of travel per diem, parking fees, mileage as applicable, overtime as applicable, and meeting registration fees for the executive director, board investigators and board attorneys attending the Fourth Annual Prescription Drug Abuse Symposium in Indianapolis, Indiana, on Friday, November 1, 2013. Dr. Strafford further moved to find that the executive director’s, board investigators’ and board attorneys’ attendance at the meeting is in connection to their duties as, and is related to their position of, executive director, board investigator, or board attorney of the state medical board of Ohio. Dr. Sethi seconded the motion. All members voted aye. The motion carried.
Mr. Gonidakis exited the meeting at this time.

ADOPTION OF RULES

Ms. Debolt explained that these proposed rules will amend the current rules concerning the number of attempts physician applicants are allowed to pass each step of the United States Medical Licensing Examination (USMLE) and waiver possibilities. The proposed rules regarding genetic counselors are also included.

Dr. Soin moved to approve the Findings and Order adopting amended Rule 4731-6-16, rescinding the current version and adopting new Rule 4731-6-14, and adopting new rules 4778-1-01, 4778-1-02, 4778-1-03, 4778-1-05, 4778-1-06, 4778-2-01, and 4778-2-02. I further move that the adopted and rescinded rules be final filed with an effective date of October 31, 2013. Dr. Bechtel seconded the motion. A vote was taken:

ROLL CALL:

Dr. Strafford - abstain
Dr. Bechtel - abstain
Dr. Soin - aye
Dr. Ramprasad - aye
Dr. Steinbergh - aye
Dr. Saferin - aye
Dr. Sethi - aye
Mr. Kenney - aye

The motion to adopt carried.

Dr. Sethi exited the meeting at this time.

REPORTS BY ASSIGNED COMMITTEES

PHYSICIAN ASSISTANT MATTERS

FORMULARY DISCUSSION

Dr. Steinbergh stated that the Physician Assistant Policy Committee (PAPC) and the Group 2 Committee recommend the following changes to the physician assistant formulary:

- Approve Bydureon, Picato, Sklice, Binosto, Regranex, Amyvid, Stendra, Dymista, and Myrbetriq to be prescribed by physician assistants
- Approve Voraxaze, Zioptan, Omontys, Cancidas, and Elelyso to be continued by physician assistants if initially prescribed by the supervising physician
- Approve Surfaxin to be continued by physician assistants if initially prescribed by the supervising physician and the patient is under neonatology management
Physician assistants may not prescribe Inlyta, Kalydeco, Mitosol, and Perjeta
Physician assistants may not prescribe Absorica due to high risk of side-effects
Physician assistants may not prescribe Belviq by Ohio law because it falls under the Board’s weight-loss rules

Concerning the medication Myrbetriq, which is used to treat overactive bladder, Dr. Steinbergh stated that the committees discussed concerns about its side-effects, which are similar to those of beta-agonists. Also, urinary tract infections are four times more frequent on Myrbetriq. However, Myrbetriq is also used in the treatment of glaucoma, and therefore was approved to be prescribed by physician assistants.

Dr. Saferin moved to accept the recommendations of the Physician Assistant Policy Committee and the Group 2 Committee concerning the physician assistant formulary. Dr. Bechtel seconded the motion. All members voted aye. The motion carried.

SPECIAL SERVICES APPLICATIONS

DOWNTOWN DERMATOLOGY

Dr. Steinbergh stated that Downtown Dermatology is requesting approval for physician assistant to perform injection of Botulinum toxin type A for hyperhidrosis and cosmetic purposes. Dr. Steinbergh stated that, following discussion about separating the request for hyperhidrosis from the request for cosmetic purposes, the Physician Assistant Policy Committee tabled this subject.

MERCY DEFIANCE CLINIC

Dr. Steinbergh stated that the orthopedic department at Mercy Defiance Clinic is requesting approval for physician assistants to perform subacromial bursa injections, utilizing 100% onsite supervision. The physician assistant will observe the physician performing 25 procedures, and then the physician will observe the physician assistant performing 25 procedures to determine competency. The supervising physician will determine the need for the procedure. The Physician Assistant Policy Committee (PAPC) recommends approval of this request, with the following stipulations: 1) That the name of a specific physician assistant be removed because special services plans are approved for all physician assistants in a practice; and 2) that the quality assurance portion of the application be answered more appropriately to clarify that there will be 100% onsite supervision. The Group 2 Committee agreed with the PAPC’s recommendations.

Dr. Saferin moved to approve the special services application of Mercy Defiance Clinic for subacromial bursa injections, with the stipulations approved by the PAPC and the Group 2 Committee. Dr. Ramprasad seconded the motion. All members voted aye. The motion carried.

Dr. Steinbergh continued that Mercy Defiance Clinic has also requested approval for physician assistants to perform intra-articular injections, utilizing 100% onsite supervision. The physician assistant will observe the physician performing 25 procedures, and then the physician will observe the physician assistant performing 25 procedures to determine competency. The PAPC recommends approval of this
request, with the same stipulations that were listed with Mercy Defiance Clinic’s prior request. The Group 2 Committee agreed with the PAPC’s recommendations.

Dr. Bechtel moved to approve the special services application of Mercy Defiance Clinic for intra-articular injections, with the stipulations approved by the PAPC and the Group 2 Committee. Dr. Saferin seconded the motion. All members voted aye. The motion carried.

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. Steinberg stated that he wished to discuss the probationary requests of Marjorie M. Haas, M.D., Michael C. Macatol, M.D., and Sharon McRae, M.D., separately.

Mr. Gonidakis and Dr. Sethi returned to the meeting at this time.

Regarding Dr. Haas, Dr. Steinbergh wanted to state that Dr. Haas has provided a very good plan for reentry to practice. Dr. Steinbergh commented that the Board may want to look at this request as it develops its discussion of physician reentry to the workplace.

Regarding Dr. Macatol, Dr. Steinbergh noted that Dr. Macatol is requesting a reduction in psychiatric sessions from every two months to every three or four months. Dr. Steinbergh clarified that Dr. Strafford’s recommendation is to reduce Dr. Macatol’s psychiatric session to every three months.

Regarding Dr. McRae, Dr. Steinbergh stated that a court has granted a stay of Dr. McRae’s Board Order. Therefore, the Board will not be considering her probationary request at this time.


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

- To grant Maryrose P. Bauschka, M.D.’s request for reduction in personal appearances to every six months; reduction in mental health sessions to twice per month; and permission to travel outside of Ohio without prior notification;
To grant Arturo J. Bonnin, M.D.’s request for reduction of personal appearances to every six months;

To grant Edwin T. Strong Brott, M.D.’s request for approval of *Prescribing Controlled Drugs: Critical Issues and Common Pitfalls*, offered by Vanderbilt University Medical Center, to fulfill the controlled substance prescribing course requirement;

To grant Jean A. Cairns, M.D.’s request for approval of *Chronic Pain Treatment in Today’s Environment: Alternatives, Risk Assessment, and Regulatory Guidelines for Medical Providers During a Prescription Drug Crisis*, administered by the Ohio State Medical Association, to fulfill the controlled substances course requirement;

To grant Matthew H. Evenhouse, M.D.’s request for permission to possess controlled substances; approval of alternate collection site methodology during patient transport missions; discontinuance of the chart review requirement; and approval of Thomas A. Tallman, D.O., to serve as the new monitoring physician;

To grant Cary K. Gross, D.O.’s request for approval of the monitoring conducted by the Arkansas Medical Foundation Physician’s Health Committee;

To grant Raymond C. Gruenther, M.D.’s request for approval of *Intensive Course in Controlled Substance Prescribing*, offered by Case Western Reserve University, required for reinstatement; and approval of *Intensive Course in Medical Record Keeping*, offered by Case Western Reserve University, required for reinstatement;

To grant Marjorie M. Haas, M.D.’s request for approval of a proposed practice plan; approval of Thomas G. DeWitt, 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 Ewa Marie Hansen, M.D.’s request for approval of an online prescribing course *Prescribing Controlled Substances*, offered by Louisiana Medical Mutual Insurance;

To grant Wesley F. Hard, M.D.’s request for reduction in the drug screen frequency to twice per month;

To grant Allison C. (Grauer) Heacock, M.D.’s request for reduction in appearances to every six months; and reduction in drug and alcohol rehabilitation meetings to two per week with a minimum of 10 per month;

To grant Gregory Gene Johnson, M.D.’s request for approval of a new practice plan; and approval of Charles M. Misja, M.D., to serve as the new monitoring physician;

To grant Christopher J. Karakasis, M.D.’s request for reduction in appearances from every three months to every six months;
To grant Vincent James Keiser, M.D.’s request for approval of Daniel A. Dessner, 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 Richard M. Kincaid, M.D.’s request to increase work hours from 24 hours per week to 36 hours per week;

In the matter of Carol E. Lewis, M.D., to approve the Secretary’s recommendation for reduction in appearances from every three months to every six months; and reduction in drug and alcohol rehabilitation meetings from three per week to two per week with a minimum of 10 per month;

To grant Joseph Frances Lydon, Jr., M.D.’s, request for approval of Daryl V. Rampton, M.D., to serve as the monitoring physician; and determination of the number and frequency of charts to be reviewed at 10 charts per month;

To grant Michael C. Macatol, M.D.’s request for reduction in psychiatric sessions from every two months to every three months;

To grant Mahendra K. Mahajan, M.D.’s request for reduction in psychotherapy sessions from weeks to once every two weeks;

To grant Natalie Ann Mondary, M.D.’s request for approval of Chronic Pain Treatment in Today’s Environment; Alternatives, Risk Assessment, and Regulatory Guidelines for Medical Providers During a Prescription Drug Crisis, administered by the Ohio State Medical Association, to fulfill the controlled substances course requirement;

To grant Juliana J. Oak, M.D.’s request for approval of Roopa Chavda, M.D., to serve as the treating psychiatrist;

To grant Sudhir S. Polisetty, M.D.’s request for approval of the Indiana State Medical Association Physicians Assistance Program to conduct monitoring while Dr. Polisetty resides in Indiana; approval of Duane Banet, 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 William Popovich, M.D.’s request for approval of Nykolai Pidhorodeckyj, M.D., to serve as a monitoring physician; approval of Sanjeev Suri, M.D., to serve as an additional monitoring physician; and determination of the frequency and number of charts to be reviewed at 10 charts per month per monitor;

To grant Matthew C. Riesen, M.D.’s request for reduction in drug and alcohol rehabilitation meetings from three per week to two per week with a minimum of ten per month; and reduction in appearances from every three months to every six months;

To grant Bernard J. Rose, M.D.’s request for approval of Annette M. Chavez, 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; and

- To grant Albert J. Weisbrot, M.D.’s request for approval of *Intensive Course in Medical Record Keeping*, administered by Case Western Reserve University, to fulfill the medical records course requirement.

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

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<tr>
<th>ROLL CALL</th>
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<tbody>
<tr>
<td>Dr. Strafford</td>
<td>abstain</td>
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<tr>
<td>Dr. Bechtel</td>
<td>abstain</td>
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<tr>
<td>Dr. Soin</td>
<td>aye</td>
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<tr>
<td>Dr. Ramprasad</td>
<td>aye</td>
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<tr>
<td>Dr. Steinbergh</td>
<td>aye</td>
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<tr>
<td>Dr. Saferin</td>
<td>aye</td>
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<tr>
<td>Dr. Sethi</td>
<td>aye</td>
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<tr>
<td>Mr. Kenney</td>
<td>aye</td>
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<tr>
<td>Mr. Gonidakis</td>
<td>aye</td>
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</tbody>
</table>

The motion carried.

The Board took a brief recess at 2:35 and returned at 3:00.

**PROBATIONARY APPEARANCES**

**WALTER T. BOWERS, II, M.D.**

Dr. Bowers was making his final appearance before the Board pursuant to his request for release from the terms of the Board’s Order of October 12, 2011. Ms. Bickers reviewed Dr. Bowers’ history with the Board.

Dr. Steinbergh asked if Dr. Bowers has any issues before the Kentucky Board of Medical Licensure. Dr. Bowers replied that he was released from his agreement with the Kentucky Board in May 2013, three years earlier than what had been stipulated. Dr. Bowers stated that he has no issues before the Kentucky Board and his Kentucky medical license has no restrictions.

Dr. Steinbergh asked Dr. Bowers to describe his current practice. Dr. Bowers replied that he practices gynecology only, having delivered his last baby in November 2010. Dr. Bowers stated that he teaches and serves on the admissions committee at a medical school and practices gynecology at Christ Hospital.

Dr. Steinbergh asked if Dr. Bowers has any questions. Dr. Bowers replied that he has no questions.

**Dr. Soin moved to release Dr. Bowers from the terms of the Board’s Order of October 12, 2011, effective October 13, 2013. Dr. Ramprasad seconded the motion.** All members voted aye. The motion carried.
JAMES CAMERON JOHNSON, D.O.

Dr. Johnson was making his final appearance before the Board pursuant to his request for release from the terms of his October 8, 2008 Consent Agreement. Ms. Bickers reviewed Dr. Johnson’s history with the Board.

Dr. Ramprasad asked how Dr. Johnson feels as he moves forward. Dr. Johnson replied that he feels good about what he is doing with his rehabilitation meetings. Dr. Johnson stated that he is looking forward to being released from his Consent Agreement so he can be eligible to have his specialty board certification reinstated.

Dr. Ramprasad asked about Dr. Johnson’s family structure. Dr. Johnson stated that he is single and lives alone in Grove City, Ohio. Dr. Johnson stated that he is close to his parents and siblings, but most of his family lives in Florida or Alabama. Dr. Johnson does have a brother in the Columbus area who he sees on a regular basis. Dr. Johnson stated that he also has a girlfriend.

Dr. Steinbergh asked if Dr. Johnson would share some of his experience with the medical students in attendance. Dr. Johnson stated that he grew up in a conservative family with no alcohol in the home. Dr. Johnson did not drink alcohol until his residency, mostly at dinner. Dr. Johnson then began to spend a great deal of time with someone who drank a lot, so he started to drink as much as she did. Soon, Dr. Johnson was drinking more than his friend. When Dr. Johnson experienced financial stressors, he used alcohol to relieve his stress and make himself feel better. In less than a year, Dr. Johnson’s drinking got out of control and he began doing things he never thought he would do, such as driving while intoxicated.

Mr. Kenney exited the meeting at this time.

Dr. Johnson stated that because of his experience, he views some things differently, such as dismissing patients for misusing opiates. Dr. Johnson stated that when a patient fails a drug screen, his first response now is not to dismiss them, but rather to open a dialogue and help them see that they may have a problem.

Dr. Steinbergh noted that Dr. Johnson’s impairment has adversely affected his practice and his specialty board certification. Dr. Johnson agreed, noting that his private practice no longer exists due to his one-year suspension. Dr. Johnson managed to find employment when his license was reinstated and eventually saved enough money to open a new private practice. Dr. Johnson stated that he also practices at the Ohio Hospital for Psychiatry treating patients with substance abuse disorders.

Dr. Ramprasad moved to release Dr. Johnson from the terms of his October 8, 2008 Consent Agreement. Dr. Bechtel seconded the motion. All members voted aye. The motion carried.

NICHOLAS A. ATANASOFF, D.O.

Dr. Atanasoff was making his initial appearance before the Board pursuant to the terms of his August 14, 2013 Addendum to his January 9, 2013 Consent Agreement. Ms. Bickers reviewed Dr. Atanasoff’s history
Dr. Steinbergh asked Dr. Atanasoff to describe his recovery network. Dr. Atanasoff answered that he has completed inpatient and intensive outpatient treatment, attends rehabilitation meetings three times per week, and works with a sponsor.

Dr. Steinbergh asked Dr. Atanasoff to address the medical students in attendance regarding his history. Dr. Atanasoff stated that his problems began because he did not manage his stress and did not know his limitations. Dr. Atanasoff stated that one must be honest with oneself, noting that he rationalized using chemicals to do things that he was not capable of doing. Dr. Atanasoff stated that he had many stressors, but he was ultimately responsible for making the decisions that brought him before the Board.

Dr. Atanasoff advised the medical students to not fall into the trap of thinking that because they are physicians, they are somehow immune to circumstances. Dr. Atanasoff stated that as the students move through medical school, residency, and practice, their stressors will mount. Dr. Atanasoff advised the students to develop a system early for dealing with their stressors; otherwise, they could potentially place themselves in danger.

Dr. Ramprasad asked how Dr. Atanasoff handles stress now compared to before his troubles. Dr. Atanasoff replied that certain things do not bother him anymore and he does not “sweat the small stuff.” Dr. Atanasoff added that previously he had not taken care of himself in terms of sleep, exercise, or nutrition. Dr. Atanasoff stated that he is now as happy physically, spiritually, and emotionally as he has been in years because he has achieved a balance in his life.

Dr. Ramprasad noted that Dr. Atanasoff is engaged to be married. Dr. Atanasoff stated that, in fact, he got married two months ago. Dr. Atanasoff stated that getting married brought another aspect of his life into balance, noting that he had had a long-time, long-distance relationship with the person he is now married to.

Ms. Marshall noted that Dr. Atanasoff’s Step II Consent Agreement was ratified by the Board earlier in the meeting and all the appropriate signatures have been obtained. Therefore, Dr. Atanasoff is now under a Step II Consent Agreement.

**Dr. Ramprasad moved to continue Dr. Atanasoff under the terms of the October 9, 2013 Consent Agreement. Dr. Soin seconded the motion.** All members voted aye. The motion carried.

**BRIAN B. BEAM, M.D.**

Dr. Beam was making his initial appearance before the Board pursuant to the terms of his July 10, 2013 Consent Agreement. Ms. Bickers reviewed Dr. Beam’s history with the Board.

Mr. Gonidakis exited the meeting at this time.

Dr. Steinbergh asked about Dr. Beam’s hearing and his health in general. Dr. Beam replied that his health
is good and his only medical problem is his hearing loss, which started about 15 years ago. About two years ago, Dr. Beam approached the Cleveland Clinic because he was having trouble hearing women and people with dialects. Dr. Beam stated that he is having discussions about improved hearing aids or cochlear implants. Dr. Beam stated that he hoped to return to practice, but the various hearing aids he has used for the last five years have not been adequate.

Dr. Ramprasad asked if Dr. Beam had seen a neuro-otolaryngologist to discuss the possibility of a cochlear implant or a brain stem implant. Dr. Beam had difficulty understanding Dr. Ramprasad’s question, but did understand the term “cochlear implant.” Dr. Beam stated that he is not quite willing to have his skull cracked open, which a cochlear implant would require. Dr. Beam opined that his hearing needs to be better before he returns to practice.

Dr. Steinbergh restated Dr. Ramprasad’s question on whether Dr. Beam has seen a neuro-otolaryngologist. Dr. Beam replied that his physician at the Cleveland Clinic is in charge of the cochlear implant program and speculated that she must be a neuro-otolaryngologist.

Dr. Steinbergh asked what Dr. Beam is doing currently. Dr. Beam answered that currently he is mostly traveling. On Saturday, Dr. Beam will portray General William T. Sherman in a Civil War reenactment.

Dr. Steinbergh commented that it is unfortunate that Dr. Beam has been taken away from his practice for this reason, but hoped that something in the future will develop to allow him to reengage. Dr. Steinbergh asked if Dr. Beam is keeping up with his continuing medical education (CME). Dr. Beam replied that he is keeping up with his CME’s and will sit for specialty board certification next year. Dr. Beam stated that he is also current with his specialty board’s maintenance of certification program.

**Dr. Soin moved to continue Dr. Beam under the terms of his July 10, 2013 Consent Agreement. Dr. Ramprasad seconded the motion.** All members voted aye. The motion carried.

**JANICE ELECTA GREEN DOUGLAS, M.D.**

Dr. Douglas was making her initial appearance before the Board pursuant to the terms of the Board’s Order of July 13, 2011. Ms. Bickers reviewed Dr. Douglas’ with the Board.

Dr. Steinbergh asked what Dr. Douglas is currently doing in terms of medicine. Dr. Douglas replied that her medical license was just recently restored and she is not practicing medicine at this time. Dr. Douglas stated that she currently assists institutions in writing grants, which had been her experience before. Dr. Douglas stated that as a faculty member, she mostly conducts research. Dr. Douglas stated that she has submitted applications for employment with the National Institutes of Health (NIH), but review of applications has ceased due to the federal government shutdown.

Dr. Steinbergh asked how Dr. Douglas is doing in terms of healing and recovery. Dr. Douglas stated that she has close to eight years of sobriety and a strong support network. Dr. Douglas stated that she helps with Recovery Resources, a facility in Cleveland that helps young women with substance abuse and who may have lost custody of their children because of their problems. Dr. Douglas stated that she has
sponsees and also has a sponsor herself. Dr. Douglas added that he has recently started attending a professional women’s group.

Dr. Soin asked what Dr. Douglas plans to do professionally going forward and if she will see patients clinically or continue in research activities. Dr. Douglas responded that she feels that she can best contribute in the research arena, noting that she had previously been employed at NIH before being recruited to Case Western Reserve University. Dr. Douglas stated that NIH would afford her the opportunity to do some clinical research as well as basic research. Dr. Douglas also commented that she would like to be involved with reviewing grant applications instead of writing them.

Mr. Gonidakis returned to the meeting at this time.

Dr. Steinbergh asked if Dr. Douglas has any questions for the Board. Dr. Douglas asked about the frequency of urine drug screens, noting that they are very expensive. Ms. Bickers stated that Dr. Douglas will be able to request modifications to her probationary terms, including the frequency of drug screens, in September 2014, one year after the restoration of her medical license.

**Dr. Soin moved to continue Dr. Douglas under the terms of the Board’s Order of July 13, 2011. Dr. Ramprasad seconded the motion.** All members voted aye. The motion carried.

JOSEPH BRIAN KAISER, M.T.

Mr. Kaiser was making his initial appearance before the Board pursuant to the terms of his May 8, 2013 Consent Agreement. Ms. Bickers reviewed Mr. Kaiser’s history with the Board.

Dr. Steinbergh asked what kind of decision-making was involved with Mr. Kaiser practicing massage therapy after his license had expired. Mr. Kaiser explained that he had walked away from his practice to care for his father, who had cancer. Mr. Kaiser was his father’s full-time caregiver for six-and-a-half years until he passed away in May 2012. At that time, Mr. Kaiser decided to return to his massage practice and his previous place of employment had a position available. Mr. Kaiser stated that he simply forgot to renew his massage therapy license. Mr. Kaiser stated that he did not practice massage therapy during the time his took care of his father. Mr. Kaiser stated that the mailing address the Board had for him was his place of business, which he had left abruptly. Dr. Steinbergh asked if Mr. Kaiser had had his mail forwarded from his business address. Mr. Kaiser stated that his business address had been a beauty salon and the notices of renewal from the Board just got lost there among other mail.

Dr. Steinbergh stated that the Board is always looking for ways to educate massage therapists about their responsibilities to renew their licenses and to not practice if their license expires. Mr. Kaiser agreed and stated that as a professional massage therapist, he welcomes the licensing process to separate the professionals from those who do not provide therapeutic massage. Mr. Kaiser stated that he probably should have kept his license active during the time he was caring for his father, but he had been preoccupied. Dr. Steinbergh asked Mr. Kaiser to share this experience with others in his profession. Mr. Kaiser agreed.
Dr. Soin expressed concern that this went on for seven years and questioned about much respect Mr. Kaiser has for his license and for the authority of the Board. Mr. Kaiser reiterated that he did not practice massage therapy during the time he cared for his father. Mr. Kaiser stated that he respects his license and would have renewed it if he had had contact with the Board. Mr. Kaiser stated that the Board did not have his then-current address, which Mr. Kaiser stated was his own fault.

Dr. Soin noted that Mr. Kaiser has presented himself before the Board wearing very casual clothing, which caused Dr. Soin to question whether Mr. Kaiser respects the process. Mr. Kaiser apologized if his appearance was less than suitable and stated that he was not aware that there was a dress code for the meeting. Mr. Kaiser stated that he just came from work and those were the clothes he works in.

Dr. Steinbergh asked if Mr. Kaiser has started working. Mr. Kaiser replied that he has started working and it is going very well. Mr. Kaiser felt that he is doing good work and that the experience with his father has made him more heartfelt in his work.

**Dr. Soin moved to continue Mr. Kaiser under the terms of his May 8, 2013 Consent Agreement. Dr. Ramprasad seconded the motion.** All members voted aye. The motion carried.

Mr. Kaiser thanked Ms. Bickers and Ms. Jones for helping him negotiate the process with the Board.

**ERIK J. KRAENZLER, M.D.**

Dr. Kraenzler was making his initial appearance before the Board pursuant to the terms of his June 10, 2013 Consent Agreement. Ms. Bickers reviewed Dr. Kraenzler’s history with the Board.

Dr. Ramprasad noted that Dr. Kraenzler had two different treatment providers at different times and asked if Dr. Kraenzler had chosen to do that. Dr. Kraenzler stated that he had his initial inpatient therapy at Glenbeigh, but relapsed shortly thereafter. Dr. Kraenzler returned to Glenbeigh and, after talking to his team, concluded that returning to the same place did not make sense. Two physicians from Dr. Kraenzler’s caduceus group had gotten treatment at the Centers for Chemical Addictions Treatment (CCAT) in Cincinnati and had good things to say about it, so Dr. Kraenzler chose to go there. Dr. Kraenzler stated that CCAT was a very different and humbling experience. CCAT is smaller than Glenbeigh, about half the clients are from homeless shelters, and about 25% of the clients were deferring prison. Dr. Kraenzler commented that CCAT made Glenbeigh look like a luxury hotel. Dr. Kraenzler stated that CCAT had a great counselor and he got the shaping-up that he needed.

Dr. Ramprasad asked about the difference from the time he went into CCAT to the time he came out. Dr. Kraenzler stated that he learned that relapse is not when you take a drink, but rather begins days or weeks prior to that. Dr. Kraenzler opined that initially, his base was not as strong has it needed to be. Dr. Kraenzler stated that CCAT provided a serious reality check as far as the dangers of drinking, which put his health, his career, and his marriage at risk.

Dr. Ramprasad asked if Dr. Kraenzler will return to the practice of anesthesia. Dr. Kraenzler replied that he plans to return to anesthesia. Dr. Ramprasad asked if Dr. Kraenzler thought he would be okay with that.
Dr. Kraenzler opined that he would be okay. Dr. Kraenzler stated that the plan is to move gradually into the operating room. In the meantime, Dr. Kraenzler has non-clinical activities twice a week and works for the Anesthesia Institution once a week on supply chain issues. Dr. Kraenzler stated that he is also the associate director for supply chain for the Cleveland Clinic, which he enjoys.

Dr. Ramprasad asked if Dr. Kraenzler’s depression causes problems related to alcohol. Dr. Kraenzler replied that he was diagnosed with depression about a year and a half ago. Dr. Kraenzler felt that his drinking had caused his depression, as opposed to the other way around. Dr. Kraenzler stated that he now feels great, he is healthier than ever, his memory is sharp, and he has a great outlook on life. Dr. Kraenzler stated that he plans to talk with his psychiatrist about reducing his medications.

Dr. Steinbergh expressed concern that Dr. Kraenzler not reduce or discontinue his psychiatric medications too soon, especially since he has a dual diagnosis, noting that Dr. Kraenzler is probably doing well at this time because of his medications. Dr. Kraenzler agreed and stated that he will leave the decision regarding his medications up to his physicians.

**Dr. Ramprasad moved to continue Dr. Kraenzler under the terms of his July 10, 2013 Consent Agreement. Dr. Soin seconded the motion.** All members voted aye. The motion carried.

**DAVID BRIAN LEVY, D.O.**

Dr. Levy was making his initial appearance before the Board pursuant to the terms of the Board’s Order of July 10, 2013. Ms. Bickers reviewed Dr. Levy’s history with the Board.

Dr. Steinbergh noted that Dr. Levy’s Board Order included a permanent revocation which was stayed. Dr. Steinbergh stated that that indicates that the Board took this issue very seriously. Dr. Steinbergh stated that when the Board issues a stayed permanent revocation, it is an indication that the Board considered the issue to be very serious. Dr. Steinbergh acknowledged that Dr. Levy is now residing in New Zealand and it is difficult for him to appear in person. However, Dr. Steinbergh opined that it is important for Dr. Levy to make personal appearances like other similarly-situated practitioners would. Dr. Steinbergh asked if Dr. Levy understands his Board Order. Dr. Levy replied that he understands the Board Order.

Dr. Steinbergh asked how Dr. Levy feels about his actions. Dr. Levy responded that it is something he thinks about every day. Dr. Levy stated that he has practiced medicine for 23 years and has never even been the subject of a malpractice suit. Dr. Levy stated that he had been chosen as Outstanding Faculty Member at three medical schools and has been the chair of departments. Dr. Levy continued that during the time in question, he was going through a divorce and had undergone three surgeries. Dr. Levy stated that he became careless and wrote a prescription for himself for Viagra using the name of a friend and fellow physician without that person’s knowledge or consent. Dr. Levy stated that he did this out of either stupidity or arrogance. Dr. Levy repeated these actions on two occasions to obtain prescriptions for his daughter.

Dr. Levy stated that his actions have cost him. He stepped down as chair of his department and pulled his name out of consideration for promotion to full professor. Dr. Levy stated that the Medical Council of
New Zealand will hold a hearing regarding Dr. Levy next month. Dr. Levy stated that he went to New Zealand because he had visited his daughter when she was teaching there and he fell in love with the country. Dr. Levy stated that he had always been the kind of person who had to be the chair or the director of something, and it is good for him to step down from such positions.

Dr. Levy stated that he would like to return to Ohio in the future and is currently seeing a psychologist. Dr. Levy apologized for his actions, which he described as an aberration in his career. Dr. Levy stated that he loves medicine and realizes that practicing medicine is a privilege and not a right.

Dr. Soin asked where Dr. Levy would like to be in five years professionally. Dr. Levy answered that he does not intend to pursue directorships and would like to be a “worker bee.” Dr. Levy stated that he would like to return to Ohio to teach, noting that there are many outstanding emergency medicine programs in Ohio.

Dr. Ramprasad asked what Dr. Levy is doing in New Zealand. Dr. Levy replied that he is working in a teaching hospital seeing patients and supervising registrars, which are equivalent to residents in the United States. Dr. Steinbergh asked if Dr. Levy enjoys living in New Zealand. Dr. Levy replied that he does enjoy living in New Zealand, but his family is in Ohio. Dr. Steinbergh asked how long Dr. Levy will be in the United States on this trip. Dr. Levy replied that he will go back to New Zealand on Saturday morning.

Dr. Ramprasad noted that Dr. Levy is required by the Board Order to take ethics courses. Dr. Levy stated that he is exploring ethics courses, including online courses, and will discuss what would be acceptable with Ms. Bickers. Dr. Levy stated that he has already taken his required prescribing course.

Dr. Sethi asked about the response of those in New Zealand to Dr. Levy’s Ohio Board Order. Dr. Levy replied that he will appear before the Medical Council of New Zealand in November about this matter.

**Dr. Soin moved to continue Dr. Levy under the terms of the Board’s Order of July 10, 2013. Dr. Bechtel seconded the motion.** All members voted aye. The motion carried.

**SUBRAMANYA K. PRASAD, M.D.**

Dr. Prasad was making his initial appearance before the Board pursuant to the terms of the Board’s Order of April 13, 2011. Ms. Bickers reviewed Dr. Prasad’s history with the Board.

Dr. Ramprasad asked where Dr. Prasad is currently working. Dr. Prasad replied that he is working in Florence, Kentucky and also has a part-time position in Cincinnati, Ohio doing hormone replacement therapy.

Dr. Soin asked Dr. Prasad to describe the internet prescribing scheme that got Dr. Prasad into trouble. Dr. Prasad stated that he had been doing cardiac electrophysiology research at the Cleveland Clinic when he saw an advertisement in the New England Journal of Medicine for doctors to work from home. Dr. Prasad stated that he made an error in judgment and worked for that group for three months. Dr. Prasad stated that it had been misrepresented to him that he would be doing quality control to see if patients were eligible for
medicines based on their prior medical history. Dr. Prasad had been told that a prior physician had already prescribed the medications, but what they were actually doing was printing prescriptions in Dr. Prasad’s name and sending it everywhere via the internet. Dr. Prasad stated that he is not trying to justify his actions and he should have done more research into it. Dr. Prasad stated that every day he regrets this one error he made in his 40-year career.

Dr. Ramprasad was surprised that Dr. Prasad has not yet taken the prescribing course required by his Board Order. Dr. Prasad stated that he was under the impression that he had to take the course after his medical license is reinstated. Dr. Prasad stated that he is in the process of selecting a course.

Dr. Ramprasad asked Dr. Prasad to describe hormone replacement therapy. Dr. Prasad stated that he treats perimenopausal and postmenopausal females who have symptoms of hot flashes, night sweats, mood irritability, and symptoms of estrogen and testosterone deficiency. Dr. Prasad inserts pellets to relieve these symptoms. Dr. Soin asked if Dr. Prasad still intends to pursue a career in cardiology. Dr. Prasad stated that he is 47 years old and, though it is his lifelong dream to be a cardiologist, he is past that stage now. Dr. Prasad stated that his 15-year-old daughter is very interested in medicine and it is now his goal to support his daughter so she can realize his lifelong dream.

Dr. Steinbergh asked if Dr. Prasad’s current practice is rewarding and intellectually satisfying to him. Dr. Prasad replied that he enjoys his current practice because he gets a lot of positive feedback from his patients. Dr. Prasad finds his practice intellectually satisfying because there are many thought processes that go into the multi-factorial etiology of the patients’ symptoms. Dr. Prasad is currently trying to write a protocol to see if hormone replacement therapy can reduce cardiac disorders. Dr. Steinbergh commented that such research is needed.

Dr. Steinbergh asked if Dr. Prasad understands his Board Order. Dr. Prasad replied that he understands the Board Order. Dr. Steinbergh asked if Dr. Prasad has a message for the medical students in attendance. Dr. Prasad advised the students that, no matter how busy that are, do not get involved in anything unless they have thoroughly researched it. Dr. Prasad advised the students to not take something at face value, even if it is advertised in a journal of reputation like the New England Journal of Medicine.

**Dr. Ramprasad moved to continue Dr. Prasad under the terms of the Board’s Order of April 13, 2011. Dr. Soin seconded the motion.** All members voted aye. The motion carried.

**GARY ALLAN DUNLAP, D.O.**

Dr. Dunlap was making a special appearance before the Board pursuant to the Board’s motion at his appearance in August 2013. Ms. Bickers reviewed Dr. Dunlap’s history with the Board.

Dr. Ramprasad stated that Dr. Dunlap’s psychiatric report was very thorough, including a visit to Dr. Dunlap’s office. The report concluded that Dr. Dunlap does not have obsessive-compulsive disorder. Dr. Ramprasad commented that the report made Dr. Dunlap look very good, except for the hording aspect. Dr. Ramprasad stated that Dr. Dunlap need only clean up his office before the Board can consider reinstatement. Dr. Dunlap stated that his office has been cleaned up.
Dr. Ramprasad asked how Dr. Dunlap felt about this process. Dr. Dunlap replied that the process was very thorough and the time off gave him time to think about how he got into his predicament. It also gave Dr. Dunlap time to clean up and get himself in order.

Dr. Steinbergh asked where Dr. Dunlap is in the process of cleaning his office. Dr. Dunlap replied that his office is now clean and ready to reopen. Dr. Soin asked if he would be able to walk the halls of Dr. Dunlap’s office unobstructed. Dr. Dunlap answered that one can walk the halls unobstructed. Dr. Dunlap stated that he still has some work to do cleaning up his home.

Dr. Steinbergh asked how Dr. Dunlap went about cleaning his office. Dr. Dunlap replied that he hired the daughter of his secretary to help him, noting that he gets more done when he is working with someone. Dr. Dunlap commented that he also had some patients volunteer to help him.

Dr. Ramprasad asked how Dr. Dunlap disposed of his prized collection of 15,000 to 30,000 records. Dr. Dunlap answered that he has not gotten rid of his records yet, but he is in the process of sorting through them and deciding what to keep and what to get rid of. Dr. Dunlap has found that he likes about one out of every three of his records.

Dr. Soin echoed Dr. Ramprasad’s comments and appreciated reading Dr. Dunlap’s psychiatric evaluation. Dr. Soin asked about Dr. Dunlap’s plans going forward. Dr. Dunlap replied that he plans to return to practice and to continue cleaning things up at his house. Dr. Soin asked if Dr. Dunlap has a mechanism to make sure that things do not build up again. Dr. Dunlap stated that this was a one-time occurrence in his life that simply got out of hand.

Dr. Steinbergh asked about the status of Dr. Dunlap’s practice. Dr. Dunlap responded that he has about 70 families that want to come in as new patients, in addition to established patients. Dr. Dunlap stated that he predominately handles aches and pains through osteopathic manipulative medicine, so his practice is not really a family practice. Nutrition is a secondary aspect of Dr. Dunlap’s practice. Dr. Steinbergh asked if Dr. Dunlap is current with his continuing medical education (CME) and if he is board certified. Dr. Dunlap replied that his CME is current and he is board certified in family medicine, though he does not have an extra certification in osteopathic manipulative medicine. Dr. Dunlap stated that he mostly practices cranial manipulation, which is not a specialty at this point. Responding to further questions, Dr. Dunlap stated that he obtains CME’s by attending the annual three-day convention of the Cranial Academy, listening to 10 to 15 webinars through the year on nutrition, and attending an annual family practice seminar in Dayton.

**Dr. Ramprasad moved to continue Dr. Dunlap under the terms of the Board’s Order of May 8, 2013. Dr. Soin seconded the motion.** All members voted aye. The motion carried.

Thereupon, at 4:35 p.m., the October 9, 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 October 9, 2013, as approved on November 13, 2013.

Anita M. Steinbergh, D.O., President

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

THE STATE MEDICAL BOARD OF OHIO

October 10, 2013

Anita M. Steinbergh, D.O., President, called the meeting to order at 8:00 a.m., in Conference Room A&B West of the Vern Riffe State Office Tower, 77 S. High 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; Donald R. Kenney, Sr.; Michael L. Gonidakis; Amol Soin, M.D.; Sushil M. Sethi, M.D.; and Bruce R. Saferin, D.P.M. The following member did not attend the meeting: Lance A. Talmage, M.D.

Also present were: Aaron Haslam, Executive Director; 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. Debold, General Counsel; William Schmidt, Senior Counsel; Joan K. Wehrle, Education & Outreach Program Manager; Randy Beck, Interim Chief of Investigations; Rebecca Marshall, Chief Enforcement Attorney; David Katko, Karen Mortland, and Angela McNair, Enforcement Attorneys; Danielle Bickers, Compliance Supervisor; Annette Jones, Compliance Officer; Kay Rieve, Administrative Officer; Barbara Jacobs, Senior Executive Staff Attorney; Cathy Hacker, Physician Assistant Program Administrator; Jackie Moore, Public Information Assistant; Gary Holben, Operations Manager, Peri Vest, Enforcement Secretary; Penelope Dillard, HR/Fiscal Secretary; Gina Bouldware, Amanda Blickenstaff and Victoria Littoral, Licensure Assistants; and Benton Taylor, Executive Assistant to the Executive Director.

MEDICAL BOARD RETREAT

WELCOME AND PROGRAM OVERVIEW

As President of the State Medical Board of Ohio, Dr. Steinbergh welcomed Board members, staff, and others present to the Medical Board’s 2013 Retreat. Dr. Steinbergh reviewed the agenda for the retreat, which will consist of an overview of the Board’s processes in the morning session and strategic planning in the afternoon session. Dr. Steinbergh encouraged everyone to participate in the discussions.

LICENSURE

Mr. Miller stated that the Licensure Section has seven employees. The responsibilities of the Section are to review, process, and issue licenses; communicate with applicants, credentialers, and employers; staff the Massage Therapy Advisory Committee and the Physician Assistant Policy Committee; and administer the Cosmetic Therapy examinations. Mr. Miller gave a detailed outline of the licensure process and what is required by law and by the Board’s rules. The Board engaged in a thorough discussion of licensure issues, including whether there is a need for wallet cards for licensees or for the Universal Application from the Federation of State Medical Boards. The Board also discussed the process for expedited licensure, which was recently passed into law.
DUTIES AND RESPONSIBILITIES OF THE SECRETARY AND SUPERVISING MEMBER

Dr. Strafford and Dr. Bechtel provided an overview of their duties as Secretary and Supervising Member of the Board. As Secretary and Supervising Member, Dr. Strafford and Dr. Bechtel review all complaints and make decisions about whether to approve subpoenas, refer complaints to one of the Board’s Quality Intervention Panels (QIP), approve negotiated settlements, refer the complaint to Enforcement for disciplinary action, or close the complaint, among other options. Dr. Strafford and Dr. Bechtel also discussed the complaint protocols, which supports consistency in Board review of similar complaints.

The Board discussed the QIP panels. Dr. Strafford explained that there are two QIP panels, each made up of physicians of differing specialties and a consumer member. The purpose of the QIP panels is to review complaints involving allegations of minimal standard of care violations and to advise the Secretary and Supervising Member on their disposition. The QIP panels may subpoena medical records and/or invite the subject of the complaint to appear before the panel to answer questions. For each complaint reviewed, the QIP panel may recommend closing the complaint, sending a cautionary letter to the physician, referring the physician to educational courses to bring his or her practice up to standards, or referring the complaint to Enforcement for possible disciplinary action. The Secretary and Supervising Member decide on the disposition of the complaints based on the panels’ recommendations. Dr. Strafford noted that all QIP reviews are strictly confidential and are not subject to public disclosure.

Mr. Gonidakis asked what checks and balances exist on the activities of the Secretary and Supervising Member. Dr. Strafford stated that the Board President oversees the Secretary and Supervising Member. Also, the Secretary and Supervising Member are elected each year by the Board. Dr. Steinbergh also noted that the Secretary and Supervising Member are guided by the disciplinary guidelines, which the Board approves and may alter.

COMPLAINT, INVESTIGATIVE, AND ENFORCEMENT PROCESSES

Ms. Anderson discussed the Board’s complaint, investigative, and enforcement processes. Ms. Anderson explained that a complaint is an allegation that one or more of the Board’s licensees has violated a provision of law that the Board is charged with enforcing. Ms. Anderson noted that 61% of complaints are received from the public, such as the practitioner’s patient or patient’s family member; 24% are filed by Board staff or investigators; 8% are filed by other agencies; and 5% are filed by health care practitioners. Ms. Anderson briefly described the triage process and how a complaint moves into the Board’s various pathways, under the direction of the Secretary and Supervising Member.

Mr. Beck reviewed the functions of the Board’s Investigations Section. Mr. Beck explained that an investigator collects evidence about a case and may conduct interviews. Investigators may also request subpoenas for medical records. After completing an investigation, the investigator will write a Report of Investigation and forward it to the Secretary and Supervising Member.

Mr. Beck dispelled several myths about Medical Board investigators. Mr. Beck stated that investigators usually schedule appointments to speak with practitioners unless the nature of the complaint requires a
surprise visit; investigators are discreet in interactions with licensees and do not disrupt the practitioner’s office; and investigators have no authority to arrest a licensee.

Ms. Marshall reviewed the functions of the Board Enforcement Section. Ms. Marshall stated that an enforcement attorney may request further investigation to ensure that a case is sufficient to support charges. The Enforcement Section often utilizes medical experts to offer expert opinions on a case. Enforcement attorneys prepare Notices of Opportunity for Hearing citations and pre-hearing suspensions for the Board’s review and approval, as well as negotiate settlement agreements for ratification by the Board.

Ms. Marshall stated that, contrary to common notions, most complaints do not result in disciplinary action. In 2012, 34% of complaints went to the Board for possible action. Ms. Marshall stated enforcement attorneys are required by law to comply with the Ohio Rules of Professional Conduct, which stipulates that an enforcement attorney is forbidden from discussing a case directly with a licensee if that licensee has legal counsel. Ms. Marshall also noted that the Board’s enforcement attorneys go head-to-head with the senior attorneys of top law firms on a daily basis.

Ms. Marshall provided some hypothetical case discussions for the Board to discuss and to consider what they would do if they were Secretary or Supervising Member.

ADMINISTRATIVE HEARINGS

Mr. Porter and Ms. Blue reviewed the functions of the Board’s Administrative Hearing Unit. Mr. Porter emphasized that hearing examiners must maintain impartiality in the cases heard, noting that the Administrative Hearing Unit is physically separate from the Board’s main office and the hearing examiners cannot engage in ex parte communication with either party on substantive issues. The hearing examiner rules on pre-hearing motions and preliminary matters. Ms. Blue described the hearing process, including witnesses and rulings on objections and admissibility of exhibits.

Following a hearing, the hearing examiner will write a Report and Recommendation based on evidence submitted at the Hearing. When drafting a Proposed Order, the hearing examiner will consider the Board’s disciplinary guidelines. The Report and Recommendation is then forwarded to the Board for their final decision.

The Board recessed for lunch at 11:50 a.m. and returned at 12:20 p.m.

STRATEGIC PLANNING

Mr. Haslam led the Board in a discussion of strategic planning. The Board identified the following areas of discussion: The financial stability of the Board; Board staff; Physician assistant scope of practice and related legal issues; Communication and the perception of the Board; Technology; and the Board’s rules.

The Board discussed these issues thoroughly, particularly ways in which the Board may achieve financial stability so that it can continue on its mission of public protection. The Board discussed the possibilities
for cost recovery, including fines for investigative costs and other measures, and the feasibility of gaining approval from the legislature.

PROGRAM SUMMARY

Dr. Steinbergh thanked all Board members and staff for participating in the Board’s retreat. The Board agreed that these discussions have been worthwhile and suggested that a half-day follow-up retreat be scheduled for February or March 2014.

Thereupon at 2:52 p.m. the October 10, 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 October 9-10, 2013, as approved on November 13, 2013.

Anita M. Steinbergh, D.O., President

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