

February 12, 2014

MINUTES

THE STATE MEDICAL BOARD OF OHIO

FEBRUARY 12, 2014

Krishnamurthi Ramprasad, M.D., President, called the meeting to order at 10:10 a.m. in the Administrative Hearing Room, 3rd Floor, the James A. Rhodes Office Tower, 30 E. Broad Street, Columbus, Ohio 43215, with the following members present: J. Craig Strafford, M.D., Secretary; Mark A. Bechtel, M.D., Supervising Member; Anita M. Steinbergh, D.O.; Donald R. Kenney, Sr.; Michael L. Gonidakis; Amol Soin, M.D.; Sushil M. Sethi, M.D.; Bruce R. Saferin, D.P.M.; Robert P. Giacalone. The following member arrived at a later time: Lance A. Talmage, M.D., Vice-President.

Also present were: Aaron Haslam, Executive Director; Kimberly Anderson, Assistant Executive Director; Susan Loe, Assistant Executive Director, Program Management and Operations; Michael Miller, Assistant Executive Director for Licensure and Renewal; Mary Courtney Ore, Deputy Director of Education and Outreach; Sallie J. Debolt, General Counsel; David Katko, Assistant Legal Counsel; William Schmidt, Senior Counsel for Investigations, Compliance and Enforcement; Joan K. Wehrle, Education & Outreach Program Manager; Jonithon LaCross, Public Policy & Governmental Affairs Program Administrator; K. Randy Beck, Interim Chief of Investigations; Brenda Harrison, Investigator Supervisor; Jeff Lewis and Curtis Fortner, Investigators; Rebecca Marshall, Chief Enforcement Attorney; Karen Mortland, Mark Blackmer, Cheryl Pokorny, and Andrew Lenobel, Enforcement Attorneys; Kyle Wilcox and Melinda Snyder, Assistant Attorneys General; Gregory Porter, Chief Hearing Examiner; Danielle Blue, Hearing Examiner; Vickie Oldham, Fiscal Officer; Judy Rodriguez, Investigations Secretary; Gary Holben, Operations Administrator; Danielle Bickers, Compliance Supervisor; Annette Jones and Angela Moore, Compliance Officers; Kay Rieve, Administrative Officer; Jewell Bates and Liz Hawk, CME and Renewal Assistants; Barbara Jacobs, Senior Executive Staff Attorney; Jacqueline A. Moore and Fonda Brooks, Public Information Assistants; Christine Schwartz, Enforcement Intern; Benton Taylor, Business Office Assistant; and Paula Farrell, Executive Assistant to the Director and Program Administrator.

MINUTES REVIEW

Dr. Sethi moved to approve the draft minutes of the January 8, 2014, Board meeting, as written. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

ADMINISTRATIVE REPORT

Dr. Ramprasad tabled the Administrative Report until Aaron Haslam, Executive Director arrived.

CHAPTER 4731-24, OHIO ADMINISTRATIVE CODE: ANESTHESIOLOGIST ASSISTANT RULES

Ms. Debolt stated that they had reviewed the four rules and, with the input of the Anesthesiologist Association, have recommended that three of the rules be filed as no-change rules and that the fourth rule be completely repealed. She continued to say that the rules have gone through the CSI process, which recommended that the Board should proceed with the formal filing.

Dr. Steinbergh moved to file Rules 4731-24-01, 4731-24-02, and 4731-24-03 as no-change rules with JCARR; and to file Rule 4731-24-04 for recession with JCARR. Dr. Saferin seconded the motion. All members present voted aye. The motion carried.

OHIO ETHICS COMMISSION RULE

Ms. Debolt stated that as part of the Administrative Report, which Mr. Haslam will present this afternoon, the Board would be asked to approve travel again to the Federation of State Medical Board annual meeting, as well as future travel that the Executive Director has planned.

For informational purposes only, Ms. Debolt discussed Rule 102-3-08 O.A.C. and its impact on Medical Board travel.

Dr. Talmage joined the meeting at this time.

ONE-BITE REPORTING EXEMPTION

Kim Anderson provided a PowerPoint presentation outlining the One-Bite reporting exemption for licensees with drug and alcohol-related impairment and some possible changes to the rules and processes surrounding the exemption. She also presented a memorandum with possible changes to the consent agreement language to clarify whether the individual had previously been under the reporting exemption and to provide additional information regarding consequences for not being truthful to the Board.

Discussion took place regarding the application of the reporting exemption and the reporting requirements under Ohio Revised Code Section 4731.224. Dr. Talmage raised the point that elimination of the reporting exemption could impact patient safety because people would hide their impairment for as long as possible with disastrous consequences in some cases. Mr. Giacalone presented an alternative plan where anyone claiming exemption under One-Bite rule AND their treatment provider must:

- (1) Both register with the State Medical Board. Name will be kept confidential and separate from investigators and law enforcement.
- (2) The registration will create a rebuttable presumption that individual meets One-Bite rule unless facts arise separate and apart from this registration with the State Medical Board which would invalidate that (e.g., open or ongoing State Medical Board or

- other agency's investigation; arrest; falsehood - discover this is a relapse situation and individual lied about this being their first time in treatment.)
- (3) If no registration with the State Medical Board, then no exemption under One-Bite Rule.
 - (4) Treatment providers who fail to register patients also subject to discipline.
 - (5) State Medical Board Executive Director or designee will need to provide list of individuals who will receive a Notice of Hearing to State Medical Board function holding the One-Bite registry list to alert those individuals that they no longer get any protection under the One-Bite Rule and validate that they have not had a prior substance abuse event being covered by one-bite (so the individual is not able to reassert this).

Dr. Steinbergh moved to take the following steps and have staff work with Mr. Giacalone on the alternative proposal:

- **Change Rule 4731-15-01(C) to require reporting of acts constituting criminal violations and minimal standards violations**
- **Adopt consent agreement language that clarifies**
 - **if an individual was previously under one-bite status**
 - **the consequences of providing false information to the Board staff in entering into the consent agreement**

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

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

The motion carried.

WEIGHT-LOSS RULES

David Katko summarized the research conducted by staff and comments received from interested parties on the current rule. The PowerPoint presentation has been provided as an Exhibit.

Ms. Debolt led the Board in a discussion of options for changing the rule as to the use of OARRS.

Use of OARRS: The current rule does not require that OARRS be queried when treating a patient for weight loss using controlled substance anorectics. Board members agreed that OARRS should be queried prior to initiating treatment with controlled substance anorectics.

Face-to-face physician visit: The current rule requires the physician see the patient face-to-face every thirty days. Dr. Talmage voiced concerns that the drugs may be inappropriately started on patients with a BMI below 27 or will be continued when the patient is either gaining weight or has not lost weight in a long time. He stated that aside from those concerns he believes that the rule should be consistent with the FDA labeling for the drugs. Mr. Giacalone agreed as far as new drugs for chronic weight management are concerned. Dr. Steinbergh stressed that when determining how frequently the patient should be seen the physician must use good clinical judgment and not just rely on a protocol as hypertension or other medical conditions may need to be addressed. Dr. Soin was pleased to see the rule may possibly be changed to do away with the every thirty day face-to-face requirement. Dr. Sethi opined that the thirty day face-to-face monitoring should continue.

Use of physician assistants: Ms. Debolt asked the Board members to consider the possibility of allowing physician assistants to see the patients at the follow-up visits. Dr. Bechtel asked whether physician assistants may currently prescribe weight loss drugs in Ohio. Ms. Debolt replied in the negative, but it was agreed that if the Board changed the rule to allow physician assistants to see weight loss patients the formulary could be changed to allow the physician assistant to prescribe the drugs, perhaps under the “physician initiated” category. Dr. Talmage asked whether nurse practitioners may prescribe weight loss drugs. Ms. Debolt indicated that research on the question would be undertaken.

Period of cessation of controlled substance anorectics: The current rule requires the patient to be taken off of a short-term anorectic after twelve weeks. There must then be a six month interval before starting the same or another controlled substance anorectic. Ms. Debolt stated that the staff is recommending that the interval be no longer than ninety days. Mr. Schmidt commented that a ninety day break would make it much easier for the physician to prescribe. Dr. Talmage questioned the need for even a ninety day break. Mr. Giacalone questioned the ability to put the patient back on the same short-term anorectic even if the patient hadn’t lost weight on the drug prior to the break. Dr. Steinbergh opined that with a documented lifestyle change efforts such as exercise and diet it might be permissible to have no required break in receiving a short-term anorectic. After further discussion, the members agreed that the break could be done away with as long as there is documentation of lifestyle changes and the patient’s demonstrated effort to lose weight.

Separate provisions for short-term and long-term controlled substance anorectics: The members were asked whether it might be appropriate to have difference requirements for

short-term and long-term controlled substances anorectics that reflect the differences in FDA labeling for the drug types. The members agreed without debate.

The Board also discussed the possibility of requiring a pregnancy test for female patients of reproductive years. Some members opined that the minimal standards of care require that a pregnancy test be conducted because the FDA labeling says one should be conducted. Other members opined that the requirement should be in rule. No consensus was reached.

Dr. Steinbergh moved to approve the drafting of rules to reflect the discussion with the drafts then being circulated to interested parties. Dr. Saferin seconded the motion. All members voted aye. The motion carried.

FINAL EXECUTIVE, GROUP 1, AND GROUP 2 COMMITTEE MINUTES

Dr. Steinbergh moved to approve the final minutes of the Executive and Group 2 Committee of the January 8, 2013 meeting. Dr. Saferin seconded the motion. All members voted aye. The motion carried.

Dr. Strafford moved to approve the final minutes of Group 1 of the January 8, 2013 meeting. Dr. Saferin seconded the motion. All members voted aye. The motion carried.

REPORTS BY ASSIGNED COMMITTEES

Policy Committee

Mr. Gonidakis stated that the Policy Committee was well attended and robust. He asked Ms. Anderson to speak on the Suboxone Rule. Ms. Anderson summarized the Suboxone Rule, the concerns they have received from legislators and other concerned groups, and the changes that were made based on the feedback.

Mr. Giacalone suggested making an amendment to remove the word "narcotics" in Paragraph (A)(7).

Dr. Steinbergh exited the meeting at this time.

Dr. Bechtel moved to amend the rule removing the word "narcotics" in Paragraph (A)(7) and to file the amended rule with the Common Sense Initiative (CSI). Dr. Saferin seconded the motion. All members present voted aye. The motion carried.

Mr. LaCross stated that during the Policy Committee meeting the members provided insight that was helpful and appreciated. Committee members voiced support for HB 170, the Naloxone Bill, and discussed Representative Wachtmann's HB 332. It was decided that Mr. LaCross would work with Dr. Soin to create an op-ed to release to the General Assembly and public to educate them on the issue. Also, discussed was HB 314, the controlled substance prescription to minors, which requires a consent form for a minor. It was stated that the office continues working on HB 341, the OARRS Bill, and that we

would also continue working with the Pharmacy Board.

Dr. Steinbergh returned to the meeting at this time.

Licensure Committee

Licensure Application Review

Michele Walsh, M.D.

Dr. Ramprasad stated that Michele Walsh is applying for her initial license in Ohio, had a training certificate, was a family practice resident at Grant Medical Center July 2004-2007 and also participated in fellowship in Memphis, Tennessee in 2008. Dr. Walsh is board-certified and she's volunteered herself in Afghanistan to work in health clinics and has done a lot of clinical work. The Committee recommends that licensure be granted.

Dr. Steinbergh moved to approve Dr. Walsh's application for Ohio licensure as presented. Dr. Saferin seconded the motion. A vote was taken:

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

The motion carried.

Britt Conroy, M.D.

Dr. Ramprasad stated that Dr. Britt Conroy is requesting a waiver for the Step 3 United States Medical Licensing Examination (USMLE). Dr. Conroy has explained that she is over the 10 year limit because she left her medical school training to enter a graduate program in Epidemiology and Biostatistics, earned her Ph.D. in 2009, and then finished her medical degree in 2011. Dr. Conroy is currently a family medicine resident at University Hospital in Cleveland. The Committee recommends granting Dr. Conroy's request.

Dr. Saferin moved to grant Dr. Conroy a USMLE 3 wavier. Dr. Strafford seconded the motion. A vote was taken:

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

The motion carried.

Wei-Ming Kao, M.D

Dr. Ramprasad stated that Dr. Wei-Ming Kao is requesting a waiver for the Step 3 United States Medical Licensing Examination (USMLE). Dr. Kao explained that he is over the 10 year limit by eight months because he discontinued his medical school training in 2003, transferred to graduate school for a Ph.D. in Biomedical Science in 2008, and then finished the Doctor of Medicine in 2010. Dr. Kao is currently an Internal Medicine/Pediatrics resident at MetroHealth Medical Center in Cleveland, where he has completed three years of training and is scheduled to complete his current training in June 2014. The Committee recommends granting Dr. Kao's request.

Dr. Saferin moved to grant Mr. Kao's request for a Step 3 USMLE wavier. Dr. Bechtel seconded the motion. A vote was taken:

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

The motion carried.

Chris Runyon, M.D.

Dr. Ramprasad stated that Dr. Chris Runyon is requesting a waiver for the Step 3 United States Medical Licensing Examination (USMLE). Dr. Runyon explained that he is over the 10 year limit by seven months because he discontinued his medical school training in 2003, transferred to graduate school for a Ph.D. in Developmental Biology in 2008, and

then finished the Doctor of Medicine in 2009. Dr. Runyon is presently a Plastic Surgery/Hand Reconstruction fellow at University Hospitals Medical Center in Cincinnati, where he has completed four years of training. Dr. Runyon is scheduled to complete his current fellowship in June of this year. The Committee recommends granting Dr. Runyon's request.

Dr. Bechtel moved to approve granting Dr. Runyon's request for the Step 3 USMLE wavier. Dr. Saferin seconded the motion. A vote was taken:

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

The motion carried.

Finance Committee

Mr. Kenney stated that increased fees have been disallowed and without adequate funds, our agency will be unable to perform its duties. A proposal of fining authority was reviewed regarding grounds for disciplinary action and proposed fines. CME actions and suggested fees were also included in the proposal. Mr. Kenney stated that he and Dr. Strafford will review the proposal and bring their suggestions back to the Board in March.

INTRODUCTION OF NEW STAFF MEMBERS

Dr. Ramprasad interrupted the Reports by Assigned Committees to introduce new State Medical Board employees, Paula Farrell, Executive Assistant to the Director and Program Administrator; Andrew Lenobel, Enforcement Attorney; and Mary Courtney Ore, Deputy Director of Education and Outreach.

Dr. Ramprasad stated that the Reports by Assigned Committees could continue.

CONTINUATION OF REPORTS BY ASSIGNED COMMITTEES

Physician Assistant/Scope of Practice Committee

Dr. Steinbergh stated that the Physician Assistant/Scope of Practice Committee met and two different groups appeared before them to discuss supervision agreements. The groups were, Doctors Urgent Care and Urgent Care Specialists.

Dr. Steinbergh stated that Doctors Urgent Care, who was working to get a number of supervision agreements in place, had found it difficult because of the large number of Urgent Care Centers, a variety of physicians who rotate into these Centers, and issues with questionable supervision of the physician assistants.

Dr. Steinbergh noted that they approved the Quality Assurance Plan for Doctor's Urgent Care. The Committee tabled the Supervision Agreement and Supervisory Plan for Drs. Coffey and Grubb, pending receipt of appropriate information.

Dr. Steinbergh stated that Dr. Philip North practices at locations in both Franklin and Dayton. The Committee recommends that the Board approve Dr. North's supervisory plan.

Dr. Steinbergh moved to approve the Supervision Agreement and Supervisory Plan for Dr. Philip North. Dr. Saferin seconded the motion. A vote was taken. Motion carried.

Dr. Steinbergh stated that Urgent Care Specialists requested a Physician Assistant Supervision Agreement and Physician Supervisory Plan for Dr. Alan Fark, Dr. Philip Myers, Dr. Erum Qayum, and Dr. George Varghese. Urgent Care Specialists' plan had been approved in the past and Dr. Steinbergh stated that the Committee had looked to those doctors to demonstrate that they are practicing at these sites and to approve their physician assistant supervision agreement.

Dr. Steinbergh continued to say that, in the past, we have documented for this group that they are clear that their supervision is intact, that they always have a supervising physician who works at that location and that they're appropriately supervising the physician assistants.

Dr. Steinbergh moved to approve the request by Urgent Care Specialists for the Physician Supervisory Plan and Physician Assistant Supervision Agreement Applications for Drs. Fark, Myers, Qayum and Varghese. Dr. Saferin seconded the motion. All members voted aye. The motion carried.

Formulary Discussion

Dr. Steinbergh stated that due to time constraints the Committee did not discuss the physician assistant formulary. This topic will be discussed at the next Board meeting.

Special Services Applications

Dr. Steinbergh stated that the Orthopaedic Institute of Ohio was seeking approval of the Special Services Application for subacromial bursa injections utilizing 90 percent on-site, 10 percent direct, physician assistant observing for 25 procedures, physician observing the physician assistant for 25 procedures, supervising physician will make the determination for the injection, and the physician assistant will have two years of orthopedic experience.

Dr. Steinbergh moved to approve the Special Services Application from the Orthopaedic Institute of Ohio for subacromial bursa injections. Dr. Talmage seconded the motion. All members voted aye. The motion carried.

Dr. Steinbergh stated that the Orthopaedic Institute of Ohio was also seeking approval of the Special Services Application for the greater trochanter bursa hip injection, utilizing 10 percent direct, 90 percent on-site, physician assistant observes in 25 procedures, physician assistant being observed for 25 procedures in the office setting. The supervising physician would see the patient, make the determination for the initial injection, and the physician assistant would have two years of orthopedic experience.

Dr. Steinbergh moved to approve the Special Services Application from the Orthopaedic Institute of Ohio for the greater trochanter bursa hip injection. Dr. Talmage seconded the motion. All members voted aye. The motion carried.

APPLICANTS FOR LICENSURE

Dr. Strafford moved to approve 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 therapist applicants listed in Exhibit “C,” acupuncturist applicants listed in Exhibit “D,” and the genetic counselor applicants in Exhibit “E.” Dr. Bechtel seconded the motion. A vote was taken.

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

The motion carried.

The Board recessed at 12:15 p.m. for lunch and resumed at 1:00 p.m. Mr. Gonidakis was not present when the meeting resumed.

EXECUTIVE SESSION

Dr. Steinbergh moved to enter Executive Session to confer with the Attorney General’s representatives on matters of pending or imminent court action. Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:	Dr. Strafford:	- aye
	Dr. Bechtel:	- aye
	Dr. Saferin:	- aye
	Dr. Soin:	- aye
	Dr. Steinbergh:	- aye
	Dr. Ramprasad:	- aye
	Dr. Sethi:	- aye
	Dr. Talmage:	- aye
	Mr. Kenney	- aye
	Mr. Giacalone:	- 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, Mr. Miller, Ms. Loe, Ms. Ore, Ms. Debolt, Mr. Katko, Mr. Schmidt, Mr. Beck, Ms. Harrison, the Investigators, Ms. Marshall, the Enforcement Attorneys, the Assistant Attorneys General, Ms. Rieve, Ms. Jacobs, Ms. Moore, Ms. Brooks, Ms. Schwartz, Mr. Taylor, and Ms. Farrell in attendance.

Mr. Gonidakis entered the meeting during Executive Session.

The Board returned to public session.

PROBATION AND REINSTATEMENT CONSENT AGENDA

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

Dr. Steinbergh noted that Dr. Koczan and Dr. Rubenstein have made requests to be released from the term of their Consent Agreements. Dr. Steinbergh stated that Drs. Koczan and Rubenstein Consent Agreements do not require them to make final appearances before the Board prior to their release. Dr. Steinbergh wanted to point out the new Board members that this is occasionally the case with Consent Agreements and Board Orders.

Dr. Steinbergh moved to accept the Compliance staff's Reports of Conferences on January 6 & 7, 2014 with: Nicholas A. Atanasoff, D.O.; Regis P. Purlas, D.O.; Christopher S. Croom, M.D.; Matthew H. Evenhouse, M.D.; Jennifer J. Furin, M.D.; Marjorie M. Haas, M.D.; Alexander C. Halkias, M.D.; Shane R. Hanzlik, M.D.; John S. Henry, M.D.; Kavita A. Kang, D.O.; Christopher J. Karakasis, M.D.; Erik J. Kraenzler, M.D.; Thomas D. Kramer, Jr., M.D.; Wendy A. Millis, M.D.; Carla M. Myers, D.O.; Sheila S. Paul, D.O.; Sudhir S. Polisetty, M.D.; Jerry G. Purvis, Jr., M.D.; and Robert C. Turner, M.D.

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

- To grant Mark E. Blair, M.D.'s request for approval of Angela Wallenbrock, M.D., to serve as the new monitoring physician;
- To grant Bradley E. Dickson, M.D.'s request for approval of *The PBI Prescribing Course: Opioids, Pain Management & Addiction in Partnership*, offered by UC Irvine School of Medicine;
- To grant David C. Kirkwood, M.D.'s request for approval of Andrew D. Eddy, M.D., to serve as an additional monitoring physician, with the review of five charts per week for each practice location;
- To grant Katherine A. Koczan, D.O.'s request for release from the terms of the September 12, 2007 Consent Agreement;
- To grant Jeffrey B. Rubinstein, M.D.'s request for Release from the terms of the January 11, 2012 Consent Agreement;
- To grant Alvaro D. Waissbluth, M.D.'s request for approval of *Safe Opioid Prescribing*, online course administered by American College of Physicians/PriMed to fulfill the controlled substance prescribing course requirement;
- To grant Wayne Marshall Williams, M.D.'s request for approval of Joseph Pafumy, M.D., to serve as the new monitor.

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

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

The motion carried.

PROBATIONARY APPEARANCES

Genevieve A. Salvaggio, M.T.

Ms. Salvaggio was appearing before the Board pursuant to her request for release from the terms of her December 14, 2011 Consent Agreement. Ms. Bickers reviewed Ms.

Salvaggio's history with the Board.

Dr. Steinbergh asked Ms. Salvaggio how she was doing and inquired about how her practice was going. Ms. Salvaggio responded that she has a small practice and, for family reasons, is doing part-time massage therapy.

Dr. Steinbergh commented that she noticed that Ms. Salvaggio reminds herself of her licensure requirements by utilizing Google calendar and asked Ms. Salvaggio if she had opportunities to discuss her situation with her peers. Ms. Salvaggio indicated that she had and that she recommended to them that they ensure their address and contact information is updated, as well.

Dr. Steinbergh asked Ms. Salvaggio if she had any questions for the Board. Ms. Salvaggio stated she had none.

Dr. Steinbergh moved to release Genevieve A. Salvaggio, M.T., from the terms of the December 14, 2011, Consent Agreement, effective on February 13, 2014. Dr. Saferin seconded the motion. All members voted aye. The motion carried.

Johanna Wasen, M.T.

Ms. Johanna Wasen was appearing before the Board pursuant to her request for release from the terms of her November 9, 2011 Consent Agreement. Ms. Bickers reviewed Ms. Wasen's history with the Board.

Dr. Steinbergh asked Ms. Wasen to inform the Board how her action with the Medical Board affected her career and what she was doing currently. Ms. Wasen stated that the suspension placed a financial burden on her and that she is currently part owner of a massage business in Cincinnati, Ohio.

Dr. Steinbergh asked what system she had in place to prevent this from happening again and Ms. Wasen responded that they are installing certain times to check, at least quarterly, on the files of every one of their independent contractors and freelancers.

Dr. Steinbergh inquired as to how many people that included and Ms. Wasen responded that there were six, including her and that they also had independent contractors at their company, totaling eight, which included an acupuncturist and a Reiki master.

Dr. Steinbergh moved to release Ms. Johanna Wasen, M.T., from her November 9, 2011, Consent Agreement, effective immediately. Dr. Strafford seconded the motion. All members voted aye. The motion carried.

REINSTATEMENT REQUESTS

Patrick Muffley, D.O.

Dr. Ramprasad stated that Patrick Muffley, D.O., is requesting reinstatement from his license to practice osteopathic medicine in Ohio. Dr. Ramprasad reviewed Dr. Muffley's history with the Board.

Dr. Saferin moved to approve the request for reinstatement of the license of Patrick E. Muffley, D.O., effective as of February 20, 2014, subject to the probationary terms and conditions as outlined in the order, for a minimum of two years. Dr. Soin seconded the motion. A vote was taken:

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

The motion carried.

REPORTS AND RECOMMENDATIONS

Dr. Ramprasad announced that the Board would now consider the Reports and Recommendations appearing on the agenda.

Dr. Ramprasad 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: Obianuju Genevieve Aguolu, M.D.; Jerome McTague, M.D.; and Aaron O. Williams, M.D.

A roll call was taken:

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

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

A roll call was taken:

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

Dr. Ramprasad 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 disciplinary matters before the Board today, Dr. Strafford served as Secretary and Dr. Bechtel served as Supervising Member. Also, Dr. Talmage served as Secretary and/or Acting Supervising Member in the matter of Dr. McTague.

Dr. Ramprasad 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.

Obianuju Genevieve Aguolu, M.D., Case No. 13-CRF-051

Dr. Ramprasad directed the Board's attention to the matter of Obianuju Genevieve Aguolu, M.D., Case No. 13-CRF-051 and stated that no objections have been filed. Ms. Clovis was the Hearing Examiner.

Dr. Ramprasad continued in saying that a request to address the Board had been filed timely on behalf of Dr. Aguolu. Five minutes would be allowed for that address.

Dr. Aguolo was represented by her attorney, Elizabeth Collis.

Ms. Collis stated that she and her client had not filed objection in this case as they believed Ms. Clovis did an excellent job in reviewing all the evidence and making a recommendation to the Board. She continued to say that that it is clear from the evidence that Dr. Aguolu is a strong student who tests well, but had a problem and struggled in her residency programs. Ms. Collis said that the Board alleged that Dr. Aguolu violated Revised Code 4731 (B)(5) and (B)(6). (B)(5) allows the Board to deny a license if a physician has provided the Board with false, fraudulent, or misleading information. After reviewing all of the evidence, the Hearing Examiner found that the Board failed to prove that Dr. Aguolu had violated Section (B)(5). Ms. Clovis found that Dr. Aguolu had

disclosed to the Board the three residency programs that she had been in, and that she had affirmatively noted on her application, on the questions and on the addendum, that she had been on probation, and that her contract with the SUNY program had not been renewed. Therefore, based on the evidence that was introduced to the Hearing Examiner, she determined that Section (B)(5) was not proven by the State.

Ms. Collis also stated that the Board had also proposed the denial of Dr. Aguolu's license for violation of (B)(6), which is practicing below the standard of care. Dr. Aguolu was required to repeat several months of her training, stating that while all residents are not required to repeat training, it is not uncommon. In a residency program, if a resident is not successful, they have to repeat that program and they're not given credit for that particular month. Ms. Collis found no other cases where this Board had denied a license based on the fact that a resident had to repeat certain months of training. In this case, Dr. Aguolu has not successfully completed two full years of residency training, so she actually was not eligible for a license with the Board at this time, although that's not why the Board proposed to deny her license.

Since the Board had failed to prove the two allegations, Dr. Aguolo and Ms. Collis requested that the Board choose to either take no action or allow Dr. Aguolu to withdraw her application, seek full residency training for the two years, and reapply for a license at a later date. Ms. Collis then proceeded to allow her client, Dr. Aguolu, to comment.

Dr. Aguolu addressed the members of the Board, stated that she moved to the United States to join her husband and reiterated her education and residency information. Dr. Aguolo stated that when she began the residency program at Tod Children's Hospital in Youngstown, she was unaware that the program was soon to be dismantled and that the residents would have to be moved to Akron Children's Hospital. Dr. Aguolo said that many of the U.S.-trained residents sought other programs, but she had no other option than the Akron program. As Dr. Aguolo had never interviewed with this program director, she claimed that it was clear that the program didn't want the Youngstown residents. Upon entering the program, Dr. Aguolo was advised that she would not be advanced to PGY-2, but would be required to repeat many months of PGY-1 training. It was indicated that she needed to acquire more experience to become a senior resident in their program.

Dr. Aguolo admitted that she struggled in the Akron program for six months and that she was pregnant and very ill during her pregnancy. Dr. Aguolo stated that she sought a leave of absence to get through the pregnancy, was denied by the program, and finally resigned from it in January 2008 for health reasons. In June 2008, she passed the Step 3 United States Medical Licensing Examination (USMLE) on her first attempt and was accepted into the residency program at SUNY at Stony Brook, New York, a few months later. Dr. Aguolo had completed 11 months of the program, but was only given credit for eight months. Dr. Blair, who provided a letter to the Medical Board, stated that Dr. Aguolo's performance was unsatisfactory. However, Dr. Blair wasn't the program director when Dr. Aguolu was participating and had no firsthand knowledge of her performance.

Dr. Aguolu's second child was only six weeks old when she started the SUNY program. Dr. Aguolo and her children moved to New York and, as a single parent, she struggled with the demands of the program, while also caring for two young children and seeking adequate child care. Dr. Aguolo's contract was not renewed after the first year and she applied for an Ohio medical license in 2012, because she believed she met the licensure application requirements, having completed about roughly five months of training, based on the letter she had from the American Board of Pediatrics. Dr. Aguolu claims that she provided the Medical Board with as accurate information as she had at that time and that she included the dates of the three residency programs she attended. Also, she checked "Yes" to the questions on the application that asked if she had ever transferred from one program to another, and if she had ever resigned from, or withdrew, or was placed on probation by a program. Dr. Aguolo also included an addendum to her application where she noted that she was on probation at SUNY and that they refused to renew her contract. She stated that she never provided false or fraudulent information to this Board or the Board investigator. Dr. Aguolo felt that she fully cooperated in the Board investigation and provided the investigator with as accurate information as she had at the time.

Since leaving SUNY in 2008, Dr. Aguolu completed a Master's degree in public health from Akron University and started a Ph.D. program at Kent State. Dr. Aguolo said that her children are a little older, her health is now good, she felt that her personal life was stable, and that she had the support and confidence to reenter a training program and residency. Dr. Aguolo respectfully requests that the Board allow her to withdraw her application or choose not to rule on it at this time to give her time to enter into another residency program to complete the training required for an Ohio license.

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

Mr. Wilcox stated that the Report and Recommendation did a good job of summarizing the case. However, Mr. Wilcox disagreed with the conclusion that Dr. Aguolu did not purposefully attempt to mislead the Board in her application. In Mr. Wilcox's opinion, there was enough evidence from the two residency programs to show that Dr. Aguolu must have been aware of the many deficiencies and limitations being placed upon her by those programs. The residency director at Akron described Dr. Aguolo's time there as a disaster and Mr. Wilcox noted that as a very frank comment and it was the first time he had seen that comment in any type of materials from a residency program. Mr. Wilcox said this case is about credibility and stated to the Board that they should use their experiences and knowledge of residency and training programs to evaluate this case.

The records in this matter are full of documentation from both Akron and SUNY Stony Brook regarding Dr. Aguolu's poor performance, Mr. Wilcox stated. He continued to say that Dr. Aguolo's answers at the hearing and her explanations in her application do not coincide with the residency programs' documented explanation. Ultimately, what Mr. Wilcox looked at when he reviewed this case, was whether this Board should deny or permanently deny Dr. Aguolo's request for application. The Hearing Examiner made some points that Mr. Wilcox said he agreed with in Dr. Aguolu's favor. Mr. Wilcox agreed that Dr. Aguolo's record with the USMLE was impressive, particularly because she passed every step on the first attempt and stated that is rare and that she is obviously a

good student who tests well. However, Mr. Wilcox felt that Dr. Aguolo's problems stem from her attitude and personal interactions with the medical staff, as well as her fellow students, residents and some of the patients.

Mr. Wilcox asked the board to use their experience to decide if this was a case of overwhelming problems in her personal life and possibly immaturity, or something more serious. Mr. Wilcox said that Dr. Aguolo had taken on many responsibilities at the time with having children and child care issues, while going through a residency, but he believed there are residents who face this situation, and that is wasn't necessarily excusable. Mr. Wilcox closed by saying, if the Board believed Dr. Aguolo intentionally misled them, then they should permanently deny her application. Mr. Wilcox suggested that the Board amend the Report and Recommendation to reflect that there was a finding of a (B)(5) violation.

Dr. Steinbergh moved to approve and confirm Ms. Clovis' Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Dr. Aguolu. Dr. Sethi seconded the motion.

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

Dr. Saferin stated that in a letter dated June 12, 2013, the State Medical Board of Ohio notified Dr. Aguolu that they proposed to deny her application for a certificate to practice medicine and surgery in Ohio based on the following allegations: prior to applying, Dr. Aguolu failed to engage in active practice of medicine and surgery for a period in excess of two years, which was cause for the Board to require additional evidence of fitness to practice to support her application under Section 4331.222 of the Ohio Revised Code; that Dr. Aguolu made false, deceptive, and misleading statements in her application in violation of Section 4731.22(B)(5) of the Ohio Revised Code; and that the doctor had failed to conform to minimal standards of care during her training program in violation of Section 4731.22(B)(6).

Dr. Saferin summarized the evidence saying that Dr. Aguolo testified that in 2004 she graduated from University of Medicine in Nigeria as one of the top ten students and that she passed each step of the United States Medical Licensing Examination (USMLE) on the first attempt. Dr. Saferin went on to say that Dr. Aguolo stated that she had never been licensed to practice medicine and surgery in any state or jurisdiction. That in July 2006, Dr. Aguolo began her first pediatric residency program at Tod Hospital in Youngstown, Ohio, and in June 2007, having believed she completed her first year of residency, the program was terminated and the residents were allowed to transfer to Akron Children's Hospital, but she was later informed that she would transfer as a PGY-1, not receiving credit for her initial year at the other residency. Dr. Aguolo agreed and started as a PGY-1, knowing that she had been demoted. At Akron General Hospital, her skills were extremely lacking and it was not felt that she was capable of supervising care. By September of 2007, Dr. Aguolo remained unqualified to PGY-2 status, as she struggled to follow basic instructions and was unqualified to supervise patient care. According to the records, by the end of 2007, Dr. Aguolu still hadn't managed to develop the ability to supervise care or other residents. Due to health concerns, Dr. Aguolo resigned in January of 2008 and according to the residency program, had she not

resigned, she would have been terminated.

Dr. Saferin continued by stating that in the verification of the postgraduate training on the license application with respect to Akron Children's Hospital, Dr. Aguolo answered "no" to the question regarding unusual circumstances on the FCVS application materials, inquiring whether there had been any limitations or special requirements placed upon her. Akron Children's Hospital response was different, however, than Dr. Aguolo's. They answered yes to that same question and stated that Dr. Aguolo was unable to supervise other residents, as well as medical students during her six months of training and that Dr. Aguolo never served in a supervisory role.

Dr. Saferin continued to note that Dr. Aguolu testified she had never been aware or received formal notice that she had been disciplined or limited during the residency program at Akron Children's, and also stated that she had considered her meetings with Dr. Kempf to be part of the normal residency evaluating process. The records reflect that Dr. Aguolo testified she had supervised and evaluated medical students and that she resigned from the residency program in Akron because of her pregnancy complications, her illness, and because her doctor recommended that she eliminate the stress.

Dr. Saferin finished by stating that in August of 2008 through September of 2009, Dr. Aguolo entered a residency program at Stony Brook in New York, starting as a PGY-2, that she was placed on probation in June of 2009, and was then dismissed from the training program, lacking overall medical knowledge and medical care with indications of frequent medical errors. Despite the warnings and recommendations, Dr. Aguolo continued to fail in meeting the expectations and was dismissed from the program in September of 2009. Dr. Aguolo had not met the requirement for the amount of time as a resident to have a license. Dr. Aguolo is obviously academically very good because she got a Master's in Public Health and she is now working on her Ph.D., Dr. Saferin stated and he indicated that he would support the Proposed Order and moved that the Board deny her application.

Dr. Steinbergh stated that Dr. Saferin outlined the situation and noted that different from what Dr. Aguolo had stated, she was informed that she was not going to be moved into PGY-2 at Akron. After starting at Akron Children's it was noted early that Dr. Aguolo's medical knowledge, communication skills, and patient care were lacking and efforts were made to help her improve, but adequate improvements were never achieved. The fact that Dr. Aguolo was never allowed independence in patient care is the most important information, Dr. Steinbergh stated. The ACGME has core competencies and program directors are responsible to ensure that each resident meets core competencies. When these competencies are not met, they are then obligated to do what they did and therefore, Dr. Aguolo was never allowed independence in patient care. According to the records, Dr. Aguolo continued to require intense supervision by others. In her second program in September 2009, Dr. Aguolo fell asleep during a pediatric transport and provided inconsistent responses as to whether she had fallen asleep or merely had the appearance of being asleep after wrapping herself in a blanket. Soon after that incident, Dr. Aguolo was dismissed.

Dr. Steinbergh continued to say that, although she agreed with the Order, she disagreed with the Findings of Fact and Conclusions of Law because she believed Dr. Aguolo lied on her application. On State's Exhibit 3, the affidavit that was sworn by Dr. Jeffrey Kempf, it is noted that Dr. Aguolo performed well below expectations and didn't successfully complete the program. By September of 2007, Dr. Aguolo was still unqualified to move up because she struggled to follow basic instruction and was unqualified to supervise patient care. By the end of 2007, she still had not managed to develop the ability to supervise care. In the affidavit, Dr. Kempf talks about concerns he received from fellow residents, patients' parents, nursing staff, and emergency room physicians, all of whom were concerned about Dr. Aguolo's inability to practice as a PGY-1. Although Dr. Aguolo denied she was told about some of the instances, it has been indicated that she was provided the letters that were written by these individuals.

Dr. Steinbergh concluded by reading excerpts from the affidavit stating that Dr. Kempf made the recommendations that Dr. Aguolo become acutely aware of interactions with nurses, families and physicians and that she work on her professionalism and communication skills in that regard. The affidavit also states that Dr. Aguolo was instructed to set up neuropsychiatric testing at Akron Children's Hospital, to further evaluate her ability to process information. Dr. Kempf also suggested that the two of them meet again in November and he told Dr. Aguolo that her inappropriate actions would not be tolerated and her professionalism would have to improve for her to remain as a house officer. However, as we now know, Dr. Aguolo decided to resign from the program.

Dr. Steinbergh moved to amend Finding of Fact #3 of the Report and Recommendation to read as follows:

- 3. In question 6 of the UAPL (concerning Postgraduate Training), Dr. Aguolu indicated that she had successfully completed training from July 2007 to December 2007 at Children's Hospital Medical Center of Akron ("Akron Children's") in Akron, Ohio.**

In fact, although Dr. Aguolu had trained from July 2007 through December 2007 at Akron Children's, she did not successfully complete her training at the program. Dr. Aguolu had been unable to supervise patient care or other residents at Akron Children's.

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

- 4. The Akron Children's residency program director characterized Dr. Aguolu's training as a "disaster." Dr. Aguolu had been unqualified to supervise patient care or other residents. There were multiple complaints about her, regarding her professionalism, her performance and patient care, and her interactions with nurses and parents. Further, the evidence establishes that Dr. Aguolu had been advised on multiple dates by her program director that her practice was below the minimal standard of care, and that multiple physicians shared that concern. Accordingly, her testimony that she was unaware that she had been disciplined or limited during**

her residency is not credible.

At the Stony Brook residency, significant problems with Dr. Aguolu were noted early in her training, with regard to her medical knowledge, communication skills, and medical care. Dr. Aguolu had numerous patient care issues at Stony Brook, including one incident in which she had fallen asleep during transport of a neonate intensive care patient. She provided inconsistent responses when confronted about that matter. Further, her patient care skills were so lacking that she was never allowed independence in patient care. Before termination, she was reassigned from the Neonatal Intensive Care Unit to a Research Rotation (non-clinical) because of patient safety concerns, which included sleeping during a patient transport. Moreover, the evidence establishes that Dr. Aguolu had been aware that she had been reassigned pending termination as a result of sleeping during a patient transport, and her statement that she had not been aware that this constituted a practice limitation is simply not credible.

Dr. Steinbergh further moved to amend Conclusions of Law #3 of the Report and Recommendation to read as follows:

3. As set forth in Findings of Fact 3 and 4, the evidence is sufficient to support a conclusion that the acts, conduct, and/or omissions of Dr. Aguolu, individually and/or collectively, constitute “[m]aking a false, fraudulent, deceptive, or misleading statement in the solicitation of or advertising for patients; in relation to the practice of medicine and surgery, osteopathic medicine and surgery, podiatric medicine and surgery, or a limited branch of medicine; or in securing or attempting to secure any certificate to practice or certificate of registration issued by the board,” as that clause is used in R.C. 4731.22(B)(5).

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

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

The motion to amend carried.

Dr. Steinbergh moved to approve and confirm Ms. Clovis' Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Obianuju Genevieve Aguolu, M.D. Dr. Saferin seconded the motion. A vote was taken:

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

The motion to approve carried.

Jerome McTague, M.D., Case No. 12-CRF-148

Dr. Ramprasad directed the Board's attention to the matter of Jerome McTague, M.D., Case No. 12-CRF-148 and stated that no objections have been filed. Ms. Blue was the Hearing Examiner.

Dr. Ramprasad continued in saying that a request to address the Board had been filed timely on behalf of Dr. McTague. Five minutes would be allowed for that address.

Dr. McTague addressed the Board and thanked them for the opportunity to address them. He stated the opportunity on many occasions to read the Hearing Officer's report, and that he was embarrassed and humiliated by his performance, and apologized for it. Dr. McTague said that, looking forward, he had registered for the recommended CME in professionalism and ethics and medical records trainings, and that he looked forward to beginning those the following week. Dr. McTague stated that he is eager to satisfactorily complete all the Board's conditions for reinstatement, and hoped to be on the Board's agenda in April.

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

Ms. Snyder asked the Board to keep in mind as they considered this case that when Dr. McTague performed an aviation medical examination on Patient 1 on May 4, 2007, he was not a family practice physician, an emergency room physician, an ophthalmologist, nor was he a BMV employee. Dr. McTague was an Aviation Medical Examiner whose sole goal that day was to be a gatekeeper - the gatekeeper to ensure the pilot sitting in front of him was medically safe to fly, and Dr. McTague was specially trained to do that. Ms. Snyder continued to say that a huge part of Dr. McTague's responsibilities was visual acuity, as it's important to be able to see to fly an airplane safely. We know for a fact that on that day, May 4, 2007, Ms. Snyder stated, Patient 1 had an actual visual acuity of 20/200. Ms. Snyder stated that we also know that Dr. McTague submitted to the FAA that the patient had a visual acuity of 20/20 and we know that he certified that patient to fly.

Ms. Snyder continued in saying that today, Dr. McTague is repentant and he seemed to understand the error, and his repentance is appreciated. Ms. Snyder said in the hearing, there were other matters discussed, whether Dr. McTague had the obligation to do anything further with this patient, and whether he had a duty to do further screens. Ms. Snyder asked the Board to consider this case and to put themselves in the physician's position. As a physician, you had been trained to hear and see more than what the patient tells you, not to just take a patient at his word, but to do a history and physical on that patient. Ms. Snyder indicated that, as a physician, you would critically analyze all of the information you have and Dr. McTague did not do that.

Ms. Snyder said that when Dr. McTague was confronted nine years in a row by this patient, he knew that the patient was elderly, that in 1998, the patient was in his seventies, and he saw him all through his eighties. Ms. Snyder stated that Dr. McTague knew from the first examination in 1998, that this patient had a visual acuity of 20/100 because he referred him to an ophthalmologist to address that visual acuity, which is a very significant fact. Dr. McTague even had conversations with the ophthalmologist after the fact and over the next two years about the patient's vision and the poor prognosis for that patient. Ms. Snyder stated that Dr. McTague knew or should have known, looking in the patient's eyes, that there was evidence of cataract surgeries and the fact that the patient was putting on his forms that he had not seen any other health care professionals other than routine visits in the past three years. Those are all red flags that Dr. McTague should have noticed. Instead of marking 20/20 on that form that day, Dr. McTague could have done other things, such as used a different chart, asked the patient to read a different line on the Snellen test, or done something different than what he did.

Ms. Snyder closed by saying that even if you believed what Dr. McTague said in the hearing, you're still left with the fact that he certified a legally blind man to fly an airplane. Maybe Dr. McTague missed the red flags or didn't do the examinations. Regardless of the reason, Ms. Snyder believes that Dr. McTague's medical practice was below the standard of care that day. Dr. McTague did not kill the people on that airplane, Ms. Snyder stated, but he was the only person that could have grounded Patient 1 on that day, and the fact that he didn't began this ripple of consequences that could have prevented the accident.

Dr. Steinbergh moved to approve and confirm Ms. Blue's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Jerome A. McTague, M.D. Dr. Sethi seconded the motion.

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

Dr. Steinbergh restated the facts of the case and the fact that Dr. McTague fraudulently completed forms for this individual. She went on to say that one week prior to the airplane accident, the patient had initiated a car accident. This patient had macular degeneration, as well as cataracts, and although experts described the difficulty of predicting the macular degeneration nearly impossible, the cataracts certainly could have been seen through the ophthalmoscope. Dr. Steinbergh stated that the documentation showed on what date Dr. McTague stopped reporting the uncorrected vision to the FAA, but indicated that the patient had 20/20 vision.

Dr. Steinbergh indicated that she believed Dr. McTague falsified the records. She pointed out the fact that the Hearing Examiner indicated the reason for her proposed order was because this case involved just one patient; however, it ultimately resulted in seven deaths. Dr. Steinbergh reviewed the Report and Recommendation which indicated that Dr. McTague had a history of improperly issuing medical certificates to airmen and that he had handwritten instead of properly typing them. The FAA had written to and reversed Dr. McTague's decisions in 2003 and 2007 for two other airmen. Importantly, Dr. Steinbergh noted, in May of 2008, one month prior to the fatal plane crash, the FAA sent a letter to Dr. McTague stated in pertinent part that he was to cease exercising his AME privileges immediately until further notice.

In November the FAA noted that their office spent approximately 200 hours reviewing Dr. McTague's submissions and that 116 cases required further staff action and only 12 cases required no action on their part. The FAA unveiled numerous significant errors such as inappropriately handwritten certificates, hypertension initial and follow-up evaluation requirements, thyroid cancer without any request for information on his part, and comments written by Dr. McTague that were in question. The documents reflect that in light of this information, the FAA stated they would require, for consideration of reinstatement of his AME designation, and that Dr. McTague do the following: successfully attend basic seminar, theme seminar and MCSPT, as well as MAMERC. However, the FAA indicated that this training would not guarantee his reinstatement and in fact, on January 9, 2009, the FAA sent a letter to Dr. McTague terminating his designation as an AME.

Dr. Steinbergh concluded by saying that she felt the proposed order was not strong enough to address the issues in this case.

Dr. Saferin agreed that the terms of the proposed order were not appropriate for this case and that he would recommend permanent revocation of Dr. McTague's license to practice medicine and surgery in the State of Ohio.

Dr. Saferin moved that the Board amend the proposed order to permanent revocation of Dr. McTague's license to practice medicine and surgery in the State of Ohio. Dr. Sethi seconded the motion.

Dr. Ramprasad stated that he would entertain discussion on the above matter.

Mr. Gonidakis and Dr. Soin both interjected and stated that while they felt the acts were egregious and believed there was a pattern of behavior on Dr. McTague's part, they also indicated they would not support permanent revocation, but would entertain an order more stringent than 60 days.

Dr. Ramprasad voiced his concern with the number of Dr. McTague's cases that the FAA found were handled improperly and emphasized the importance of physicians' ethical and entrusted duty. Dr. Ramprasad continued to say that he felt that some type of revocation was acceptable and appropriate.

Dr. Sethi agreed and affirmed that he would support permanent revocation.

As Mr. Giacalone voiced his concerns about the testimony records of Dr. McTague and how he gave excuses regarding the accusations. Mr. Giacalone questioned why it wasn't until the day of the Board meeting that Dr. McTague expressed remorse for his actions.

A vote on Dr. Saferin's motion to amend was taken:

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

The motion to amend failed.

Dr. Steinbergh indicated that she had prepared an amended motion for consideration and moved the proposed order read as follows:

- A. **SUSPENSION OF CERTIFICATE:** The certificate of Jerome A. McTague, M.D., to practice medicine and surgery in the State of Ohio shall be **SUSPENDED** for an indefinite period of time, but not less two years.
- B. **CONDITIONS FOR REINSTATEMENT OR RESTORATION:** The Board shall not consider reinstatement or restoration of Dr. McTague's certificate to practice medicine and surgery until all of the following conditions have been met:
1. **Application for Reinstatement or Restoration:** Dr. McTague shall submit an application for reinstatement or restoration, accompanied by appropriate fees, if any.
 2. **Personal/Professional Ethics Course(s):** At the time he submits his application for reinstatement or restoration, or as otherwise approved by the Board, Dr. McTague shall provide acceptable documentation of successful completion of a course or courses dealing with personal/professional ethics. The exact number of hours and the specific content of the course or courses shall be subject to the prior approval of the Board or its designee. Any course(s) taken in compliance with this provision shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which they are completed.

In addition, at the time Dr. McTague submits the documentation of successful completion of the course(s) dealing with personal/professional ethics, he shall also submit to the Board a written report describing the course(s), setting forth what he learned from the course(s), and identifying with specificity how he will apply what he learned to his practice of medicine in the future.

3. **Medical Records Course(s):** At the time he submits his application for reinstatement of restoration, or as otherwise approved by the Board, Dr. McTague shall provide acceptable documentation of successful completion of a course or courses on maintaining adequate and appropriate medical records. The exact number of hours and the specific content of the course or courses shall be subject to the prior approval of the Board or its designee. Any course(s) taken in compliance with this provision shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which they are completed.

In addition, at the time Dr. McTague submits the documentation of successful completion of the course(s) on maintaining adequate and appropriate medical records, he shall also submit to the Board a written report describing the course(s), setting forth what he learned from the course(s), and identifying with specificity how he will apply what he learned to his practice of medicine in the future.

4. **Additional Evidence of Fitness to Resume Practice:** In the event that Dr. McTague has not been engaged in the active practice of medicine and surgery for a period in excess of two years prior to application for reinstatement or restoration, the Board may exercise its discretion under Section 4731.222, Ohio Revised Code, to require additional evidence of the fitness to resume practice.

C. **PROBATION:** Upon reinstatement or restoration, Dr. McTague's certificate shall be subject to the following PROBATIONARY terms, conditions, and limitations for a period of at least three years:

1. **Obey the Law:** Dr. McTague shall obey all federal, state, and local laws, and all rules governing the practice of medicine and surgery in Ohio.
2. **Declarations of Compliance:** Dr. McTague shall submit quarterly declarations under penalty of Board disciplinary action and/or criminal prosecution, stating whether there had been compliance with all the conditions of this Order. The first quarterly declaration must be received in the Board's offices on or before the first day of the third month following the month in which Dr. McTague's certificate is restored or reinstated. Subsequent quarterly declarations must be received in the Board's offices on or before the first day of every third month.

3. **Personal Appearances:** Dr. McTague shall appear in person for an interview before the full Board or its designated representative during the third month following the month in which Dr. McTague's certificate is restored or reinstated, or as otherwise directed by the Board. Subsequent personal appearances shall occur every six months thereafter, and/or as otherwise directed by the Board. If an appearance is missed or is rescheduled for any reason, ensuing appearances shall be scheduled based on the appearance date as originally scheduled.

4. **Practice Plan and Monitoring Physician:** Within 30 days of the date of Dr. McTague's reinstatement or restoration, or as otherwise determined by the Board, Dr. McTague shall submit to the Board and receive its approval for a plan of practice in Ohio. The practice plan, unless otherwise determined by the Board, shall be limited to a supervised structured environment in which Dr. McTague's activities will be directly supervised and overseen by a monitoring physician approved by the Board. Dr. McTague shall obtain the Board's prior approval for any alteration to the practice plan approved pursuant to this Order.

At the time Dr. McTague submits his practice plan, he shall also submit the name and curriculum vitae of a monitoring physician for prior written approval by the Secretary and Supervising Member of the Board. In approving an individual to serve in this capacity, the Secretary and Supervising Member will give preference to a physician who practices in the same locale as Dr. McTague and who is engaged in the same or similar practice specialty.

The monitoring physician shall monitor Dr. McTague and his medical practice, and shall review Dr. McTague's patient charts. The chart review may be done on a random basis, with the frequency and number of charts reviewed to be determined by the Board.

Further, the monitoring physician shall provide the Board with reports on the monitoring of Dr. McTague and his medical practice, and on the review of Dr. McTague's patient charts. Dr. McTague shall ensure that the reports are forwarded to the Board on a quarterly basis and are received in the Board's offices no later than the due date for Dr. McTague's declarations of compliance.

In the event that the designated monitoring physician becomes unable or unwilling to serve in this capacity, Dr. McTague shall immediately so notify the Board in writing. In addition, Dr. McTague shall make arrangements acceptable to the Board for another monitoring physician within 30 days after the previously designated monitoring physician becomes unable or unwilling to serve, unless otherwise determined by the Board. Dr. McTague shall further ensure that the previously designated

monitoring physician also notified the Board directly of his or her inability to continue to serve and the reasons therefor.

The Board, in its sole discretion, may disapprove any physician proposed to serve as Dr. McTague's monitoring physician, or may withdraw its approval of any physician previously approved to serve as Dr. McTague's monitoring physician, in the event that the Secretary and Supervising Member of the Board determine that any such monitoring physician has demonstrated a lack of cooperation in providing information to the Board or for any other reason.

5. **Tolling of Probationary Period While Out of Compliance:** In the event Dr. McTague is found by the Secretary of the Board to have failed to comply with any provision of this Order, and is so notified of that deficiency in writing, such period(s) of noncompliance will not apply to the reduction of the probationary period under this Order.
6. **Required Reporting of Change of Address:** Dr. McTague shall notify the Board in writing of any change of residence address and/or principal practice address within 30 days of the change.

D. **TERMINATION OF PROBATION:** Upon successful completion of probation, as evidenced by a written release from the Board, Dr. McTague's certificate will be fully restored.

E. **VIOLATION OF THE TERMS OF THIS ORDER:** If Dr. McTague violates the terms of this Order in any respect, the Board, after giving his notice and the opportunity to be heard, may institute whatever disciplinary action it deems appropriate, up to and including the permanent revocation of his certificate.

F. **REQUIRED REPORTING WITHIN 30 DAYS OF THE EFFECTIVE DATE OF THIS ORDER:**

1. **Required Reporting to Employers and Others:** Within 30 days of the effective date of this Order, Dr. McTague shall provide a copy of this Order to all employers or entities with which he is under contract to provide healthcare services (including but not limited to third-party payers), or is receiving training; and the Chief of Staff at each hospital or healthcare center where he has privileges or appointments. Further, Dr. McTague shall promptly provide a copy of this Order to all employers or entities with which he contracts in the future to provide healthcare services (including but not limited to third-party payors), or applies for or receives training, and the Chief of Staff at each hospital or healthcare center where he applies for or obtains privileges or appointments. This requirement shall continue

until Dr. McTague receives from the Board written notification of the successful completion of his probation.

In the event that Dr. McTague provides any healthcare services or healthcare direction or medical oversight to any emergency medical services organization or emergency medical services provider in Ohio, within 30 days of the effective date of this Order, he shall provide a copy of this Order to the Ohio Department of Public Safety, Division of Emergency Medical Services. This requirement shall continue until Dr. McTague receives from the Board written notification of the successful completion of his probation.

2. **Required Reporting to Other State Licensing Authorities:** Within 30 days of the effective date of this Order, Dr. McTague shall provide a copy of this Order to the proper licensing authority of any state or jurisdiction in which he currently holds any professional license, as well as any federal agency or entity, including but not limited to the Drug Enforcement Agency, through which he currently holds any license or certificate. Also, Dr. McTague shall provide a copy of this Order at the time of application to the proper licensing authority of any state or jurisdiction in which he applies for any professional license or reinstatement/restoration of any professional license. This requirement shall continue until Dr. McTague receives from the Board written notification of the successful completion of his probation.
3. **Required Documentation of the Reporting Required by Paragraph F:** Dr. McTague shall provide this Board with one of the following documents as proof of each required notification within 30 days of the date of each such notification: (a) the return receipt of certified mail within 30 days of receiving that return receipt, (b) an acknowledgement of delivery bearing the original ink signature of the person to whom a copy of the Order was hand delivered, (c) the original facsimile-generated report confirming successful transmission of a copy of the Order to the person or entity to whom a copy of the Order was faxed, or (d) an original computer-generated printout of electronic mail communication documenting the e-mail transmission of a copy of the Order to the person or entity to whom a copy of the Order was e-mailed.

EFFECTIVE DATE OF ORDER: This Order shall become effective immediately upon the mailing of the notification of approval by the Board.

Mr. Giacalone seconded the motion. A vote was taken:

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

The motion to amend carried.

Dr. Steinbergh moved to approve and confirm Ms. Blue's Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Jerome A. McTague, M.D. Dr. Soin seconded the motion.

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

The motion to approve carried.

Aaron O. Williams, M.D., Case No. 13-CRF-044

Dr. Ramprasad directed the Board's attention to the matter of Aaron O. Williams, M.D., Case No. 13-CRF-044 and stated that no objections have been filed. Dr. Ramprasad stated that Mr. Porter was the Hearing Examiner.

Dr. Ramprasad continued in saying that a request to address the Board had been filed timely on behalf of Dr. Williams. Five minutes would be allowed for that address.

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

Ms. Collis addressed the Board confirming that she had not filed objections in this case and that she and her client fully supported the recommendation of Mr. Porter in this matter. Ms. Collis voiced her appreciation for Mr. Porter's independent and thorough review of the evidence. She indicated that Dr. Williams' Kentucky case hearing is scheduled for April and that the State of Kentucky made their decision based solely on a

prostate brachytherapy procedure that Dr. Williams performed only in the State of Kentucky and never in Ohio. Ms. Collis indicated that Dr. Williams has had his practice in Ohio since 2006 and he exclusively deals with external-beam radiation treatment. Ms. Collis indicated that the external beam radiation treatment was not questioned by Kentucky.

Ms. Collis requested that the Board either impose the recommendation of the Hearing Examiner, which would specifically limit Dr. Williams' practice to not performing the prostate brachytherapy in Ohio, or the Board take no action at this time. Ms. Collis indicated that should Kentucky take full action against Dr. Williams's license, the Ohio Board would still have a right to take further action.

Dr. Williams addressed the Board and said that he had practiced radiation oncology for nearly 20 years. This case concerns a procedure for treating prostate cancer by the use of ultrasound-guided transperineal prostate brachytherapy. Dr. Williams stated that he learned this procedure from Dr. Peter Grimm, director and founder of the Prostate Cancer Treatment Institute in Seattle, Washington, and creator and inventor of this procedure. Dr. Williams stated that when he worked in Kentucky, this procedure was about three percent of his practice.

Dr. Williams stated that in 2006, he opened the Cancer Center in southern Ohio and for many years worked several days in Kentucky, but never performed prostate brachytherapy in Ohio. In 2012, the Kentucky Board issued a complaint and emergency order which suspended Dr. Williams' Kentucky medical license based on allegations that, in a few instances, he had placed radioactive seeds in incorrect locations and in some instances that the doctor had not notified patients of suboptimal results. Dr. Williams stated that the Kentucky Board based its decision on an alleged expert who had never trained or performed prostate brachytherapy and no evidence was introduced to show that other areas of practice fell below the standard of care. However, the Kentucky Board suspended Dr. Williams' ability to practice in their state based on the assertions of the alleged expert. To date, Dr. Williams stated that he hadn't had a hearing in Kentucky, but said it is important to note that the patients that gave rise to the Kentucky action have been reviewed by an outside consulting firm, ProQura and that the firm arrived at different findings than what the expert in Kentucky proclaimed.

Dr. Williams closed in saying that he participates in weekly peer review with other physicians who review each other's files and that they discuss cases. He also had a sample of his Ohio medical practice records examined by independent radiation oncologists who found no problems with his treatment plans, documentations, or outcomes. Dr. Williams works in an underserved area of Ohio and prior to opening the center, patients traveled one to two hours to Columbus or Cincinnati to get a radiation treatment that takes only 15 minutes. Because no evidence has been introduced to show that his practice of radiation oncology through external beam radiation therapy is compromised, and he had no plans to begin performing prostate brachytherapy in Ohio, Dr. Williams respectfully requested that the Board allow him to continue to practice in Ohio.

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

Ms. Snyder took the floor and addressed the Board and began by explaining that Kentucky has a different process than Ohio. She said that while Dr. Williams stated that he never had a hearing on this matter, that statement was false. When Kentucky orders its emergency order, Ms. Snyder explained, it goes out with a complaint. The Respondent then has the opportunity to request a hearing to challenge the summary suspension - not a full merits hearing, Ms. Collis said, but an abbreviated hearing. In Kentucky, while both parties had expert witnesses and that information was heard, they still upheld the summary suspension and Ms. Collis informed the Board that the case involves 34 patients. Ms. Snyder continued to say that the Board doesn't have patient records, the Kentucky expert testimony, nor have we heard from the victims in this matter. However, when determining how to proceed, Ms. Snyder encouraged the Board not to make any findings on the underlying allegations that Kentucky has made because we don't have adequate and complete information about the case.

Ms. Snyder concluded by stating that she did not agree with the Report and Recommendation in the case, because the concerns aren't just with the certain procedure, but also with Dr. Williams record keeping process and the fact that he failed to inform patients of adverse reactions or that the procedure he performed wasn't successful.

Dr. Steinbergh moved to approve and confirm Mr. Porter's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Aaron O. Williams, M.D. Dr. Saferin seconded the motion.

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

Dr. Soin reviewed the history of the case with the Board. In 1985 Aaron Williams obtained a Doctor of Pharmacy degree from Florida A&M University at Tallahassee and went to medical school at the South Florida College of Medicine in Tampa. Dr. Williams then completed a radiation oncology residency at Wayne State University. According to the records, Dr. Williams testified that Wayne State's radiology oncology residency is one of the third largest in the United States and one of only two centers in the United States that offers neutron therapy. Dr. Williams further testified that he trained with Dr. Jeffrey Forman who is a leading physician in the field of radiation treatment of prostate cancer. Also noted is that in December of 2012, Dr. Williams obtained a Master of Business degree from the University of Tennessee at Knoxville.

Dr. Soin confirmed that this case concerns action taken against Dr. Williams by the Kentucky Board with regard to a procedure for treating prostate cancer called ultrasound-guided transperineal prostate brachytherapy. As opposed to a traditional external beam therapy where a patient is placed on a linear accelerator that directs a beam of energy into the patient, brachytherapy involves the placement of radioactive implants directly into the patient. The records reflect that Dr. Peter Grimm provided testimony on behalf of Dr. Williams and described prostate brachytherapy in a July 12, 2013, letter, where he explained how the seeds are implanted into a patient and the process incurred in placing the seeds. On December 21, 2012, the Kentucky Board issued a Complaint and an

Emergency Order of Suspension, which immediately suspended Dr. Williams' Kentucky medical license based on determinations made by the Board consultant that he engaged in the practice of radiology oncology in a manner that failed to conform to, or departed from, acceptable and prevailing medical practices; that Dr. Williams had failed in some instances to report "medical events" that resulted from his practice; and found that it had probable cause to believe that Dr. Williams continued to practice, constituting a danger to the health, welfare, and safety of patients.

According to the records, Dr. Soin stated, in or around October 2012, the U.S. Nuclear Regulatory Commission (NRC) contacted the Kentucky Radiation Health Branch (RHB) to report an alleged unreported medical event involving brachytherapy in prostate seed implant. According to the RHB, the licensee performed a brachytherapy prostate seed implant on Patient A and later informed that patient the procedure was suboptimal and that he wanted to implant more seeds. The patient sought a second opinion from another physician who administered a CT scan and discovered the seeds had been placed or migrated in the bulb of the penis instead of the prostate. Although the second physician informed the licensee of the misplacement and the need to report the incident as a medical event, Dr. Williams did not report the medical event to the Radiation Safety Officer at the hospital, the RHB, nor to the NRC.

When interviewed by the Kentucky Board's investigator, RHB specialists stated that the implanted radioactive seeds would affect tissues and organs that they were misplaced in when the targeted area was missed, and expressed great concern for the patients, especially when they weren't notified of the medical event. The records show that the Kentucky Board consultant reviewed at least 34 of the licensee's patient charts, and found the licensee engaged in the practice of radiation oncology in a manner that failed to conform to, or departed from, acceptable and prevailing medical practices. Finding of such departures were, "[e]vidence across a broad spectrum of his practice." Specifically, the consultant noted lack of documentation as a common problem in most of the cases reviewed. The Kentucky Board consultant also found that the licensee's practice was "rife with examples of gross incompetence, gross ignorance, gross negligence and malpractice," and "this pattern of behavior has been documented over nearly 10 years without any acknowledgement of existing problems or correction." In addition, the Kentucky Board consultant opined that the licensee's practice constituted a danger to patients and the public. In more than one case, the records indicated that prostate brachytherapy seeds were placed in a location other than the prostate, which may cause damage to nerves or organs, and required a second procedure to treat the prostate. And, moreover, these were constituted as medical events that were unreported according to the Kentucky Board consultant. In one case, the consultant noted lack of receipt of radioactive seeds and disposition of seeds found on the floor and the table.

Dr. Soin continued in saying that following the suspension of his Kentucky medical license, an emergency hearing was held concerning the suspension of Dr. Williams' Kentucky license during which Dr. Peter Grimm, of the Seattle Prostate Institute, testified on his behalf. Dr. Williams testified that prostate brachytherapy constituted about three percent of his practice and noted that this procedure is performed in hospital operating Rooms, not in an office, and it requires a team approach. The records reflect that Dr. Williams testified when the procedure is performed, present in the operating room are Dr.

Williams, the urologist, and the medical physicist and that the radioactive seeds are loaded into a series of needles and the needles are loaded in a pattern based on what the medical physicist has stimulated in the treatment plan. Dr. Williams agreed that it's very important to make certain the seeds are where they're placed and he testified that a CT scan is performed. In Dr. Williams' testimony, he stated that seed migration is not uncommon and is well documented in medical literature. He presented several articles or abstracts of articles that corroborate his testimony.

Dr. Soin began reading the testimony of Dr. Peter Grimm, who confirmed his specialty and location of practice and testified that he and his partner had been among those who had pioneered the procedure. Dr. Grimm indicated that he has several publications, written a textbook and multiple book chapters, and he treats 200 to 250 patients a year. Dr. Grimm testified that he's trained over 6,000 physicians to do the procedure.

According to the records, when asked about the role of the urologist performing prostate brachytherapy, Dr. Grimm stated that typically the urologists use the ultrasound every single day for biopsies of the prostate, so they're usually most familiar with the radiology, ultrasound, and imaging and stated that it is certainly possible for seeds to migrate. Dr. Grimm continued stating that when they first started doing these procedures, the seeds were not connected to one another and because there are a lot of veins around the prostate, by intent they would put seeds around the prostate to make sure they were well covered. But the seeds can migrate, Dr. Grimm stated, and they found that the seeds migrate to the lungs approximately 20 percent of the time. When asked if the seeds present harm to the patient, Dr. Grimm responded that a few seeds outside the gland were not harmful, but did go on to say that if you put a hundred of them outside where they weren't supposed to be, that could potentially harm the patient.

Dr. Grimm's testimony indicated that the concept of a medical event was developed in the context of external beam radiation therapy and refers to an excessive dose of external beam radiation being given to the patient or being delivered to the wrong target. Dr. Grimm offered extensive testimony concerning the concept being applied to prostate brachytherapy. But to summarize, Dr. Grimm testified that he disagrees that a prostate brachytherapy seed found outside the prostate, such as the lung, should be considered a medical event. The records reflect that Dr. Williams had several people testify on his behalf, including a Dan Odero, Uptal Bhanja, and Dr. William Platt, who all offered support of his care.

Dr. Soin moved on to the findings of fact. In the rationale for the Proposed Order, the Kentucky Board suspended Dr. Williams' license. However, in the rationale for the Proposed Order, it says: "...the Kentucky Emergency Order of Suspension may (possibly) have been based on some incorrect information concerning very serious issues," such as misplacement of seeds and failure to perform adequate workup. "With respect to the case of Patient A, who had the seeds that were found in the bulb of the penis, the Kentucky Board found, based upon information provided by the Kentucky RHB, that radioactive seeds 'had been placed in the bulb of the penis instead of the prostate.' This sounds horrific; however, based upon information adduced at the Ohio hearing, it also seems extremely unlikely. It is possible that a seed or seeds may have migrated to the bulb of the penis, but the allegation that the seeds were mistakenly placed in the bulb of the

penis, some distance away from the prostate, seems nearly impossible. There are too many people in the operating room during prostate brachytherapy for such an egregious error of needle placement to have gone unnoticed.

Dr. Soin continued and said that the Kentucky Board also found, based on its consultant's report, that Dr. Williams' records lacked documentation and that he had performed prostate brachytherapy without diagnosis or comprehensive initial workups. Again, based on the information adduced at the Ohio hearing, this seems unlikely. Records indicate that Dr. Williams, as well as Dr. Grimm, testified convincingly concerning the level of pre-planning required for that procedure. It seems more likely that records were missing from the patient files received by the Kentucky Board's consultant. "It is clear (however) from the testimony of Dr. Williams and Dr. Grimm that there is disagreement as to what should constitute a Medical Event. However, that does not give the physician the right to disregard the law, if that, indeed occurred." When they looked at the 15 other medical events that the RHB thought constituted medical events, in each case the licensee signs documents stating, "It is my medical judgment that telling the patient would be harmful," as justification as to why the patients were not informed of the medical event.

Dr. Soin concluded by saying that he felt the Report and Recommendation was reasonable in restricting or limiting Dr. Williams' practice to perform brachytherapy in the State of Ohio. However, after hearing the Assistant Attorney General and her compelling arguments about how all the information may not be represented in this case and there could potentially be a minimal standards case, Dr. Soin welcomed other Board members opinions on this matter.

Dr. Ramprasad stated that his first thought was, he would have to highly consider who to get a second opinion from but that he would probably have selected Dr. Grimm. But, in reviewing the process Dr. Williams uses, he has a urologist, a physicist, he has a team. They had qualifications for people who would do this, but why these patients would benefit from it, those who have a PSA of less than 10, Gleason score of less than 10, they say it's a very early stage, they already identified the people who they would treat. There was volumetric study which was three dimensional and a three-dimensional model was made. They were very methodical and the doctor described how he would do the procedure and had a urologist and a medical physicist in there and they had a follow-up CT. Dr. Ramprasad thought Dr. Grimm's testimony explained why there was seed migration. He was also pleased that the doctor said there were no adverse effects for the patient. Dr. Ramprasad continued in saying that Dr. Williams had a peer review put in the Athens hospital. Dr. Ramprasad also noted that a primary care doctor stated that Dr. Williams had excellent bedside manner and practiced the standards of medical care extremely well in the field. The primary care physician's statement continued to say that he had no complaints about Dr. Williams and could not recall anyone who didn't generally like him as a physician. Dr. Ramprasad concluded by stating that he would support restricting his brachytherapy.

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

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

The motion carried.

The Board took a brief recess at 3:20 p.m. and resumed the meeting at 3:35 p.m.

PROPOSED FINDINGS AND PROPOSED ORDERS

Rafael A. Badri, M.D., Case No. 13-CRF-077

Dr. Ramprasad directed the Board's attention to the matter of Rafael A. Badri, M.D. He advised that the Board issued a Notice of Opportunity for Hearing to Dr. Badri, and documentation of service was received. There was no request for hearing filed, and more than 30 days have elapsed since the mailing of the Notice. This matter was reviewed by Hearing Examiner Blue, who prepared the Proposed Findings and Proposed Order, and the case is now before the Board for final disposition.

Dr. Sethi moved to find that the allegations as set forth in the September 12, 2013 Notice of Opportunity for Hearing in the matter of Dr. Badri have been proven to be true by a preponderance of the evidence and to adopt the Proposed Findings and Proposed Order. Dr. Saferin seconded the motion.

Dr. Saferin reviewed the case history with the Board. In a notice of opportunity for hearing dated September 12, 2013, the State Medical Board of Ohio notified Rafael A. Badri, M.D., that it intended to determine whether to take discipline against his certificate to practice medicine and surgery in Ohio based on alleged violation of the November 2009 Board Order. Dr. Badri requested no hearing and on October 14, 2009, the Board issued an entry of order with an effective date of November 17, 2009, which permanently revoked the certificate of Dr. Badri to practice medicine and surgery in Ohio. This stayed such revocation and suspended his certificate for an indefinite period of time, not less than six months. In November 2009, the Board ordered, it was determined that Dr. Badri inappropriately utilized controlled-substance anorectics for purposes of weight reduction in the treatment of ten patients in violation of RC 4731.22(B)(20) and specified rules in the Ohio Administrative Code. On April 13, 2011, Dr. Badri's request for reinstatement of his certificate to practice medicine and surgery in Ohio was approved by the Board, subject to certain probationary terms, conditions, and limitations in the November 2009 Board Order. To date, Dr. Badri remains subject to those terms.

Dr. Saferin continued to say that Dr. Badri was to submit quarterly declarations under the penalty of the Board's disciplinary action of criminal prosecution stating whether he has been in compliance with the conditions of this order. The first quarterly declaration was received in the Board's office on or before the first day of the third month following the month in which Dr. Badri's certificate is restored or reinstated or otherwise directed by the Board. Subsequent quarterly declarations must be received by the Board's office on or before the first day of every third month. Dr. Badri was required to submit the quarterly declarations on January 1, 2013, April 1, 2013, and July 2013. Dr. Saferin continued in saying that Dr. Badri shall appear in person for an interview before the full Board or its designated representative during the third month following the month in which his certificate was restored or as otherwise directed by the Board. Subsequent personal appearance must occur every six months thereafter and/or otherwise requested by the Board. If an appearance is missed or rescheduled for any reason, ensuing appearances shall be scheduled based on the appearance date as originally scheduled.

The records show that Dr. Badri and Miss Morgan, a friend, advised that Dr. Badri was requesting to appear every six months, and if he was rescheduled to appear in February, he would be required again in July. During the months of January and February, several emails were exchanged between Dr. Badri and Ms. Bickers indicating that he was in Jordan and would be unable to attend the conferences that were scheduled. On February 15th, an e-mail was sent to Ms. Bickers with an attached document stating that Dr. Badri was detained at the airport in Jordan on February 9th. On February 20th, Ms. Bickers sent an e-mail advising him that he would be rescheduled to appear July of 2013. On April 26, 2013, he sent an e-mail to Annette Jones, indicating that the airline reservations during July were very expensive, and he requested his probationary conference be rescheduled for June. Ms. Jones replied in an e-mail of April 29th, stating that his conference would be rescheduled for June 10 or 11, 2013.

Dr. Saferin concluded by saying that on May 14, 2013 and July 17th, letters were sent to Dr. Badri scheduling him to appear for his probationary conference on June 10th and August 13th respectively. Dr. Badri failed to appear for both of the conferences and has provided no explanation for his absences. At no time did the Board excuse Dr. Badri from either of these required appearances. Dr. Badri's acts, conducts, and/or omissions as set forth in the Proposed Findings of 1 through 4 individually and/or collectively consist of a violation of the conditions and limitations placed by the Board upon his certificate to practice as set forth in RC 4731.22(B)(15). Therefore, the evidence established that Dr. Badri is unwilling and unable to comply with the Board's order issued in November of 2009.

Dr. Saferin moved to amend the Proposed Order to a permanent revocation of Dr. Badri's license to practice medicine and surgery in Ohio. Dr. Steinbergh seconded the motion. A vote was taken on Dr. Saferin's motion to amend:

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

The motion to amend carried.

Dr. Steinbergh moved to find that the allegations as set forth in the September 12, 2013 Notice of Opportunity for Hearing in the matter of Dr. Badri have been proven to be true by a preponderance of the evidence and to adopt the Proposed Findings and Proposed Order, as amended. Dr. Saferin seconded the motion. A vote was taken:

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

The motion carried.

Anthony Huebert Little, M.T., Case No. 13-CRF-080

Dr. Ramprasad directed the Board's attention to the matter of Anthony Huebert Little, M.T. He advised that the Board issued a Notice of Opportunity for Hearing to Mr. Little, 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 Shamansky, who prepared Proposed Findings and Proposed Order, and it is now before the Board for final disposition.

Dr. Steinbergh moved to find that the allegations as set forth in the September 12, 2013 Notice of Opportunity for Hearing in the matter of Mr. Little have been proven to be true by a preponderance of the evidence and to adopt the Proposed Findings and Proposed Order. Dr. Sethi seconded the motion.

Mr. Gonidakis stated that this matter came before the Board due to violations of a consent agreement and that pursuant to procedural background, Mr. Little was notified on September 12, 2013, that the Board intended to take disciplinary action against his certificate to practice massage therapy in Ohio. The allegations in the notice were that he violated the terms of his probationary consent agreement dated January 2012 with the Board. On October 2nd, notice was returned after multiple attempts to serve Mr. Little. The Board then sent via regular mail the same notice, but to date the Board has received no type of response from Mr. Little.

Mr. Gonidakis continued in saying that Mr. Little was granted a license to practice massage therapy via a probationary consent agreement in January of 2012. Mr. Little admitted to three criminal convictions; a menacing, assault, and impaired driving. Little stated that he completed an anger management course and an outpatient alcohol evaluation at Glenbeigh. The agreed conditions in this probationary consent agreement include complying with the agreement, obeying all laws, submitting quarterly declarations stating that he was in compliance, ensuring that any employer he would work for had a copy of the consent agreement, and notifying the Board of any changes of employer, as well as appearing before then Board as is customarily the case. Mr. Gonidakis stated that Mr. Little had failed to do all of the above; hence, this matter is before the Board. Mr. Little has been absent from all calls that he is supposed to do and all appearances and he's been unresponsive to the Board staff and had failed to submit updates.

Mr. Gonidakis moved to amend the Proposed Order to a permanent revocation of Mr. Little's license to practice massage therapy in Ohio. Dr. Saferin seconded the motion. A vote was taken on Mr. Gonidakis' motion to amend:

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

The motion to amend carried.

Dr. Steinbergh moved to find that the allegations as set forth in the September 12, 2013 Notice of Opportunity for Hearing in the matter of Mr. Little have been proven to be true by a preponderance of the evidence and to adopt the Proposed Findings and Proposed Order, as amended. Dr. Saferin seconded the motion. A vote was taken:

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

The motion carried.

FINDINGS, ORDERS, AND JOURNAL ENTRIES

Dr. Ramprasad advised that in the following matters, the Board issued Notices of Opportunity for Hearing, and documentation of service was received for each. There were no requests for hearing filed, and more than 30 days have elapsed since the mailing of the Notices. The matters are therefore before the Board for final disposition. Dr. Ramprasad stated that the matter of Dr. Drehmer is non-disciplinary in nature, and therefore all Board members may vote in that matter.

Timothy Joel Drehmer, M.D., Case No. 13-CRF-1157

Dr. Steinbergh moved that the allegations as set forth in the November 21, 2013 Notice in the matter of Dr. Drehmer have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective immediately upon mailing, approving his application for restoration of his license to practice medicine and surgery in Ohio, provided that he takes and passes the Special Purpose Examination (SPEX), the American Board of Medical Specialties Internal Medicine recertification examination, or the American Board of Medical Specialties Internal medicine Rheumatology recertification examination within one year of November 21, 2013. Dr. Saferin seconded the motion.

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

Dr. Soin stated that the State Medical Board proposed to approve Dr. Drehmer's application for restoration of his license to practice medicine and surgery in the State of Ohio, provided that he take and pass the Special Purpose, SPEX, Exam, American Board of Medical Specialties Internal Medicine recertification, or the ABMS rheumatology board certification. According to his resume of activities, Dr. Drehmer had not been actively engaged in the practice of medicine and surgery for more than two years. Section 4731.222 Ohio Revised Code authorizes the Board to require an applicant to pass an oral or written examination or both to determine the applicant's present fitness to resume practice if such applicant has not been engaged in the practice of medicine for two years. Dr. Drehmer had not been engaged in the practice of medicine and surgery in excess of two years.

The Board recessed due to an alarm in the building and returned shortly thereafter.

Dr. Soin concluded his presentation statement by stating that he supported the proposed motion.

A vote was taken:

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

The motion carried.

Dr. Ramprasad stated that the matters of Dr. Karsh and Ms. Lasky are disciplinary in nature. Therefore, the Secretary and Supervising Member may not vote. In these matters, Dr. Strafford served as Secretary and Dr. Bechtel served as Supervising Member.

Richard Bruce Karsh, M.D., Case No. 13-CRF-119

Dr. Ramprasad stated that in the matter of Richard Bruce Karsh, M.D., Case No. 13-CRF-119, the Board must determine whether the allegations as set forth in the December 11, 2013 Notice have been proven to be true by a preponderance of the evidence; what discipline, if any, should be imposed; and the effective date of the Order.

Mr. Giacalone stated that Dr. Richard B. Karsh, M.D., is a licensed physician both in Ohio and Colorado, with his residence listed with the Board as being Colorado Springs, Colorado. Dr. Karsh graduated from Duke University School of Medicine on June 2nd, 1999 [sic]. He was originally licensed to practice medicine on October 10, 1972, and subsequently in Ohio on May 17, 2006.

Mr. Giacalone noted for the Board that Karsh has listed his specialties as being, diagnostic radiology; pediatric radiology; and pediatrics. On or about June 13, 2013, the Colorado Board of Medicine issued a letter of admonition to Dr. Karsh citing him for failing to meet the acceptable standards required of a radiologist when he failed to properly interpret the film studies and recommend further diagnostic testing in conjunction with a patient. Mr. Giacalone continued in saying that specifically, during screening mammograms of one patient in March of 2009 and then in March of 2010, Dr. Karsh failed to recognize that a nodular mass first identified in February of 2008 had, in fact, grown in size in March of 2009; and then even further progressed in March of 2010. Several months later, this patient was diagnosed with breast cancer. In reviewing this

event, the inquiry panel of the Colorado Board of Medicine found that Dr. Karsh's care and treatment of this patient fell below the generally acceptable standards of a radiologist in Colorado.

Mr. Giacalone also stated that subsequently, a second letter of admonition was issued to Dr. Karsh also on June 13, 2013, for another patient, this one being a 13-month old child. Again, the Colorado Board of Medicine cited Dr. Karsh for failing to meet the acceptable standards required of a radiologist when he failed to properly interpret the film studies and recommend further diagnostic testing in conjunction with this patient. In this case, on March 10, 2010, this patient underwent a CT scan on her head which was interpreted by Dr. Karsh. In that case, an abnormal space-occupying lesion lying between the cerebellar hemispheres and cisterna magna was visible, as were scattered patchy areas and scattered punctuate foci of very dense material commonly seen in a medulloblastoma tumor. In reviewing this event, the Inquiry Board of the Colorado Board of Medicine found that Dr. Karsh's care and treatment of this patient fell, again, below generally accepted standards of radiologists when he failed to detect and report evidence suspicious of a tumor and wrongly concluded that no suggestion of increased intracranial pressure was present. Based upon these events, the State Medical Board of Ohio issued a notice of opportunity to Dr. Karsh on or about December 11, 2013. To date, no hearing request has been received from Dr. Karsh, nor has he provided any response or defense to these allegations although he acknowledged receipt of the Board's notice on December 24, 2013, via certified mail.

Mr. Giacalone closed in saying that given that this type of event occurred not once, but twice; the fact that Dr. Karsh has declined to appear before this Board and provide any explanation as to why these events occurred; and that the hardship that most likely befell these two patients due to their inability to get cancer treatment in a timely manner, which depending on their situation may have saved or prolonged their respective lives, Mr. Giacalone proposed the following motion based on the Board's Disciplinary Guidelines, which set forth the discipline associated with failure to perform to the minimum standards of care can range up to and including permanent revocation.

Mr. Giacalone moved that Dr. Karsh's license to practice medicine in the State of Ohio be suspended for a minimum of 30 days from the date of this order; with, Dr. Karsh being placed upon probation for a minimum of three years; and that he further be required to appear before this Board prior to reinstatement of his license so that the Board can judge his fitness to practice medicine in our state. Additionally, Dr. Karsh must appear before the Board to adjudicate whether he is sufficiently rehabilitated. Mr. Gonidakis seconded the motion.

Dr. Ramprasad stated that he would entertain discussion at this time in the above matter.

Dr. Steinbergh stated that she had concern about this case and felt that a revocation should be in order. Since Dr. Karsh had failed to appear for a hearing, even though he was given the opportunity to, there may be additional information that the Board is unaware of, Dr. Steinbergh stated and she continued in saying that an indefinite suspension may be more appropriate. If Dr. Karsh came to Ohio, the Board would require him to go into a practice plan. However, Dr. Steinbergh was considering a

revocation and that the revocation would have an effect in Colorado, as well.

Mr. Giacalone stated that he wished to change his motion to revocation. No Board member objected to the change and therefore, the change was accepted.

Dr. Ramprasad noted that regardless of the Board's action, Dr. Karsh would have to report that he was admonished by the Colorado Board of Medicine for standards of care.

A vote was taken on Mr. Giacalone's motion:

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

The motion carried.

Mr. Gonidakis moved that the revocation will be effective immediately upon mailing. Mr. Kenney seconded the motion. A vote was taken:

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

The motion carried.

Brianna Nicole Lasky, Case No. 13-CRF-120

Dr. Ramprasad stated that in the matter of Brianna Nicole Lasky, Case No. 13-CRF-120, the Board must determine whether the allegations as set forth in the December 11, 2013 Notice have been proven to be true by a preponderance of the evidence; what discipline, if any, should be imposed; and the effective date of the Order.

Mr. Kenney stated that in the case of Brianna Nicole Lasky, M.T., we find she failed to appear to the Board-ordered examination to determine if she is impaired of her ability to practice according to the acceptable and prevailing standards of case [sic] by reasons of mental illness and habitual and excessive use of drugs and alcohol. Furthermore, Ms. Lasky did not respond to the 30-day requirement for a hearing.

Mr. Kenney continued by saying that prior to the examination, it was reported to the Board around July 7, 2009, that Ms. Lasky was arrested and charged with deception to obtain dangerous drugs in violation of Section 2925.22(B) of the Ohio Revised Code, that on or about November 13, 2009 she pled guilty to deception of obtaining dangerous drugs, and she was granted an intervention in lieu of conviction. Ms. Lasky successfully completed treatment and was discharged with a diagnosis of opiate and cannabis dependency. Furthermore, Ms. Lasky was diagnosed with anxiety disorder major depression and bipolar 1 disorder. However, in January of 2011, the criminal case was expunged and on March 21, 2013, Ms. Lasky submitted an application to practice massage therapy. On December 11, 2013, the Board sent a letter placing Ms. Lasky on notice that they intended to consider disciplinary action regarding her application, and it stated that she was entitled to a hearing and that she had 30 days to respond. A signed certified mail receipt was returned showing proper service, however, no hearing request has been received and 30 days have elapsed. Furthermore, Ms. Lasky was directed to submit to examination at Glenbeigh Hospital beginning November 14, 2013 and she did not appear for the examination.

Mr. Kenney closed by saying that based on the above facts and as a matter of law, due to her failure to appear, Ms. Lasky was deemed impaired to practice in accordance with the acceptance and prevailing standards of care, pursuant to Section 4731.22(B)(19) of the Ohio Revised Code. Furthermore, due to Ms. Lasky's failure to appear for an exam, she was deemed impaired in her ability to practice, pursuant to Section 4731.22(B)(26) of the Ohio Revised Code and that she failed to submit a request for a hearing within 30 days of the Board's notification

Dr. Bechtel exited the meeting at this time.

Mr. Kenney moved to deny the application of Brianna Nicole Lasky for license to practice massage therapy in the State of Ohio, effective immediately upon mailing. Dr. Talmage seconded the motion.

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

The motion carried.

CITATIONS, PROPOSED DENIALS, ORDERS OF SUMMARY SUSPENSION AND NOTICES OF IMMEDIATE SUSPENSION

Kevin Scott Balter, M.D. – Citation Letter

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

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

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

The motion carried.

Dr. Bechtel returned to the meeting at this time.

Theodore J. Cole, D.O. – Citation Letter

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

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

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

The motion carried.

Aureet Gill, M.D. - Citation Letter

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

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

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

The motion carried.

Christi Lynn Greene, M.T. – Citation Letter

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

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

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

The motion carried.

Mary E. Mudd, 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. Talmage moved to send a Citation Letter to Dr. Mudd. Dr. Saferin seconded the motion. A vote was taken:

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

The motion carried.

Raphael N. Ngengwe, M.D. – Citation Letter

Dr. Steinbergh moved to send a Citation Letter to Dr. Ngengwe. Dr. Soin seconded the motion. A vote was taken:

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

The motion carried.

Nicholas Lawrence Pesa, M.D. – 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. Steinbergh moved to send the Notice of Summary Suspension and Opportunity for Hearing to Dr. Pesa. Dr. Soin seconded the motion. A vote was taken:

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

The motion carried.

Lisa Ann West, 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. Steinbergh moved to send the Notice of Summary Suspension and Opportunity for Hearing to Dr. West. Dr. Soin seconded the motion. A vote was taken:

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

The motion carried.

RATIFICATION OF SETTLEMENT AGREEMENTS

Cyril Anthony Raben, M.D. – Permanent Surrender of Certificate to Practice Medicine and Surgery

Dr. Steinbergh moved to ratify the Proposed Permanent Surrender of Certificate with Dr. Raben. Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:

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

The motion carried.

Babar A. Qadri, P.A. – Request for Permanent Withdrawal of Application for Physician Assistant Licensure

Dr. Saferin moved to ratify the Request for Permanent Withdrawal of Application for Physician Assistant Licensure with Mr. Qadri, P.A. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

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

The motion carried.

MAW, D.O. – Proposed Consent Agreement

Mr. Wilcox reviewed the history of this case with the Board and discussion followed.

Dr. Ramprasad asked if Dr. W's relapse was considered a second or third relapse and Ms. Marshall responded that it was his second. Dr. Ramprasad questioned why it wasn't considered Dr. W's third relapse and Ms. Marshall explained that sometimes relapses go over a long period of time and that once you start drinking or using drugs again, it usually continues for a while. Ms. Marshall continued in saying that the Board looks at the pattern of conduct and whether or not it's broken by some type of established period of sobriety or treatment.

Mr. Wilcox interjected and said that after the first arrest, Dr. W. would not have had any treatment prior to the second arrest.

Mr. Giacalone voiced concerns stating that Dr. W. had opiate substance abuse issue in April of 1996 and he was reinstated in 1999. Then, Dr. W. relapses in August of 2013, and doesn't tell the Board as he's required to do. Afterwards, the Board found out that he had been arrested twice; in Columbus in August and in Newport, Kentucky in September. Mr. Giacalone continued to say that the materials reviewed stated that Dr. W. was belligerent and caused a public disturbance, public panic and annoyance. Mr. Giacalone proposed that the Board deny the proposal and moving forward, that they have the opportunity to discuss how to handle similar situations in the future.

Mr. Giacalone and Dr. Ramprasad both asked if Dr. W. had gone to rehabilitation.

Dr. Steinbergh indicated that rehabilitation was a condition for reinstatement. She continued to say that Dr. W. will have to go to an approved treatment provider, so he will be assessed again, and undergo, at least, a 28-day inpatient treatment.

Mr. Giacalone read excerpts from the report saying that the police reported that Dr. W. was screaming and yelling, because he felt that he did not receive service at a bar for which he paid. Giacalone continued reading the report which stated that the police attempted to place Dr. W. in a cab, but he started yelling at people going into the bar. Regarding the second situation, the report said that a physician involved in Dr. W.'s treatment encounter told the Board's investigator the he behaved in a belligerent manner and exuded a strong odor of alcohol. Mr. Giacalone feels that Dr. W. should have to appear and let the Board decide whether he should continue to practice, and if so, under what constraints.

Dr. Ramprasad stated that he had similar concerns as Mr. Giacalone and inquired as to what options the Board has if they deny the proposal and asked if Dr. W. would be practicing.

Mr. Wilcox responded that the Board would have to have a hearing and that Dr. W. was summarily suspended.

Mr. Kenney spoke and indicated that he didn't believe the Board should approve the proposal.

Mr. Gonidakis moved to deny the consent agreement. Mr. Giacalone seconded the motion. A vote was taken:

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

Dr. Talmage: - abstain
Mr. Kenney: - aye
Mr. Gonidakis: - aye
Mr. Giacalone: - aye

The motion to deny carried.

Carol G. Ryan, M.D. – Consent Agreement

Dr. Steinbergh moved to approve the consent agreement for Dr. Ryan. Dr. Saferin seconded the motion.

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

Mr. Giacalone voiced concern about the length of timeframes regarding this case.

Ms. Marshall explained that when the Board is looking at prescribing cases, we typically go back to the date of the establishment of the doctor-patient relationship for the earliest patient, so that the Board can encompass their entire record, the entire spectrum of patient care. Ms. Marshall continued by saying that doing it this way gives the Board a sampling of care over time to see whether or not the physician has progressed or changed as the environment and the medical standard has progressed.

Ms. Marshall also indicated that the staff does not make a decision about the settlement agreements, but that was the role of the Secretary and Supervising Member.

Dr. Steinbergh indicated that she supported the concept in this particular case because she felt that the Secretary and Supervising Member made a determination in this case that would result in a stringent and solid consent agreement that would take the doctor out of practice for a significant period of time and puts her into a practice plan with a monitoring physician.

Mr. Giacalone had concerns about whether there was a larger issue with the doctor and discussed options of a three year suspension and probation.

A vote was taken:

ROLL CALL:

Dr. Strafford: - abstain
Dr. Bechtel: - abstain
Dr. Saferin: - aye
Dr. Soin: - aye
Dr. Steinbergh: - aye
Dr. Ramprasad: - aye
Dr. Sethi: - aye
Dr. Talmage: - abstain
Mr. Kenney: - aye
Mr. Gonidakis: - aye
Mr. Giacalone: - nay

The motion carried.

Amanda Elizabeth Allen – Consent Agreement

Dr. Sethi moved to approve the Consent Agreement for Ms. Allen. Dr. Talmage seconded the motion. A vote was taken:

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

The motion carried.

Thomas E. Reilley, D.O. – Consent Agreement

Dr. Steinbergh moved to approve the Consent Agreement for Dr. Reilley. Dr. Talmage seconded the motion. A vote was taken:

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

The motion carried.

Tina Marie Nelson, M.D. – Consent Agreement

Dr. Saferin moved to approve the Consent Agreement for Dr. Nelson. Dr. Soin seconded the motion. A vote was taken:

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

The motion carried.

Dr. Ramprasad presented a plaque to Dr. Steinbergh, recognizing her outstanding service as President of the State Medical Board during 2013.

Dr. Steinbergh thanked the Board and expressed her pleasure to serve Ohioans.

ADMINISTRATIVE REPORT

Staffing Updates

Mr. Haslam addressed the Board and announced that Greg Porter has been named Chief Hearing Examiner. He introduced the following new employees:

- Paula Farrell joined the staff as Executive Assistant to the Director and Program Administrator, and will be liaison for the Board members to work with me and other staff.
- On February 10, Mary Courtney Ore, Deputy Director of Education & Outreach Services.
- Andrew G. Lenobel, Enforcement Attorney, joined the staff in early February. Andy came from the Franklin County Prosecutor's Office, has his Juris Doctorate, a MBA, and also has a great health care background.
- Gregory Tapocsi, Enforcement Attorney, is scheduled to begin working at the agency on February 24. He currently works for the Delaware County Prosecutor's Office.

Mr. Haslam informed the Board that a new table of organization would be provided to them at the March Board meeting.

CME and Renewal Update

Mr. Haslam asked Ms. Rieve to address the Board to recognize two licensure employees.

Ms. Rieve recognized Jewell Bates and Liz Hawk because of their initiative to establish monthly CME & Renewal meetings and for establishing a list of issues to be addressed in an effort to streamline work and improve customer service. The following accomplishments are the result of the monthly meetings that Jewell and Liz organized and lead in an effort to reduce workload and improve customer service.

1. Established a new email account in October 2013 called Med.Renewal so licensees can email the CME and Renewal section to request their online password and ID via email. This allows staff to provide a timely response to licensees. Since January 1, 2014, the CME and Renewal staff has answered 473 emails, which is an average reduction of 22 calls per day.
2. Worked with Joan Wehrle to include CME and renewal information in YOUR REPORT. The CME and renewal staff have contributed helpful information to licensees regarding upcoming renewal deadlines and reminders about keeping their address and contact information up to date. The proposed changes for the new website should further assist in providing these updates and other valuable information to licensees.
3. The staff has updated the initial renewal notice to simplify the instructions for licensees. Since 98% of physician renewals are done online, we wanted to continue to improve this process and make the renewal process clear and customer friendly.

Expenditure Report

Mr. Haslam reviewed the Board's Expenditure Report and indicated that in December 2013, we expended \$625,487, which brings our year-to-date total at a little over 3.7 million. The Board's revenue for that same month was \$756,200, which brings our year-to-date total for this fiscal year at a little over 3.6 million.

Travel Requests

Federation of State Medical Board (FSMB) Annual Meeting

Mr. Haslam indicated that at the January 2014 meeting, it was determined that the following Board members and staff would receive scholarships from the FSMB to attend the FSMB Annual Meeting which will be held Thursday, April 24 to Saturday, April 26, 2014 at the Hyatt Regency Denver Colorado Convention Center in Denver, Colorado.

- Anita M. Steinbergh, DO – Voting Delegate
- Robert Giacalone – Public Member scholarship
- Aaron Haslam – Executive Director scholarship

Mr. Kenney moved that the travel scholarships provided by the FSMB for Dr. Steinbergh, Mr. Giacalone, and Mr. Haslam, to attend the 2014 FSMB annual meeting in Denver, Colorado, will cover travel expenses that are usual, customary and necessary.

Additionally, the amount of reimbursement from the FSMB shall not exceed the lesser of either the amount the agency allows to be reimbursed for travel to the destination or the per diem rate set by the United State general services administration for travel to Denver, Colorado. Any difference between the GSA hotel rate and the conference hotel rate will be reimbursed by the agency.

Mr. Gonidakis seconded the motion. All members voted aye. The motion carried.

Mr. Haslam then indicated that Dr. Talmage planned to attend the FSMB Annual Meeting, as well. Dr. Talmage's service as a member of the FSMB Board of Directors concludes at the end of the annual meeting and the FSMB will reimburse his travel expenses to the annual meeting.

Dr. Sethi moved to approve that Lance A. Talmage, MD, attend the 2014 Annual meeting of the FSMB as his attendance is in connection with and is related to his responsibilities as a member of the State Medical Board of Ohio. Mr. Kenney further moved that the travel reimbursement provided by the FSMB for Dr. Talmage to attend the 2014 annual meeting in Denver, Colorado, will cover travel expenses that are usual, customary and necessary.

Additionally, the amount of reimbursement from the FSMB shall not exceed the lesser of either the amount the agency allows to be reimbursed for travel to the destination or the per diem rate set by the United State general services administration for travel to Denver, Colorado. Any difference between the GSA hotel rate and the conference hotel rate will be reimbursed by the agency.

Dr. Saferin seconded the motion. All members voted aye. The motion carried.

Mr. Haslam further requested that the Medical Board also cover the travel expenses for Board members Dr. Bechtel, Dr. Strafford, and Dr. Sethi and Assistant Executive Director Mike Miller to attend the FSMB Annual Meeting in Denver, Colorado.

Dr. Steinbergh moved to approve the travel of Dr. Bechtel, Dr. Strafford, and Dr. Sethi to attend the 2014 FSMB Annual Meeting in Denver, Colorado, as their attendance is in connection with and is related to their responsibilities as members of the State Medical Board of Ohio and further moved to approve Mike Miller's attendance at the 2014 FSMB Annual Meeting in Denver, Colorado, as his attendance is in connection with and related to his responsibilities as Assistant Executive Director of the State Medical Board of Ohio. Dr. Soin seconded the motion. All members voted aye. The motion carried.

Administrators in Medicine (AIM) New Executive Orientation and Annual Meeting

Mr. Haslam indicated that immediately prior to the FSMB Annual Meeting, on April 22nd and 23rd, AIM is hosting their 2014 Administrators in Medicine New Executive Orientation and Annual Meeting, also in Denver, Colorado. AIM has invited executive directors of state medical boards to attend and that AIM offered scholarships to cover the expenses. Mr. Haslam requested that the Board entertain a motion to approve this travel request.

Dr. Saferin moved to approve Aaron Haslam's attendance at the New Executive Orientation program sponsored by Administrators in Medicine (AIM) on April 22, 2014 and the AIM annual meeting on April 23, 2014 at the Hyatt Regency Denver in Denver, Colorado, as his attendance is in connection with and is related to his responsibilities as Executive Director of the State Medical Board of Ohio.

Additionally, the amount of reimbursement provided by AIM is usual, customary and necessary for his participation in these programs and will not exceed the lesser of either the amount the agency allows to be reimbursed for travel to the destination or the per diem rate set by the United State general services administration for travel to Denver, Colorado. Any difference between the GSA hotel rate and the conference room rate will be reimbursed by the agency. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

Dr. Steinbergh noted that AIM is a group that the Board has always been active in. Dr. Steinbergh indicated that it is a wonderful organization and that former administrators or executive directors had been very visible and active in AIM. Dr. Steinbergh asked Ms. Wehrle to comment on AIM.

Ms. Wehrle stated that for five years, she served on the national AIM board of directors as the Eastern regional representative, as the program committee chair, and bylaws committee chair.

National Rx Drug Abuse Summit

Mr. Haslam stated that the 2014 National Rx Drug Abuse Summit was being held on April 21st through 24th in Atlanta Georgia and he suggested Kim Anderson and Randy Beck attend on behalf of the State Medical Board of Ohio.

Dr. Steinbergh moved to approve the travel for Kim Anderson and Randy Beck to attend the 2014 National Rx Drug Abuse Summit on April 21st – 24th in Atlanta, Georgia. Dr. Saferin seconded the motion. All members voted aye. The motion carried.

National Association of Attorneys General (NAAG), Southern Regional Meeting

Mr. Haslam stated that he had been invited been to speak at the 2014 Southern Region Meeting of the National Association of Attorneys General to be held April 1st and 2nd in

Savannah, Georgia. I will be part of a panel on “Education Initiatives to Curb Prescription Drug Abuse.”

Dr. Saferin moved to approve Aaron Haslam’s participation in the 2014 Southern Regional Meeting of the National Association of Attorneys General in April 1 and 2 in Savannah, Georgia. His participation in the meeting is in connection with and is related to his responsibilities as Executive Director of the State Medical Board of Ohio.

Additionally, the amount of reimbursement provided by the organization will not exceed the lesser of either the amount the agency allows to be reimbursed for travel to the destination or the per diem rate set by the United State general services administration for travel to Savannah, Georgia. Dr. Steinbergh seconded the motion. All members voted aye. The motion carried.

YOUR REPORT UPDATE

Ms. Wehrle noted that she had shared with Dr. Ramprasad, topics to be included in the February issue of the “Your Report,” the Medical Board’s newsletter and that each Board member had received a copy of it. Ms. Wehrle briefly reviewed the topics that will be included.

MISCELLANEOUS

Dr. Ramprasad stated that during his review of office statistics, he noted that the Secretary and Supervising Member had done 1,000 more cases in 2013 compared to 2003 and they had the least carry over number of cases, 1,871, of all the statistics he reviewed. Dr. Ramprasad continued to say that Dr. Strafford and Dr. Bechtel closed a record number of cases, 2,567, of all the statistics he reviewed, as well, and he commended the doctors for their efforts.

Dr. Ramprasad also noted that the total number of complaints that were closed by the Board were 6,571 and that public records requests are being processed within a several days. He also noted that there was a gradual increase in depositions.

Dr. Ramprasad inquired about the e-licensure system and Mr. Miller updated the Board in saying that the project is running well behind schedule and well over the estimated cost. Mr. Miller continued to say that office representatives continue to meet with the Department of Administrative Services (DAS) to get projections on the cost of the system as ongoing. Mr. Miller estimated that the costs will most likely be four to five times higher than what we are currently paying and there are many questions on how the system is going to work for the purposes the Board needs it.

Mr. Haslam added that he and Mr. Miller had met with DAS representatives and the individuals who are running the e-licensure system transition and voiced the concerns of the Board regarding the system and its long-term costs.

Dr. Ramprasad noted that Dr. Talmage wished to comment on the one-day Board meeting.

Dr. Talmage noted that it was 5:20 p.m.

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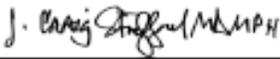
February 12, 2014

Dr. Ramprasad, thereupon at 5:20 p.m. adjourned the February 12, 2014, meeting of the State Medical Board of Ohio.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio meeting on February 12, 2014, as approved on March 12, 2014.



Krishnamurthi Ramprasad, M.D., President



J. Craig Strafford, MD., MP.H., Secretary

