

January 14, 2015

MINUTES**THE STATE MEDICAL BOARD OF OHIO****January 14, 2015**

Donald R. Kenney, Sr., President, called the meeting to order at 9:50 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: Michael L. Gonidakis, Vice-President; Kim G. Rothermel, M.D., Secretary; Bruce R. Saferin, D.P.M., Supervising Member; Anita M. Steinbergh, D.O.; Krishnamurthi Ramprasad, M.D.; Amol Soin, M.D.; Sushil Sethi, M.D.; and Robert P. Giacalone. The following member did not attend the meeting: Andrew P. Schachat, M.D.

Also present were: Anthony J. Groeber, Executive Director; Kimberly Anderson, Assistant Executive Director; Susan Loe, Assistant Executive Director, Human Resources and Fiscal; Michael Miller, Assistant Executive Director for Licensure and Renewal; Sallie J. Debolt, Senior Counsel; David Katko, Assistant Legal Counsel; Joan K. Wehrle, Education and Outreach Program Manager; Jonithon LaCross, Public Policy & Governmental Affairs Program Administrator; Rebecca Marshall, Chief Enforcement Attorney; Marcie Pastrick, Mark Blackmer, Cheryl Pokorny, Angela McNair, Greg Taposci, James Roach, and Kimberly Lee, Enforcement Attorneys; Kyle Wilcox, Melinda Snyder, and James Wakley, Assistant Attorneys General; R. Gregory Porter, Chief Hearing Examiner; Danielle Blue, Hearing Examiner; Gary Holben, Operations Administrator; Danielle Bickers, Compliance Supervisor; Annette Jones and Angela Moore, Compliance Officers; Mitchell Alderson, Chief of Licensure; Christine Schwartz, Legal Services Contractor; Cathy Hacker, P.A. Program Administrator; Judith Rodriguez, Legal Department Secretary; Jacqueline A. Moore, Legal/Public Affairs Assistant; Regina Bouldware, Licensure Assistant; and Benton Taylor, Interim Executive Assistant.

MINUTES REVIEW

Mr. Giacalone moved to approve the draft minutes of the December 10, 2014, Board meeting, as written. Dr. Saferin seconded the motion. A vote was taken:

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

The motion carried.

REPORTS AND RECOMMENDATIONS

Mr. Kenney announced that the Board would now consider the Reports and Recommendations appearing on its agenda.

Mr. Kenney 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: Kevin Scott Balter, M.D.; Allan Belcher, D.O.; Bryan David Borland, D.O.; Matthew Aaron Colflesh, M.D.; Lyndsay Elizabeth Bruner Cook; Kurt William Froehlich, M.D.; Matthew Reid Harris, D.O.; Timothy Michael Hickey, M.D.; Lillian F. Lewis, M.D.; and Joshua Long.

A roll call was taken:

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

Mr. Kenney 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. Rothermel	- aye
	Dr. Saferin	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Mr. Gonidakis	- aye
	Mr. Kenney	- aye
	Dr. Sethi	- aye
	Dr. Soin	- aye
	Mr. Giacalone	- aye

Mr. Kenney noted that, in accordance with the provision in section 4731.22(F)(2), Ohio Revised Code, specifying that no member of the Board who supervises the investigation of a case shall participate in further adjudication of the case, the Secretary and Supervising Member must abstain from further participation in the adjudication of any disciplinary matters. In the matters before the Board today, Dr. Rothermel served as Secretary and Dr. Saferin served as Supervising Member.

Mr. Kenney 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.

KEVIN SCOTT BALTER, M.D.

Mr. Kenney directed the Board's attention to the matter of Kevin Scott Balter, M.D. No objections have been filed. Ms. Clovis was the Hearing Examiner.

Mr. Kenney stated that a request to address the Board has been timely filed on behalf of Dr. Balter. Five minutes will be allowed for that address.

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

Ms. Collis stated that in 2012 Dr. Balter wrote prescriptions in his wife's name to obtain medication which he intended to use to commit suicide. Dr. Balter fortunately did not go through with the attempt. Dr. Balter was convicted of two misdemeanor counts of obtaining possession of a controlled substance by fraud. Based on those convictions, Dr. Balter's Nebraska medical license was placed on a one-year probation, from which he has since been released.

Ms. Collis stated that this is not the standard impairment case that is traditionally seen by the Board, noting that both Dr. Whitney at Shepherd Hill Hospital and Dr. Collins at the Cleveland Clinic determined that Dr. Balter does not meet the criteria for a diagnosis of substance abuse or impairment. Ms. Collis stated that, in fact, Dr. Balter has been evaluated and treated by more than seven mental health professionals, all of whom found that Dr. Balter does not suffer from substance dependency and that he is currently fit to return to the practice of medicine. Ms. Collis supported the Hearing Examiner's Report and Recommendation, which would impose probationary terms and conditions for a minimum of two years.

Dr. Balter stated that the last few years have brought many challenges to his personal and professional life. Dr. Balter explained that in 2009 he started to experience problems with his coworkers. Specifically, Dr. Balter was rigid when dealing with others and he became frustrated and angry when things did not go his way. When Dr. Balter sought counseling, his doctor suspected that he may have mild form of Asperger's syndrome. In 2011, Dr. Balter was shocked when his wife asked for a divorce and filed for a restraining order. Dr. Balter stated that went to his house to collect some clothes and talk to his wife, not realizing that the restraining order prohibited from entering his house.

Dr. Balter continued that he fell into a depression and had suicidal thoughts for first time in his life. Dr. Balter wrote prescriptions in his wife's name on two occasions and intended to commit suicide with the medications. After taking a few of the pills, Dr. Balter reconsidered and did not go through with the attempted suicide. Dr. Balter stated that he self-reported to the Nebraska Board of Medicine and Surgery and entered into a consent agreement which placed his Nebraska medical license on probation for one year and required him to seek mental health counseling. Dr. Balter stated that he completed the terms of his Nebraska consent agreement in 2014.

Dr. Balter stated that he has consistently sought mental health counseling since 2009. Dr. Balter stated that

he has learned coping skills to help him deal with stressful situations. Noting that all of Dr. Balter's psychiatrists and counselors have determined that he is fit to continue practicing medicine as long as he continues with mental health counseling, Dr. Balter urged the Board to approve the Proposed Order.

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

Ms. Snyder agreed with Ms. Collis that this case is different from most other cases the Board sees. Ms. Snyder stated that, based on the fact that Dr. Balter wrote prescriptions in his wife's name to obtain medications for his own use, the Board sent him to an impairment evaluation by Dr. Whitney. While there was no evidence of substance abuse disorder, Dr. Balter was diagnosed with major depressive disorder and generalized anxiety disorder. Ms. Snyder stated that Dr. Balter understands his diagnoses and is currently under treatment by mental health professionals. Ms. Snyder stated that the State supports the Proposed Order.

Dr. Steinbergh moved to approve and confirm Ms. Collis' Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Kevin Scott Balter, M.D. Dr. Ramprasad seconded the motion.

Mr. Kenney stated that he would now entertain discussion in the above matter.

Dr. Soin briefly reviewed Dr. Balter's career, including his having practiced pain management in multiple states since completing his residency in 1990. Dr. Soin noted that Dr. Balter has had several difficult encounters due to anger management issues, which in one instance resulted in his termination from a Salt Lake City, Utah, hospital. In December 2011, Dr. Balter's wife filed for divorce. When Dr. Balter returned to his home to obtain some personal items, he was arrested and convicted of violating a protection order.

Dr. Soin continued that in May 2012, Dr. Balter wrote prescriptions under his wife's name for morphine, Ambien, and promethazine. In September 2012, Dr. Balter wrote a prescription for morphine, again in his wife's name. Dr. Balter testified that he had intended to use the medications to kill himself due to his despondence over his pending divorce.

In June 2013, Dr. Balter began practicing in the Akron, Ohio area. In April 2014, the Medical Board ordered Dr. Balter to an examination at Shepherd Hill Hospital. Richard Whitney, M.D., Medical Director of the addiction program at Shepherd Hill Hospital, testified that Dr. Balter was not diagnosed with substance abuse disorder, but there was evidence of anger management problems and a history of poor frustration and coping skills.

Based on the evidence and testimony, Dr. Soin supported the Proposed Order, which would impose probationary terms and conditions for a minimum of two years. Dr. Soin stated that he agrees with the Report and Recommendation's "Rationale for the Proposed Order," which states, in part, "Dr. Balter seems sincere in his desire to put the difficulty of his divorce behind him and to improve his social skills." Dr. Soin hoped that Dr. Balter has learned from his experiences and opined that a probationary term on Dr. Balter's medical license will adequately protect the public.

Dr. Steinbergh stated that she also agrees with the Proposed Order, but noted that it references a “distressed physician program.” Dr. Steinbergh stated that she has never seen that language in a Board Order and asked for comment on that aspect of the Proposed Order. Mr. Porter replied that a distressed physician program was suggested by one of the experts who testified at Dr. Balter’s hearing. Mr. Giacalone stated that Dr. Whitney noted three such programs which are available for Dr. Balter.

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

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

The motion to approve carried.

ALLAN BELCHER, D.O.

Mr. Kenney directed the Board’s attention to the matter of Allan Belcher, D.O. No objections have been filed. Ms. Shamansky was the Hearing Examiner.

Dr. Steinbergh moved to approve and confirm Ms. Shamansky’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Allan Belcher, D.O. Dr. Ramprasad seconded the motion.

Mr. Kenney stated that he would now entertain discussion in the above matter.

Dr. Steinbergh stated that Dr. Belcher has a history of some spinal surgery when he was a child and he had managed the pain with medications. During Dr. Belcher’s first year of medical school, his primary care physician prescribed tramadol, telling him it was the best non-habit forming medication to use for pain. Dr. Steinbergh stated that, in fact, many orthopedists during that time were using tramadol believing it did not have potential for addiction. Over the years, it has been learned that this is not true. Dr. Belcher ultimately became addicted to tramadol and sought treatment at Glenbeigh Hospital in 2013.

Dr. Steinbergh continued that, according to testimony, Dr. Belcher was an exemplary patient during his first treatment program. Dr. Belcher also participated in random weekly drug screens through the Ohio Physician’s Health Program (OPHP) and had continuously negative screens for nearly one year. On or about August 19, 2014, one of Dr. Belcher’s random drug screens tested positive for very low level of fentanyl. Dr. Belcher has contended that the positive screen was due to an accidental exposure to fentanyl

when, during his practice as an anesthesiology resident, a vial of fentanyl leaked open in his pocket on two occasions, causing him to absorb a small amount of fentanyl through his skin. Nikolai Pidhorodeckyj, M.D., the Medical Director of Glenbeigh Health Services, testified that it is possible that the positive screen could have been the result of accidental exposure.

Dr. Steinbergh's most pressing concern was the significant error Dr. Belcher made by not reporting the alleged accidental exposures when they occurred, especially since Dr. Belcher is an addict. Dr. Steinbergh found it difficult to appreciate that the exposures were accidental since Dr. Belcher did not report them. However, Dr. Steinbergh also noted that Dr. Belcher voluntarily entered into another 28-day inpatient treatment program, which is what would have been required of him had he relapsed. Once again, the record showed that Dr. Belcher was a very good patient and was not bitter about participating in a second treatment program.

Dr. Steinbergh stated that the Hearing Examiner's Proposed Order would grant Dr. Belcher's application for a full medical license, immediately suspend that license for a minimum of 30 days following the date of the suspension of his training certificate on September 10, 2014, and impose requirements for reinstatement. Once his license is reinstated, Dr. Belcher would be subject to probationary terms for a minimum of five years. Dr. Steinbergh supported the Proposed Order.

Dr. Steinbergh stated that it behooves Dr. Belcher to immediately report any accidental exposure to medications. Dr. Steinbergh strongly advised Dr. Belcher to choose another medical field besides anesthesiology so that he is not exposed to such medications. Dr. Ramprasad agreed with Dr. Steinbergh that anesthesiology is a very risky field for Dr. Belcher.

Mr. Giacalone stated that he is not certain if this is a case of inadvertent exposure due to sloppy conduct, or if it was a calculated strategy to paint Dr. Belcher in the best possible light. Mr. Giacalone stated that he would, by default, support the Proposed Order because he cannot determine with certainty if Dr. Belcher's exposure was accidental or purposeful.

Dr. Soin commented that, as an anesthesiologist, he knows the accidental exposures to medications are not uncommon. Dr. Soin stated that in a busy environment, it is very convenient for an anesthesiologist to place a syringe of fentanyl in one's front pocket, and sometimes the physician's movements will cause the plunger to push downward and release some fentanyl. However, Dr. Soin stated that there is a documentation process for such instances. Because of the failure to appropriately document the incident, Dr. Soin opined that Dr. Belcher has been deceptive in this matter.

Dr. Soin was extremely concerned about Dr. Belcher's future as an anesthesiologist and urged him to consider another field of medicine. Dr. Soin stated that, more than any other specialty, being an anesthesiologist provides easy access to medications and puts Dr. Belcher at risk for relapse.

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

ROLL CALL:	Dr. Rothermel	- abstain
	Dr. Saferin	- abstain

Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Mr. Gonidakis	- aye
Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- aye
Mr. Giacalone	- aye

The motion to approve carried.

BRYAN DAVID BORLAND, D.O.

Mr. Kenney directed the Board's attention to the matter of Bryan David Borland, D.O. Objections have been filed and were previously distributed to Board members. Mr. Porter was the Hearing Examiner.

Mr. Kenney stated that he has appointed Dr. Ramprasad to be Acting Secretary for this case. Therefore, Dr. Ramprasad will recuse himself from discussion and voting in this matter.

Mr. Kenney stated that a request to address the Board has been timely filed on behalf of Dr. Borland. Five minutes will be allowed for that address.

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

Ms. Collis briefly clarified that, contrary to a statement in the Report and Recommendation, Dr. Borland holds a full medical license and not a training certificate. Ms. Collis stated that, due to impairment, Dr. Borland sought and completed treatment at Shepherd Hill Hospital, where Dr. Whitney determined that Dr. Borland was fit to return to practice of medicine. Ms. Collis stated that, as noted in Board's rules, the State Medical Board of Ohio follows the disease model that identifies chemical dependency is a disease and that, with appropriate treatment, the physician can safely resume the practice of medicine. Ms. Collis noted Dr. Whitney's testimony that the power that drugs and alcohol have over addicts cannot be overestimated. Ms. Collis also noted Dr. Whitney's testimony that, with appropriate treatment and monitoring, these physicians can safely return to practice.

Ms. Collis stated that this is Dr. Borland's first disciplinary action by the Board. Ms. Collis further stated that Dr. Borland is young and was still in his residency training program when these incidents occurred. Ms. Collis asked the Board to impose a suspension of six to twelve months with conditions for reinstatement and to refrain from adopting the Proposed Order of revocation.

Dr. Borland stated that he is appearing before the Board today because he is addicted to drugs and alcohol. Dr. Borland briefly recounted his history of alcohol use and occasional prescription drug use throughout college and medical school. Dr. Borland stated that he thought he was in control of the situation and he did well in medical school. Dr. Borland entered an emergency medicine residency at Doctors Hospital in July 2011. Dr. Borland stated that, over time, he began to lose focus and become emotional. Dr. Borland stated that he failed to take constructive criticism well from his superiors and he lacked the maturity and coping

skills to deal with failures and setbacks.

Dr. Borland's program director referred him to an assessment, where he was diagnosed with attention deficit hyperactivity disorder (ADHD) and prescribed Adderall. In hindsight, Dr. Borland opined that the ADHD diagnosis was incorrect. The Adderall made it difficult for Dr. Borland to sleep, so he compensated by drinking alcohol to gain sleep. Over next few months, Dr. Boland lost 70 pounds. By 2013, Dr. Borland was taking more than the prescribed dose of Adderall in order to focus at work. Dr. Borland acknowledged that on a few occasions, he took opiates and benzodiazepines from patients in the emergency department. Dr. Borland stated that he is shocked and embarrassed by his conduct.

In February 2014, Dr. Borland was sent by his program director to an evaluation at Shepherd Hill Hospital, where he was diagnosed with alcohol abuse and required to complete 28-days of residential treatment. Dr. Borland admitted that during the assessment, he did not fully disclose that he was also misusing Adderall. Following treatment, Dr. Borland returned to work but continued to misuse Adderall and to take pills from patients.

In July 2014, Dr. Borland was caught taking medications from patients and was terminated from the residency program. Dr. Borland entered into a second treatment at Shepherd Hill Hospital, during which he fully admitted the extent of his addiction. Dr. Borland stated that since that time, he has been fully open and honest with Dr. Whitney, his treatment team, his family, and himself. Dr. Borland stated that he now understands that he cannot outsmart or outwork his addiction on his own, but can only compensate for his disease through appropriate treatment and monitoring.

Dr. Borland stated that he has now completed more than 90 days of residential treatment and he understands what he needs to do to stay clean and sober. Dr. Borland asked the Board to give him a chance to prove his sobriety and allow him a path to return to the practice of medicine in Ohio.

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

Mr. Wilcox stated that this is a serious matter of a physician taking pills from emergency department patients who brought their medications in, and then using those medications while still on duty. Mr. Wilcox stated that it would be appropriate for the Board to revoke Dr. Borland's medical license. However, Mr. Wilcox also noted that Dr. Borland is a very young and, according to the testimony of his program director, talented physician. In light of the Board's roles of both protecting the public and assisting a physician in need of help, Mr. Wilcox suggested that the Board issue an Order of a stayed permanent revocation with a lengthy suspension.

Dr. Steinbergh moved to approve and confirm Mr. Porter's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Bryan David Borland, D.O. Mr. Gonidakis seconded the motion.

Mr. Kenney stated that he would now entertain discussion in the above matter.

Mr. Gonidakis briefly reviewed Dr. Borland's background and career, including that he completed only 34 months of a four-year residency program. Mr. Gonidakis also noted Dr. Borland's testimony regarding his past use of alcohol, marijuana, and Adderall going back to college. Dr. Borland performed very well early in his residency program, but was later sent to a behaviorist and a psychiatrist due to concerns about losing focus. Dr. Borland testified that at that young age he had trouble dealing with criticism and had not been prepared for doctors yelling at him. The psychiatrist diagnosed Dr. Borland with Attention Deficit Hyperactivity Disorder (ADHD) and prescribed Adderall.

Dr. Borland testified that these events, coupled with a bad breakup with his girlfriend, caused Dr. Borland to spend more time alone and his drinking increased. Dr. Borland further testified that by the end of 2013 he was taking significantly more Adderall than had been prescribed to him. Dr. Borland admitted that he stole opiates from patients in the emergency department and sometimes consumed them while still working. Dr. Borland acknowledged that his conduct could have harmed patients.

Mr. Gonidakis continued that Dr. Borland entered into treatment at Shepherd Hill Hospital in February 2014. Dr. Borland admitted that he did not fully disclose the full extent of his substance abuse at that time, and therefore he did not receive proper treatment.

In July 2014, Dr. Borland took Ativan and Xanax from a patient's pill bottles and consumed them at work. Two days later, Dr. Borland took oxycodone tablets from a patient's pill bottle and again consumed them at work. Dr. Borland was observed on the second occasion and he was terminated from his residency program. The following day, Dr. Borland entered into a second treatment program at Shepherd Hill Hospital for 95 days. Dr. Borland testified that he took this second treatment program much more seriously than the first treatment program.

Dr. Whitney opined during his testimony that there should be no concern about Dr. Borland's theft of drugs because all addiction patients lie, steal, and are in denial. Dr. Whitney further testified that Dr. Borland was powerless to resist taking the medications. Dr. Whitney felt that Dr. Borland has a good chance of recovery, though Mr. Gonidakis noted that Dr. Whitney had thought the same following Dr. Borland's first treatment program.

Mr. Gonidakis stated that the Board summarily suspended Dr. Borland's medical license in August 2014. Dr. Borland is currently with the Ohio Physicians Health Program, which reports the Dr. Borland has had no positive drug screens to date.

Mr. Gonidakis questioned whether the Board should accept the Hearing Examiner's Proposed Order of non-permanent revocation or if the Board should consider permanent revocation of Dr. Borland's medical license. Mr. Gonidakis noted that this is not Dr. Borland's first, or even his second, incident with substance abuse. Mr. Gonidakis stated that Dr. Borland will never be in a non-stressful position if he returns to the practice of medicine and wondered about the chances of another relapse if Dr. Borland finds himself in a stressful situation in the future. Mr. Gonidakis opined that Dr. Borland did not voluntarily enter into treatment; rather, Dr. Borland's employer ordered him into his first treatment program and he entered his second treatment program because he had no other choice after his termination. Mr. Gonidakis asked for the input of other Board members regarding permanent revocation.

Dr. Steinbergh stated that she would not favor a permanent revocation of Dr. Borland's license. Dr. Steinbergh also opined that a suspension and monitoring of Dr. Borland would be an unwise use of the Board's resources at this point. Dr. Steinbergh stated that the Hearing Examiner made a clear case for non-permanent revocation, which gives Dr. Borland an opportunity to document his own sobriety before reapplying for a medical license. Dr. Steinbergh felt that the non-permanent revocation sufficiently protected patients in Ohio. Dr. Steinbergh commented that Dr. Borland suffers from a significant case of addiction, as demonstrated by his behavior in taking pills from patients.

Dr. Steinbergh observed that in the "Rationale for the Proposed Order" of the Report and Recommendation, the Hearing Examiner advised that any future application filed by Dr. Borland is unlikely to receive favorable consideration from the Board unless he can document at least one full year of continuous sobriety. Dr. Steinbergh agreed with the Hearing Examiner.

Mr. Giacalone expressed concern about the egregious nature of Dr. Borland's actions in stealing pills from patients and taking them while still working in the emergency department, which could have resulted in harm to patients. Mr. Giacalone stated that life is made up of stresses, whether one is a physician or in another profession, but the stresses are probably exponentially greater for physicians given the life-and-death decisions they make. Given the nature of Dr. Borland's actions and the recurrence of his addiction, Mr. Giacalone questioned whether the revocation of Dr. Borland's license should be permanent. Mr. Giacalone opined that Dr. Borland should wait at least two or three years before applying for a new medical license. Mr. Kenney agreed, noting that some of the professional successes Dr. Borland had during the time he was abusing medications could encourage him to believe that he can continue to do so.

Dr. Steinbergh asked if the wording of the Report and Recommendation's "Rationale for the Proposed Order" could be amended so that Dr. Borland is encouraged to document at least two or three years of continuous sobriety before reapplying for a medical license. Ms. Anderson replied that the Rationale can be amended in that fashion, but noted that such an amendment would carry no force and any application filed by Dr. Borland without two or three years of documented sobriety would have to be brought to the Board for consideration, though the Board could deny the application at that time if it so chooses.

Dr. Steinbergh moved to amend the final sentence of the Report and Recommendation's "Rational for the Proposed Order" to read as follows: "Finally, Dr. Borland is advised that any future application for a training certificate or full medical license is not likely to receive favorable consideration unless Dr. Borland can demonstrate to the Board that he has achieved at least two full years of current, continuous sobriety." Dr. Soin seconded the motion.

Mr. Gonidakis suggested that this matter be tabled so that the amendment can be drafted by the staff and presented to the Board as a written document.

Mr. Gonidakis moved to table the discussion of Dr. Borland. Mr. Giacalone seconded the motion. A vote was taken:

ROLL CALL: Dr. Rothermel - abstain

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

The motion to table carried.

MATTHEW AARON COLFLESH, M.D.

Mr. Kenney directed the Board's attention to the matter of Matthew Aaron Colflesh, M.D. No objections have been filed. Ms. Blue was the Hearing Examiner.

Mr. Kenney stated that a request to address the Board has been timely filed on behalf of Dr. Colflesh. Five minutes will be allowed for that address.

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

Ms. Collis stated that the Hearing Examiner did an excellent job outlining the issues in this case and making an appropriate Proposed Order. Dr. Colflesh was cited by the Board for allegations that he had left pre-signed prescriptions for nurses to use in emergency situations for dying hospice patients. Ms. Collis pointed out that for hospice patients, physicians are permitted to fax in prescriptions to pharmacies, even for narcotic medications. Ms. Collis stated that, while this policy works well for physicians who are contacted in their offices, Dr. Colflesh was often contacted in the middle of the night or other times when he did not have access to a fax machine. At that time, Dr. Colflesh's employer asked him to start signing blank prescriptions with the understanding that the nurses would always call Dr. Colflesh to get express approval before filling out the rest of the prescription.

Ms. Collis stated that there is no indication that any medications were diverted or stolen in this matter, and the blank prescriptions were only used for hospice patients in urgent situations. Ms. Collis stated that this system was set up solely to care for the hospice patients and there was no personal or financial interest gained by Dr. Colflesh. Ms. Collis stated that Dr. Colflesh has never been disciplined by the Board and is a highly respected member of local medical community. Ms. Collis asked the Board to approve the Proposed Order.

Dr. Colflesh stated that in 2011, he was approached by Amedisys Hospice to be the medical director of their St. Clairsville location. Dr. Colflesh accepted the position and started in February 2012. Dr. Colflesh quickly discovered that the volume and geographical range of the hospice patients was much greater than he had been advised. Eventually, the management staff of Amedisys asked Dr. Colflesh to leave a few pre-signed prescriptions for the nurses to use in his physical absence, as previous medical directors had done. Dr. Colflesh stated that, though he was never completely comfortable with the process, he felt that

the checks and balances that were instituted protected from any abuse or diversion, and that this was the best way to care for patients during off-hours. Dr. Colflesh explained that prior to any prescriptions being filled by a nurse, he was contacted for express approval. Dr. Colflesh emphasized that these prescriptions were for patients who were in urgent need of pain medications when in the final stages of their lives. Dr. Colflesh stated that he believed this was the best way to ensure that no patient was denied medications.

Dr. Colflesh stated that he only used pre-signed prescriptions when he was away from his office or when he did not have access to a fax machine. Dr. Colflesh also stated that he never left pre-signed prescriptions in his personal office or any other position he has held, nor has he done so since leaving Amedisys in July 2012. Dr. Colflesh stated that he recently completed an intensive prescribing course at Case Western Reserve University and learned a great deal. Dr. Colflesh asked the Board to adopt the Hearing Examiner's Proposed Order.

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

Mr. Wilcox stated that when Dr. Colflesh had difficulty handling hospice patients over a large, mostly rural area, he went along with a poorly thought-out plan to pre-sign approximately 130 prescriptions in order to give the nurses more flexibility to treat the patients. Mr. Wilcox stated that this was a bad decision that ultimately cost Dr. Colflesh and several other healthcare providers their jobs. Mr. Wilcox stated that, while Dr. Colflesh's actions were ill-advised and unlawful, there is no evidence that anyone was harmed. Mr. Wilcox opined that the Proposed Order of a reprimand and probationary terms is appropriate.

Dr. Steinbergh moved to approve and confirm Ms. Blue's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Matthew Aaron Colflesh, M.D. Mr. Giacalone seconded the motion.

Mr. Kenney stated that he would now entertain discussion in the above matter.

Mr. Giacalone stated that in February 2012, Dr. Colflesh accepted a position as medical director for hospice services at the St. Clairsville, Ohio, office of Trinity Health Systems. In this position, Dr. Colflesh oversaw 23 hospice patients who resided in homes or nursing homes with a 150 to 200 mile radius of St. Clairsville. In April 2012, a manager suggested that Dr. Colflesh start pre-signing blank prescriptions in order to address logistics problems. Apparently, Dr. Colflesh was informed that the company used a similar program in Parkersburg, West Virginia. Based on these representations, Dr. Colflesh admitted that between April and July 2012 he pre-signed about 130 prescriptions for hospice patients. Dr. Colflesh also signed prescription blanks on an as-needed basis, with nurses filling out the rest of the prescription information, including the name and address of the patient, the patient's date of birth, the date of the prescription, and the type and amount of the medication.

Dr. Colflesh testified that safeguards were put in place to prevent misuse of the pre-signed prescriptions, including giving verbal approval to the nurses for each prescription, being notified of any renewals or changes to the prescription, logging the prescriptions with photocopies, and placing the photocopies in a locked box. Dr. Colflesh also testified that no prescription blanks went missing or were misused.

Mr. Giacalone continued that on August 1, 2012, Dr. Colflesh was terminated by his employer for pre-signing prescription blanks. Dr. Colflesh admitted to a Medical Board investigator that he knew pre-signing prescriptions was unlawful and improper, but he had gone along with it because it was the way things were done in the hospice setting, for the convenience of all parties and due to constraints on travel, distance, and time. In his testimony, Dr. Colflesh stated that pre-signing prescription blanks had given him pause, but he felt it was a way to be attentive to patient needs and to demonstrate accountability.

Mr. Giacalone noted that Dr. Colflesh was aware of the Drug Enforcement Administration's (DEA) rule allowing prescriptions for short supplies of controlled substances for hospice patients to be faxed, but he found that this was not always workable because there were times when he did not have access to a fax machine. Mr. Giacalone observed that Dr. Colflesh provided this information to the DEA, but was notified that there would be no action taken by the DEA.

Mr. Giacalone agreed with the Hearing Examiner that Dr. Colflesh made these decisions when faced with an extremely difficult situation of trying to alleviate unmanageable pain that arose during off-hours and weekends in his actively dying patients in rural communities. While these actions were unlawful, Dr. Colflesh and his staff instituted checks and balances to demonstrate accountability. Mr. Giacalone reiterated that there is no evidence that the medications were diverted or retained for self-use. Lastly, Mr. Giacalone noted Dr. Colflesh's unblemished record, coupled with letters of support and testimony by witnesses. Based on the evidence and testimony, Mr. Giacalone agreed with the Report and Recommendation and the Proposed Order.

Dr. Steinbergh agreed with Mr. Giacalone and hoped that Dr. Colflesh will have the opportunity to educate other physicians and healthcare workers about this issue. Dr. Steinbergh opined that it is unlikely that the Board will see Dr. Colflesh again under these circumstances. Dr. Steinbergh suggested amending the Proposed Order to reduce the probationary time from a minimum of two years to a minimum of one year. Dr. Sethi questioned why the probationary time should be reduced in this manner. Dr. Steinbergh opined that one year should be sufficient monitoring for Dr. Colflesh.

Dr. Steinbergh moved to amend the Proposed Order to reduce the probationary time to at least one year, leaving all other stipulations unchanged. Mr. Giacalone seconded the motion.

Mr. Giacalone stated that he supported the proposed amendment because no patients were harmed and Dr. Colflesh had been trying to do right by dying hospice patients, though he went about it in an incorrect manner. Mr. Kenney also agreed that a minimum one-year probation would be appropriate.

ROLL CALL:	Dr. Rothermel	- abstain
	Dr. Saferin	- abstain
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Mr. Gonidakis	- aye
	Mr. Kenney	- aye
	Dr. Sethi	- aye

Dr. Soin - aye
Mr. Giacalone - aye

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 Matthew Aaron Colflesh, M.D. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel	- abstain
Dr. Saferin	- abstain
Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Mr. Gonidakis	- aye
Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- aye
Mr. Giacalone	- aye

The motion to approve carried.

LYNDSAY ELIZABETH BRUNER COOK

Mr. Kenney directed the Board's attention to the matter of Lyndsay Elizabeth Bruner Cook. No objections have been filed. Ms. Shamansky was the Hearing Examiner. Mr. Kenney stated that this matter is non-disciplinary in nature, and therefore all Board members may vote.

Mr. Kenney stated that a request to address the Board has been timely filed on behalf of Ms. Cook. Five minutes will be allowed for that address.

Ms. Cook stated that the information in the hearing record supports her contention that she meets the requirements to hold a massage therapy license in Ohio. Ms. Cook stated that in her seven-and-a-half years of licensure and employment in North Carolina, she completed many courses of continuing education and performed thousands of massages. Ms. Cook stated that she is very passionate about what she does and she takes her career very seriously. Ms. Cook felt that she would be a great asset to the massage therapy community and hoped that the Board would consider her for licensure today.

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

Ms. Snyder stated that under the Board's statute, an applicant can qualify for a massage therapy license by either meeting the academic requirements or by holding a current massage therapy license in another state preceding the Ohio application for at least five years. Ms. Snyder noted that Ms. Cook does not meet the Board's academic requirements. Ms. Snyder emphasized that the Board's staff thoroughly examined Ms.

Cook's application to see if a license could be granted. However, according to the testimony of Kay Rieve, the Board's Administrative Office, Ms. Cook did not meet the academic requirements of either the current requirements or the somewhat less stringent requirements of 2005.

Regarding licensure in another state, Ms. Snyder stated that Ms. Cook held a massage therapy license in North Carolina for about seven years. However, that license lapsed in 2011 and she reinstated it in 2014, when she was applying for an Ohio license. Ms. Snyder stated that the Board's statute states that the out-of-state license must be held preceding to the time of application. The Hearing Examiner found that it does not say "immediately" preceding the time of application; this finding forms the basis of the Proposed Order to grant Ms. Cook's application. Ms. Snyder opined that the Hearing Examiners' interpretation creates a loophole which does not truly exist in rule or statute.

Ms. Snyder opined that it is clear that the language of the statute means immediately prior to applying for Ohio licensure, noting Ms. Rieve's testimony that the Board has historically applied that requirement in that way. Ms. Snyder expressed concern that if the Board now applies this language in the manner suggested by the Hearing Examiner, it will allow for future applicants to claim, for instance, that they qualify for Ohio licensure because they once held a license in another state, even if that license had been inactive for ten years.

Ms. Snyder stated that Ms. Cook may well be qualified to perform massage therapy, but she does not qualify for Ohio licensure.

Dr. Steinbergh moved to approve and confirm Ms. Shamansky's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Lyndsay Elizabeth Bruner Cook. Dr. Sojin seconded the motion.

Mr. Kenney stated that he would now entertain discussion in the above matter.

Mr. Kenney briefly reviewed Ms. Cook's career, including her work as a mental health consultant. Ms. Cook worked as a licensed massage therapist in North Carolina from 2004 to 2011, when she and her family moved back to Ohio due to family needs. In 2014 Ms. Cook decided to return to the practice of massage therapy. Ms. Cook took the Massage and Bodywork Licensing Examination (MBLEx) and passed on her first attempt with a score well above the minimum passing score. Also, Ms. Cook's North Carolina massage therapy license was reinstated on July 20, 2014.

Mr. Kenney stated that Ms. Cook can qualify for an Ohio massage therapy license by holding, for not less than five years preceding her application, a current license, registration, or certificate in good standing in another state for massage therapy. Mr. Kenney agreed with the Hearing Examiner that Ms. Cook meets the requirements of Section 4731.19(A)(3)(c), Ohio Revised Code, to be licensed as a massage therapist in Ohio because she held a current license in North Carolina for not less than five years prior to her Ohio application.

Dr. Ramprasad agreed with Mr. Kenney and opined that Ms. Cook is very qualified based on her history and her performance on the MBLEx. Mr. Giacalone also agreed, stating that Ms. Cook's additional

experience in human services, social work, and mental health counseling is quite impressive. Dr. Saferin and Dr. Steinbergh also agreed with Mr. Kenney.

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

ROLL CALL:	Dr. Rothermel	- aye
	Dr. Saferin	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Mr. Kenney	- aye
	Dr. Sethi	- aye
	Dr. Soin	- aye
	Mr. Giacalone	- aye

The motion to approve carried.

KURT WILLIAM FROEHLICH, M.D.

Mr. Kenney directed the Board's attention to the matter of Kurt William Froehlich, M.D. Objections have been filed to Mr. Porter's Report and Recommendation and were previously distributed to Board members.

Mr. Kenney stated that a request to address the Board has been timely filed on behalf of Dr. Froehlich. Five minutes will be allowed for that address.

Dr. Froehlich was represented by his attorney, James McGovern.

Dr. Froehlich stated that he is before the Board today due to personal mistakes and due to a complaint from a coworker. Regarding the situation with his coworker, Dr. Froehlich stated that he has been very forthcoming and his explanation has been consistent with both the Board and the Hamilton County prosecutor's office. Dr. Froehlich stated that he pleaded No Contest to a misdemeanor charge in this incident because he was advised by his counsel to avoid publicity. This incident resulted in Dr. Froehlich's termination from his employment with TriHealth Physician Practices. Dr. Froehlich opined that he did not receive due process from TriHealth, noting that they only interviewed one of the four coworkers present at that time. Dr. Froehlich also commented that TriHealth was already unhappy with him for corporate reasons.

Dr. Froehlich stated that after his termination, he established a new practice 10 miles away and within the first year almost 2,000 of his patients found him in his new practice, despite being told by TriHealth that there was no forwarding information or that Dr. Froehlich was no longer practicing. Dr. Froehlich stated that none of this excuses his behavior and that being a married man in a room with a coworker is unacceptable.

Dr. Froehlich continued that his inappropriate relationships with two other women are also under consideration today. Dr. Froehlich stated that the courses he has taken at Case Western Reserve University

on physician/patient boundaries and ethics have illustrated the dangers of blurring those boundaries. Dr. Froehlich stated that the courses have changed the way in which he interacts with patients outside the office.

Dr. Froehlich stated that all these events occurred during a very difficult time in his life. Dr. Froehlich stated that his mother-in-law, who was like a mother to him, had recently died in his arms. Dr. Froehlich had also been diagnosed with prostate cancer and had been dealing with erectile dysfunction since that time. Dr. Froehlich stated that the event with the first patient occurred when he was taking a supplement for weight loss which had a side effect of elevating testosterone levels. Dr. Froehlich continued that the second event occurred when he was getting injections of testosterone prescribed by his urologist to counteract the erectile dysfunction. Dr. Froehlich stated that testosterone does not excuse his behavior, but he felt that it clouded his judgment to some extent.

Dr. Froehlich stated that it has taken the last year-and-a-half to strengthen and improve his relationship with his family after explaining these events to them. Dr. Froehlich stated that his family relationships have never been stronger than they currently are, mostly due to the strength of his wife. Dr. Froehlich stated that he is trying to make himself a better person and has been in therapy for 18 months. Dr. Froehlich stated that he is now much more capable of identifying and dealing with stressors in his personal life.

Dr. Froehlich stated that he understands the trust that patients put in their physicians, especially solo practitioners, and he does not take that lightly. Dr. Froehlich stated that being a physician is a calling for him and asked the Board to give him another chance to redeem himself.

Mr. McGovern referenced his written objections and opined that this case is not as clear-cut as the Hearing Examiner portrayed it, particularly in terms of remorse and witness credibility. Mr. McGovern asked the Board, if it imposes a suspension of Dr. Froehlich's license, to consider including a 30-day wind-down period in deference to the nature of his practice.

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

Ms. Snyder noted that during his address to the Board, Dr. Froehlich referred to the women as friends and coworkers. Ms. Snyder stated that after the courses he has taken, Dr. Froehlich should understand that they were not his friends and coworkers; one woman was his subordinate and two were his patients. Ms. Snyder stated that Dr. Froehlich, an obstetrician and gynecologist, has admitted to having sex with two of his patients and sexually assaulting an employee in his office. Ms. Snyder stated that, although Dr. Froehlich would have the Board believe that these women either initiated the contact or they somehow consented to it, a patient can never truly consent to any kind of sexual contact with a physician.

Ms. Snyder continued that this case is worse than most other sexual misconduct cases because Dr. Froehlich used information he gathered in the most intimate examination that a physician perform for a woman. Ms. Snyder stated that she has struggled with describing how it feels for a woman to undress, lie on an examination table, and put her feet in the stirrups. Ms. Snyder stated that there is no more vulnerable

position that a woman can be in, and Dr. Froehlich capitalized on that vulnerability. Ms. Snyder stated that when Patient 1 and Patient 2 went to Dr. Froehlich with sexual arousal issues, he capitalized on those opportunities to initiate a sexual relationship with them. Ms. Snyder stated that the fact that Dr. Froehlich continues to describe these women as friends and co-workers indicates that he does not understand physician/patient boundaries, despite his contentions to the contrary.

Ms. Snyder stated that she will not spend much time covering the different ways in which Dr. Froehlich has changed his story in order to mitigate his behavior. Ms. Snyder stated that Dr. Froehlich set the tone in his medical practice in which he systematically broke down the professional barriers between him and his patients and between him and his employees. Ms. Snyder stated that he broke down those barriers to such an extent and believed that sex was so available to him that he “accidentally” sexually assaulted an employee. Ms. Snyder stated that Dr. Froehlich had thought that the employee wanted to have sex with him because she wore eye makeup to work and made some off-hand comments to a group of people which included him. Ms. Snyder stated that the case of sexual assault is not a matter of he said/she said; rather, it is a case in which she said it was really horrible and he said it was only a little awful. Having watched the victim give testimony, Ms. Snyder agreed with the Hearing Examiner that she was very credible.

Ms. Snyder stated that she supports the Proposed Order of a minimum one-year suspension. However, Ms. Snyder stated that she does not know how any patient can ever go to Dr. Froehlich again and rely on him to touch her in a medically necessary way.

Dr. Steinbergh moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Kurt William Froehlich, M.D. Dr. Ramprasad seconded the motion.

Mr. Kenney stated that he would now entertain discussion in the above matter.

Dr. Ramprasad stated that questions arose regarding Dr. Froehlich when Patient 1, who also worked with Dr. Froehlich about three times per month, purportedly asked Dr. Froehlich to show her the G-spot during a procedure. Dr. Froehlich demonstrated the G-spot to her, though Dr. Ramprasad noted that the G-spot is not scientifically well-accepted. One week later, Dr. Froehlich had a sexual encounter with Patient 1 at the hospital where she worked. Dr. Ramprasad noted that Dr. Froehlich had several excuses for this behavior, including stress from having had surgery for prostate surgery, the death of his mother-in-law, and having been on the hCG diet which supposedly increases testosterone levels.

Dr. Ramprasad continued that Patient 2, who also worked in the hospital, asked Dr. Froehlich questions about fertility, sex drive, sexuality, and the fact that she was not sexually active with her husband. Dr. Froehlich ultimately stimulated Patient 2 outside of her clothes. Dr. Froehlich ended his physician/patient relationship with Patient 1 and Patient 2 in July 2013.

Dr. Ramprasad stated that on October 11, 2012, a complaint was filed in Hamilton County Municipal Court charging Dr. Froehlich with assault, a misdemeanor of the first degree. Dr. Froehlich pleaded no contest and was found guilty. Dr. Froehlich was fined \$250.00 and ordered to non-reporting community control for six months, which included the requirement that he have no contact with the victim. In addition

to the assault, the victim also alleged that Dr. Froehlich walked into the room where she had been using a breast pump; the victim opined that this could not have been an accident, though Dr. Froehlich claims that it was. Also, the victim related an occasion when Dr. Froehlich received a testosterone injection and dropped his pants, though Dr. Froehlich denies this.

Dr. Ramprasad stated that physicians have an innate responsibility to the patient and must follow an unwritten rule to do everything possible for their patients' benefit. Dr. Ramprasad stated that physicians must not take advantage of patients, whether the patients are able to consent or not. Dr. Ramprasad further stated that a physician's staff can get very close to them because they work closely together on a daily basis, but it is the physician's responsibility to have proper boundaries between himself and the staff. Dr. Ramprasad stated that physicians should show common courtesy to their staff, but must not cross the line into a personal relationship.

Dr. Ramprasad stated that he agrees with the Findings of Fact and Conclusions of Law in the Report and Recommendation. Dr. Ramprasad stated that he will go along with the Proposed Order, which will suspended Dr. Froehlich's license for a minimum of one year and impose conditions for reinstatement, including a physician/patient boundaries course. However, Dr. Ramprasad expressed concern, based on what Dr. Froehlich said today, about whether he understands the nature of his actions.

Dr. Steinbergh commented that Mr. Porter did a fine job on the Report and Recommendation and Ms. Snyder made a very appropriate plea before the Board today. Dr. Steinbergh stated that Dr. Froehlich's behavior is absolutely intolerable. Dr. Steinbergh stated that she is weary of hearing excuses regarding the stresses in physicians' lives, noting that each of the Board members experience the same stresses without changing their commitments to patient care or compromising who they are as human beings. Dr. Steinbergh continued that for a gynecologist to behave in this manner is base, crude, and unacceptable. Dr. Steinbergh also admonished Dr. Froehlich for having an inappropriate environment in his office and stated that physicians must set the tone in their workplace. Dr. Steinbergh commented that the Proposed Order is consistent with previous Board orders regarding these behaviors, but the behaviors were so bad in this case that she could consider permanent revocation. Dr. Steinbergh expressed interest on hearing comments from other Board members regarding permanent revocation of Dr. Froehlich's medical license.

Mr. Kenney opined that if the Board adopts the Proposed Order of a minimum one-year suspension of Dr. Froehlich's license, then Dr. Froehlich would be very fortunate. Mr. Kenney stated that he would not oppose revocation of Dr. Froehlich's license and invited further comment from the Board members.

Dr. Sethi stated that this case is the most crude that he has seen in 40 years. Dr. Sethi opined that it is terrible that Dr. Froehlich felt so powerful that he performed stimulation in a hospital call room. Dr. Sethi also criticized Dr. Froehlich for inappropriately giving back massages to members of his office staff. Dr. Sethi opined that this case should serve as an example of the need for boundaries and the fact that physicians cannot take advantage of their patients. Dr. Sethi stated that he would favor permanent revocation.

Dr. Sethi moved to amend the Proposed Order in order to permanently revoke Dr. Froehlich's license to practice medicine and surgery in Ohio. Dr. Steinbergh seconded the motion.

Mr. Kenney stated that he will now entertain discussion of the proposed amendment.

Mr. Giacalone stated that many aspects of this case puzzled him and he struggled to understand the rationale for the actions that took place. Mr. Giacalone opined that Dr. Froehlich's work environment was bizarre and his approach to patients, women, and his environment was troublesome. Mr. Giacalone stated that during his testimony, Dr. Froehlich did not take ownership for his actions; rather, Dr. Froehlich made excuses and tried to rationalize his behavior. Mr. Giacalone stated that he did not see any information that made him comfortable based on a very long and torturous history.

Dr. Ramprasad reiterated Dr. Steinbergh's prior statement regarding physicians using stress as an excuse. Dr. Ramprasad stated that he does not know anyone who does not have problems and stress. Dr. Ramprasad stated that everyone must have a mechanism to deal with stress. Dr. Ramprasad stated that physicians must have certain ethics about them. Dr. Ramprasad found no excuse for Dr. Froehlich's behavior.

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

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

The motion to amend carried.

Dr. Steinbergh moved to approve and confirm Mr. Porter's Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Kurt William Froehlich, M.D. Dr. Sethi seconded the motion. A vote was taken:

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

The motion to approve carried.

MATTHEW REID HARRIS, D.O.

Mr. Kenney directed the Board's attention to the matter of Matthew Reid Harris, D.O. No objections have been filed. Ms. Shamansky was the Hearing Examiner.

Mr. Kenney stated that a request to address the Board has been timely filed on behalf of Dr. Harris. Five minutes will be allowed for that address.

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

Ms. Collis stated that Dr. Harris has been subjected to monitoring by the Board since April 2009, when he was diagnosed with alcohol dependency. Ms. Collis stated that Dr. Harris has been sober since 2009 and he has substantially complied with all monitoring conditions imposed by the Board. Ms. Collis stated that based on her rudimentary calculations, Dr. Harris has called FirstLab over the last five years more than 1,780 times, provided urine samples over 200 times, all of which have been negative, and has attended over 800 Alcoholics Anonymous (AA) meetings.

Ms. Collis stated that the Board has alleged that Dr. Harris failed to call FirstLab on two occasions in 2013 and one occasion in 2014, as well as marking the wrong test panel on one occasion. Ms. Collis recognized that the Board requires strict daily call-ins and monthly testing to ensure that the physician is sober. However, Ms. Collis stated that this is not the only evidence for sobriety. At Dr. Harris' hearing, Ms. Bickers, the Board's Compliance Officer, as well as Dr. Harris' monitoring physician, AA sponsor, and new employer, all testified that they had seen no signs of relapse and that Dr. Harris was sober based on their calculations.

Ms. Collis asked the Board to accept the Hearing Examiner's Proposed Order of reprimand, noting that Mr. Wakley, the Assistant Attorney General, also agreed with that recommendation.

Dr. Harris recounted the difficulties in his life since he self-reported his alcohol dependence to the Board in 2009, including his filing of bankruptcy and being forced to live on public assistance. Dr. Harris stated that he has worked hard on his recovery and he eventually found employment at a place where he can also fulfill his drug screening requirements. Dr. Harris stated that his sobriety is of utmost importance to him. Dr. Harris stated that he has lost everything to his disease and only by staying sober has he been able to return to practice and regain his health.

Dr. Harris stated that he has no memory of missing the call-ins which he has been alleged to have missed. Dr. Harris stated that when he realized he had missed the second call-in, he notified Ms. Bickers and he was required to do additional drug screens, all of which were negative. Dr. Harris noted that in five years of monitoring by the Board, he has never had a positive drug screen. Dr. Harris stated that he understands and appreciates the monitoring he is subjected to by the Board and that it allows him to be healthier and live a sober life. Dr. Harris stated that any mistakes he has made have been the result of simple human error.

Dr. Harris stated that he has been sober since 2009 and he is doing well, having recently recertified with the American Board of Family Medicine. Dr. Harris asked the Board to approve the Proposed Order and allow him to continue to work and to comply with the Board's Order.

Mr. Kenney asked if the Assistant Attorney General would like to respond. Mr. Wakley stated that he would like to respond.

Mr. Wakley stated that he supports the Hearing Examiner's Proposed Order. Mr. Wakley stated that Dr. Harris has been monitored by the Board for an exceptionally long time and, according to Ms. Bickers, has been compliant and respectful. Mr. Wakley opined that Dr. Harris understands the seriousness of the three cases of non-compliance being discussed today. Mr. Wakley opined that anything beyond a reprimand would be counter-productive in this case.

Dr. Steinbergh moved to approve and confirm Ms. Shamansky's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Matthew Reid Harris, D.O. Dr. Ramprasad seconded the motion.

Mr. Kenney stated that he would now entertain discussion in the above matter.

Dr. Sethi stated that Dr. Harris is before the board due to allegations that he violated the terms of his Board Order. Dr. Sethi stated that there is no dispute that Dr. Harris violated his Board Order by failing to call in for a random urine drug screen on three occasions, as well as marking the incorrect test option on one occasion. Dr. Sethi briefly recounted the events that led to Dr. Harris' 2009 Board Order due to alcohol dependence. Dr. Sethi stated that there are a myriad of ways that someone can arrange reminders of important things, including on their cellular phones. Dr. Sethi opined that Dr. Harris should stop making excuses and admit his errors; otherwise he could begin to think the he can excuse himself to drink alcohol again. Dr. Sethi stated that Dr. Harris should accept this and work hard at staying sober.

Dr. Sethi observed that Dr. Harris has already had his term of probation extended by 90 days due to violations of his probationary terms. Dr. Sethi offered an amendment to the Proposed Order that, in addition to a reprimand, clarifies that the Order does not supersede Dr. Harris' 2009 Board Order.

Dr. Sethi moved to amend the Proposed Order to add the stipulation that the Order does not supersede Dr. Harris' 2009 Board Order, that the terms and conditions of the 2009 Board Order remain in effect, and acknowledges that those terms and conditions have been extended by 90 days. Dr. Steinbergh seconded the motion.

Dr. Steinbergh stated that it is obvious that Dr. Harris violated the terms of his Board Order. Dr. Steinbergh stated that by taking this action today, the Board is showing support for Dr. Harris' continued healing. Dr. Steinbergh strongly advised Dr. Harris to not violate his Board Order again under any circumstances.

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

ROLL CALL:

Dr. Rothermel	- abstain
Dr. Saferin	- abstain
Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Mr. Gonidakis	- aye
Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- aye
Mr. Giacalone	- aye

The motion to amend carried.

Dr. Steinbergh moved to approve and confirm Ms. Shamansky's Findings of Fact, Conclusions of Law, and Proposed Order, as amended, in the matter of Matthew Reid Harris, D.O. Mr. Gonidakis seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel	- abstain
Dr. Saferin	- abstain
Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Mr. Gonidakis	- aye
Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- aye
Mr. Giacalone	- aye

The motion to approve carried.

TIMOTHY MICHAEL HICKEY, M.D.

Mr. Kenney directed the Board's attention to the matter of Timothy Michael Hickey, M.D. Objections have been filed and were previously distributed to Board members. Ms. Blue was the Hearing Examiner.

Mr. Kenney stated that a request to address the Board has been timely filed on behalf of Dr. Hickey. Five minutes will be allowed for that address.

Dr. Hickey stated that his practice was not a pill mill and there was no profit motive in his actions. Dr. Hickey noted the Hearing Examiner's statement that Dr. Hickey is not trained in pain management. Dr. Hickey stated that this is true in the strict sense that he has not been trained in pain management as a branch of anesthesiology. However, Dr. Hickey stated that as a neurologist he has been trained in radiculopathy, neuropathy, and the treatment of migraine, and therefore he does manage pain. Dr. Hickey also stated that this is not a case of practice drift in that his practice did not drift toward something that looks like anesthesiological pain management.

Dr. Hickey continued that since medical school he has chosen to specialize in treating migraines, though he did do elective rotations in anesthesiological pain management in residency. Dr. Hickey stated that he has a neurological practice that specializes in migraine and most of his patients have resistant migraine, which to most neurologists is less interesting than epilepsy, multiple sclerosis, or Parkinson's disease. Dr. Hickey stated that he is comfortable with patients with resistant migraine.

Dr. Hickey opined that for his practice, he does not believe there are standards of care because there are not similar physicians in situations similar to his. Dr. Hickey opined that this case is a matter of documentation and protocols. Dr. Hickey stated that his documentation is shorthand to himself in managing his patients and is not geared to being read by an outsider. Dr. Hickey stated that, while his documentation may not have highlighted things as the Ohio Administrative Code describes, the context shows that those things were being attended to. Dr. Hickey referred to these things as technicalities, though he said does not minimize the technicalities. Dr. Hickey noted that physical therapy and Ohio Automated Rx Reporting System (OARRS) reports, though they are the standard of care now, were not the standard of care at the time the records were audited.

Dr. Hickey opined that he does not pose a risk to the citizens of northwest Ohio. Dr. Hickey stated that he is a careful and serious physician. Dr. Hickey stated that he takes on the hardest cases and manages them minutely. Dr. Hickey stated that this process has gone on for nearly a year-and-a-half from the time of his initial notice. Dr. Hickey stated that his practice froze at that time because he thought it was unethical to accept new patients when he did not know his future. Dr. Hickey stated that he has kept his nine employees on payroll hoping to avoid suspension, and that he has not been paid in a year. Dr. Hickey stated that his reputation has been hit and it will take a lot of work to rebuild it.

Dr. Hickey stated that he has abided by all of the Board's recommendations and corrected every deficiency. Dr. Hickey asked that he not lose his license and that the Board take account of "time served" and issue a reprimand.

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

Mr. Wilcox stated that the Hearing Examine has produced a very thorough Report and Recommendation. Mr. Wilcox also stated that the State's witness, Ann Tuttle, M.D., is extremely knowledgeable.

Mr. Wilcox stated that no matter how Dr. Hickey defines his practice, the bottom line is that the 12 patients considered here were being treated for long-term pain conditions. Mr. Wilcox stated that the Board has specific rules that physicians must adhere to when treating pain patients. Mr. Wilcox stated that having challenging patients does not excuse a physician from following the Board's rules or the standards of care. As noted by Dr. Tuttle, there were many red flags that Dr. Hickey did not react to appropriately or did not document. Although Dr. Hickey contends that much of this comes down to a matter of documentation, Mr. Wilcox stated that documentation is a very important aspect of medical practice. Mr. Wilcox stated that if patients are difficult, then they deserve additional scrutiny as well as additional testing.

Mr. Wilcox believed that the hearing record shows that Dr. Hickey fell short in many aspects of pain management. One aspect that Dr. Tuttle emphasized in her opinion was that there was no documented analysis of how Dr. Hickey's patients were doing. Mr. Wilcox stated that such documentation is crucial to long-term prescribing of opioid medications. Mr. Wilcox also observed that in many cases Dr. Hickey did not make psychiatric referrals. As noted by Dr. Tuttle, depression is a very important co-morbid factor for many of these patients.

Mr. Wilcox opined that the Hearing Examiner has proposed an appropriate Order, including a requirement that Dr. Hickey participate in the Post Licensure Assessment System (PLAS).

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

Mr. Kenney stated that he would now entertain discussion in the above matter.

Dr. Steinbergh stated that Dr. Hickey has been a solo practitioner in neurology since July 2005. Dr. Steinbergh opined that the Board has legitimate and significant concerns about Dr. Hickey's practice. Dr. Steinbergh noted that she agrees with the Findings of Fact and the Conclusions of Law in the Report and Recommendation. Dr. Steinbergh also noted the Hearing Examiner's findings that Dr. Hickey's practice was not a pill mill and that his practice has improved since the investigation. Dr. Hickey has also completed courses in medical record-keeping, prescription drug abuse, and controlled substance prescribing.

Dr. Steinbergh acknowledged that Dr. Hickey has a difficult patient population, but stated that difficult patients require extra time and effort. Dr. Steinbergh also stated that she is always concerned when a physician sets himself above the rest of the community and feels that the rules do not apply to him. Dr. Steinbergh stated that there are standards of care that all physicians must comply with, regardless of their patient populations and the difficulties of their treatment.

Dr. Steinbergh stated that she supports the Proposed Order, especially the requirement that Dr. Hickey participate in the PLAS program. Dr. Steinbergh stated that in PLAS, Dr. Hickey will have an opportunity to have his practice thoroughly examined and his deficiencies addressed. PLAS will make a recommendation, and Dr. Hickey must document his compliance with that recommendation when he applies for reinstatement of his license. Upon reinstatement, Dr. Hickey's license will be subject to probationary terms for a minimum of three years, including a requirement for a practice plan and a monitoring physician.

Dr. Soin noted the Hearing Examiner's finding that Dr. Hickey was not operating a pill mill. Dr. Soin stated that this is true in the classic sense that Dr. Hickey was not simply prescribing drugs for cash. However, Dr. Soin found Dr. Hickey's behavior to be egregious and the type of medicine he practiced to be pathetic in regards to what was done for his patients. Although Dr. Hickey contends that he was just trying to help his patients, Dr. Soin failed to see how an objective physician could say the Dr. Hickey was helpful to his patients.

Dr. Soin reviewed Patient 1, who received 360 pills of Percocet within a 13-day period, which amounts to 27.7 pills per day or 9,000 mg of acetaminophen, which is 200% over the toxic limit. Although the patient can make excuses like losing prescriptions, Dr. Soin stated that the bottom line is that Dr. Hickey was potentially putting that much prescription drug into society or for the patient to abuse.

Dr. Soin also reviewed patient 9, who had three urine drug screens that were positive for marijuana during a time when she was being prescribed high-dose opioids. There was no documented discussion with Patient 9 about the dangers of using a depressant like marijuana with high-dose opioids. Dr. Soin failed to understand why Dr. Hickey was doing urine drug screens if he did not act upon them. Dr. Soin noted that Patient 5 also has positive urine drug screens for marijuana, had lost prescriptions, had requested early refills, and received prescriptions from multiple providers.

Dr. Soin opined that a suspension of at least six months is appropriate in this case. Dr. Soin was pleased that Dr. Hickey is making positive steps forward, but reiterated that this type of practice is not acceptable. Dr. Soin stated that one of the most dangerous aspects about pain management is the possibility of enabling core behavior, which Dr. Soin believes occurred in this case. Dr. Soin opined that practices such as Dr. Hickey's, which ignored positive drug screens and other red flags, harms society and is a significant cause of the high number of overdose deaths in Ohio.

Mr. Giacalone found several aspects of this case puzzling, including sending patients home with injectable opiates, prescribing three controlled substances to a 17 year old patient, and ignoring or discounting many red flags. Mr. Giacalone agreed that Dr. Hickey's practice was not a classic for-profit pill mill and he applauded Dr. Hickey for taking on difficult patients, but stated that Dr. Hickey's processes were harming his patients rather than helping them.

Dr. Sethi commented that if Dr. Hickey was dealing with difficult patients, then he should have obtained consultations from other specialists. Dr. Sethi opined that these actions show that Dr. Hickey lacks a regard for authority and for following the proper protocols.

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

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

The motion to approve carried.

The Board recessed at 12:45 p.m. and returned at 1:25 p.m.

BRYAN DAVID BORLAND, D.O.

Dr. Steinbergh stated that a written version of her motion to amend, which was seconded by Dr. Soin, has been drafted and distributed to the Board members. As noted in the proposed amendment, the amended final sentence of the “Rationale for the Proposed Order” reads as follows: “Finally, Dr. Borland is advised that any future application for a training certificate or full medical license is not likely to receive favorable consideration unless Dr. Borland can demonstrate to the Board that he has achieved at least two full years of current, continuous sobriety.”

A vote was taken on Dr. Steinbergh’s motion to amend:

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

The motion to amend carried.

Dr. Steinbergh moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law, Proposed Order, and Rationale for the Proposed Order, as amended, in the matter of Kevin Scott Balter, M.D. Mr. Gonidakis seconded the motion. A vote was taken:

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

The motion to approve carried.

LILLIAN F. LEWIS, M.D.

Mr. Kenney directed the Board’s attention to the matter of Lillian F. Lewis, M.D. Objections have been filed and were previously distributed to Board members. Ms. Blue was the Hearing Examiner.

Mr. Kenney stated that a request to address the Board has been timely filed on behalf of Dr. Lewis. Five minutes will be allowed for that address.

Dr. Lewis thanked the Board for everything it has done to aid in her sobriety. Dr. Lewis stated that her life has improved immensely since receiving treatment last year and, by fully engaging in Alcoholics Anonymous (AA), she has gained insight into her disease. Dr. Lewis stated that she has maintained continuous sobriety and followed all the terms of her Step I Consent Agreement since leaving treatment in August 2014. Though Dr. Lewis has been out of her residency program since April 2014, she has maintained close contact with her program directors, who have been very supportive of her. Dr. Lewis stated that Sue Poynter, M.D., co-director of her residency program, and Elizabeth Wassenaar, M.D., her treating psychiatrist, have written letters of support. Dr. Lewis quoted from Dr. Wassenaar's letter: "Dr. Lewis has handled multiple difficult situations in a way that demonstrates her commitment to ongoing sobriety as well as her ability to handle the stresses associated with the return to practice." Dr. Lewis stated that no one with the disease of alcoholism is ever truly out of the woods, and therefore it is imperative for her to work a strong recovery program on a daily basis.

Dr. Lewis asked the Board for the opportunity to return to her supportive residency program and remain under the terms of her current Consent Agreement so that she may be of service to patients and others around her.

Mr. Kenney asked if the Assistant Attorney General would like to respond. Mr. Wakley stated that he would like to respond.

Mr. Wakley stated that Dr. Lewis has overcome great adversity in her life, including having been the child of a homeless, mentally ill woman. Despite this, Dr. Lewis managed to succeed and to attend medical school at an Ivy League institution. However, Mr. Wakley stated that Dr. Lewis has a very serious substance abuse problem which began with alcohol and progressed to cough syrup and cocaine. Mr. Wakley supported the Proposed Order of non-permanent revocation and opined that Dr. Lewis could not comply with the terms of a suspension and Board supervision. Mr. Wakley further commented that Dr. Lewis is also financially unable to comply with the monitoring terms that the Board would impose with such a suspension. Mr. Wakley also opined that a permanent revocation would not be appropriate since there were no patient care issues involved in this case and there is no obvious danger to the public. Mr. Wakley agreed with the Hearing Examiner that Dr. Lewis should not reapply for her medical license until she has documented at least one year of continuous sobriety. Mr. Wakley stated that Dr. Lewis is very intelligent and should be able to return and become a productive member of the medical community.

Dr. Steinbergh moved to approve and confirm Ms. Blue's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Lillian F. Lewis, M.D. Mr. Gonidakis seconded the motion.

Mr. Kenney stated that he would now entertain discussion in the above matter.

Dr. Soin stated that in July 2014, Dr. Lewis suffered a setback on her road to recovery when she had a second relapse on cough syrup, alcohol, and cocaine. Dr. Soin reviewed Dr. Lewis' background, including

the fact that she was in a very unstable home environment by a mother who was an untreated paranoid schizophrenic. After receiving her medical degree from the Weill Cornell Medical College in 2013, Dr. Lewis entered into a pediatric residency program. In May 2014 Dr. Lewis entered into a Step I Consent Agreement with the Board based, in part, on her extensive history of depression and alcohol dependence, for which she had completed treatment, and for her subsequent relapse on alcohol, marijuana, cocaine, and Percocet.

Dr. Soin briefly reviewed Dr. Lewis' history of substance abuse. Dr. Lewis had testified that she first became aware that she had drinking problem in medical school. At that time, on the advice of her therapist, she began attending Alcoholics Anonymous meetings one to two times per week. Dr. Soin also noted Dr. Lewis' struggles with depression, including by hospitalized for depression and suicidal ideation while in college.

Dr. Soin continued that following a March 2014 relapse, Dr. Lewis entered into inpatient treatment at the Lindner Center and later at the Farley Center. In July 2014, Dr. Lewis relapsed again on cough syrup. After notifying her therapist of her relapse and learning that she would have to return to inpatient treatment, Dr. Lewis relapsed further on alcohol and cocaine.

Dr. Soin agreed with Mr. Wakley that Dr. Lewis has overcome tremendous challenges and supported the Proposed Order of revocation of Dr. Lewis' Ohio medical license. Dr. Soin appreciated that Dr. Lewis has taken ownership of her problem and he hoped that Dr. Lewis will eventually return to the practice of medicine.

Dr. Steinbergh agreed with Dr. Soin's assessment and stated that Dr. Lewis has violated the terms of her Consent Agreement. Regarding the Hearing Examiner's statement in the "Discussion of Proposed Order" portion of the Report and Recommendation suggesting that Dr. Lewis document one continuous year of sobriety before reapplying for a medical license, Dr. Steinbergh noted that according to the record, Dr. Lewis has been sober since July 8, 2014. Dr. Steinbergh asked if that portion of the Report and Recommendation could be amended so that July 8, 2014, would be considered the starting point for the suggested year of documented sobriety. Ms. Anderson responded that the Board could pass such an amendment, but noted that the order of revocation has no conditions and that Dr. Lewis' reapplication will be brought to the Board for consideration regardless of when she reapplies. Mr. Giacalone opposed amending the "Discussion of the Proposed Order" to reference the date of July 8, 2014. Mr. Giacalone stated that this is not the first time Dr. Lewis as relapsed and opined that giving Dr. Lewis credit for time since July 2014 would not help her.

Mr. Gonidakis noted that in his address to the Board, Mr. Wakley stated that Dr. Lewis would not be able to comply with the monitoring terms that would accompany a suspension due to financial reasons. Mr. Gonidakis did not recall the Board ever making decisions based on a respondent's socioeconomic status. Mr. Gonidakis opined that a respondent's finances should have no bearing on the Board's final decisions. Ms. Anderson stated that all options are available for the Board's consideration, including a suspension.

The Board engaged in a brief discussion of how a respondent can properly document sobriety following revocation since there are no monitoring terms which specify how often drug screens must be performed,

as well as other considerations. Dr. Steinbergh stated that Dr. Lewis has listened to the Board's discussion and that Dr. Lewis understands what she needs to do. Mr. Kenney agreed.

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

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

The motion to approve carried.

JOSHUA LONG

Mr. Kenney directed the Board's attention to the matter of Joshua Long. Objections have been filed and were previously distributed to Board members. Ms. Blue was the Hearing Examiner.

Mr. Kenney stated that a request to address the Board has been timely filed on behalf of Mr. Long. Five minutes will be allowed for that address.

Mr. Long noted that he intends to move out of Ohio to work on a cruise line and he had attempted to withdraw his application for an Ohio massage therapy license. However, he learned that if he withdrew he would have to sign an agreement that would bar him from applying for an Ohio license in the future. Therefore, Mr. Long continued with the application process.

Mr. Long stated that he has been completely cooperative with the Board's investigation. At the Board's order, Mr. Long submitted to a chemical dependency assessment, performed by Nykolai Pidhorodeckyj, M.D. Mr. Long stated that, as Dr. Pidhorodeckyj confirmed in a letter to the Board, the seal on one of his specimens broke in transit to the laboratory and it was rejected for testing. Mr. Long continued that Dr. Pidhorodeckyj had told him that, although his rapid toxicology screen was positive for cannabis, it could still come back from the laboratory as so minimal that it would be a negative result. The broken seal, however, prevented further testing. Mr. Long opined that if the specimen had been tested as negative, he would not have been diagnosed with moderate cannabis use disorder.

Mr. Long opined that since his specimen had a broken seal and could not be tested, he should be given the chance to have a proper test. Mr. Long asked the Board to grant his application for licensure. Alternatively, Mr. Long asked the Board for an opportunity to go through another evaluation so that he can have a fair assessment. Mr. Long acknowledged that he has made mistakes in his life like any young person. Mr. Long noted that a drug screen that he had to submit to obtain his merchant mariner credential,

which has been offered into evidence, was negative.

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

Ms. Snyder stated that the Board sent Mr. Long to an outpatient evaluation and he was assessed at Glenbeigh Hospital by Dr. Pidhorodeckyj. The Board's order was based on the fact that on his application, Mr. Long disclosed that he was convicted of Operating a Vehicle while Impaired (OVI) in 2011 and was charged with Possession of Drug Paraphernalia in 2012; in the latter incident, Mr. Long pleaded guilty to and was found guilty of Disorderly Conduct.

Following the assessment, Dr. Pidhorodeckyj diagnosed Mr. Long with cannabis use disorder and found him impaired in his ability to practice massage therapy without further outpatient treatment. Mr. Long has questioned Dr. Pidhorodeckyj's opinion because the seal on Mr. Long's urine screen was broken and therefore did not undergo further testing. Dr. Pidhorodeckyj acknowledged that the seal on Mr. Long's urine screen had broken, but he also stated, "However, Mr. Long and collaterals did not deny his history of marijuana use." Ms. Snyder stated that Dr. Pidhorodeckyj's opinion apparently would not have changed because he had the collaterals.

Ms. Snyder stated that Mr. Long has been extremely forthcoming and candid throughout this process, but he has also acknowledged some marijuana use. Ms. Snyder supported the Proposed Order to deny Mr. Long's massage therapy license application.

Dr. Steinbergh moved to approve and confirm Ms. Blue's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Joshua Long. Dr. Soin seconded the motion.

Mr. Kenney stated that he would now entertain discussion in the above matter.

Mr. Giacalone stated that Mr. Long graduated from Heritage College in January 2013 with a degree in therapeutic massage. Mr. Long passed the Massage and Bodywork Licensing Examination (MBLEx) and was licensed to practice massage therapy in Florida in June or July of 2013. Mr. Long's application for an Ohio massage therapy license remains pending. On his Ohio application, Mr. Long disclosed that on September 13, 2011, he had been found guilty of Operating a Vehicle Impaired (OVI), a first-degree misdemeanor. The court imposed a fine and required Mr. Long to complete a driver intervention program. Mr. Long further disclosed that on June 29, 2012, he was charged with Possession of Drug Paraphernalia; Mr. Long pleaded guilty to a reduced offense of Disorderly Conduct.

Mr. Giacalone stated that following a Board-ordered examination at Glenbeigh Hospital, Nykolai Pidhorodeckyj, M.D., diagnosed Mr. Long with moderate cannabis use disorder. It was recommended that Mr. Long attend an intensive outpatient program at a Board-approved facility. To date, Mr. Long has not followed this recommendation due primarily due to concerns about his financial situation and having to submit to regular urine drug screens.

Based on the evidence and testimony, Mr. Giacalone agreed with the Findings of Fact and Conclusions of

Law. However, Mr. Giacalone offered an amendment that would remand this matter back to the Hearing Examiner in order to give Mr. Long an opportunity to obtain a new assessment at Glenbeigh Hospital and to have another hearing based on the results of that assessment. Mr. Giacalone offered this amendment based on the fact that a urine toxicology screen suffered a broken seal in transit and was rejected by the laboratory. Mr. Long has expressed the belief that had that sample been tested as negative, the final evaluation from Glenbeigh Hospital would have been different and most likely in his favor. Mr. Giacalone emphasized that Mr. Long will be responsible for making the necessary arrangements for the new assessment and, if not completed within 180 days of the effective date of the Order, the Hearing Examiner will so indicate in the Report and Recommendation and the Board shall consider the matter based on the original evidence presented at the November 6, 2014 hearing.

Mr. Giacalone moved to amend the Proposed Order to read as follows:

It is hereby ORDERED that:

This matter is **REMANDED** to the Hearing Examiner in order to allow Joshua Long an opportunity to obtain a new assessment for drug and/or alcohol abuse and/or dependency at Glenbeigh Hospital, and for additional hearing concerning the new assessment. Mr. Long shall be responsible for scheduling and making any necessary arrangements for the new assessment, which shall take place within 180 days of the effective date of this Order, and Mr. Long shall bear the expense of the new assessment. Further, Mr. Long shall ensure that a report concerning his new assessment is provided to the Hearing Examiner, with a copy provided to the Assistant Attorney General assigned to this matter, and he shall execute any necessary releases to accomplish that. Finally, should Mr. Long fail to obtain the new assessment within the time period specified, the Hearing Examiner shall so indicate in a Report on Remand, and the Board shall reconsider this matter based upon the evidence originally presented at the hearing on November 6, 2014.

This Order shall become effective immediately upon the mailing of the notification of approval by the Board.

Dr. Ramprasad seconded the motion.

Mr. Kenney stated that he will now entertain discussion of the proposed amendment.

Dr. Steinbergh opined that the Board should not grant a license to someone with Mr. Long's history. Dr. Steinbergh favored the Proposed Order, which would non-permanently deny Mr. Long's application and allow him the opportunity to reapply at a healthier time. Dr. Steinbergh noted that Mr. Long has obtained employment with a cruise line and will not be in a position to comply with any type of Order that the Board may impose. Dr. Steinbergh stated that she does not see the value of expending more of the Board's resources for an Ohio license that will not be used.

Mr. Giacalone stated that Dr. Steinbergh has brought up some fair points. However, Mr. Giacalone stated that because of the broken seal on a sample, there is a question of whether Mr. Long has gotten a fair shake. Dr. Ramprasad agreed with Mr. Giacalone and stated that everyone has a right to prove their

innocence.

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

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

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 Joshua Long. Dr. Soin seconded the motion. A vote was taken:

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

The motion to amend carried.

EXECUTIVE SESSION

Dr. Steinbergh moved that the Board declare Executive Session to confer with the Attorney General's representatives on matters of pending or imminent court action and for the purpose of deliberating on proposed consent agreements in the exercise of the Medical Board's quasi-judicial capacity. Mr. Gonidakis seconded the motion. A vote was taken:

ROLL CALL:	Dr. Rothermel	- aye
	Dr. Saferin	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Mr. Gonidakis	- aye

Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- 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. Groeber, Ms. Anderson, Mr. Miller, Ms. Loe, Ms. Debolt, Mr. Katko, Ms. Wehrle, Ms. Marshall, the Enforcement Attorneys, the Assistant Attorneys General, Mr. Alderson, Ms. Moore, Ms. Bouldware, Ms. Schwartz, and Mr. Taylor in attendance.

The Board returned to public session.

RATIFICATION OF SETTLEMENT AGREEMENTS

TIMOTHY W. CARROLL, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE MEDICINE AND SURGERY

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

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

The motion to ratify carried.

JOHN PIETER TAZELAAR, M.D. – PERMANENT WITHDRAWAL OF APPLICATION FOR MEDICAL LICENSURE

Dr. Ramprasad moved to ratify the Proposed Permanent Withdrawal with Dr. Tazelaar. Dr. Steinbergh seconded the motion. A vote was taken:

ROLL CALL:	Dr. Rothermel	- abstain
	Dr. Saferin	- abstain
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye

Mr. Gonidakis	- aye
Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- aye
Mr. Giacalone	- aye

The motion to ratify carried.

MARTIN PALMER AMBROSE, M.D. – STEP II CONSENT AGREEMENT

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

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

The motion to ratify carried.

RHONDA LYNNIS BEVER, L.M.T. – CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Consent Agreement with Ms. Bever. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion to ratify carried.

TOM REUTTI STARR, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE
MEDICINE AND SURGERY

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

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

The motion to ratify carried.

MANEESH LAL MEHRA, M.D. – STEP I CONSENT AGREEMENT

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

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

The motion to ratify carried.

JOHN DAVID VANCE, M.D. – STEP I CONSENT AGREEMENT

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

ROLL CALL:	Dr. Rothermel	- abstain
	Dr. Saferin	- abstain
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye

Mr. Gonidakis	- aye
Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- aye
Mr. Giacalone	- aye

The motion to ratify carried.

JENNIFER CAROLE CAMPBELL, M.D. – STEP I CONSENT AGREEMENT

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

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

The motion to ratify carried.

CITATIONS AND ORDERS OF SUMMARY SUSPENSION, IMMEDIATE SUSPENSION, AND AUTOMATIC SUSPENSION

MARK L. ALLEN, 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. Allen. Dr. Ramprasad seconded the motion. A vote was taken:

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

Mr. Giacalone - aye

The motion to send carried.

FRANK EDMIDIO BARONE, 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. Barone. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion to send carried.

NICOLE M. BREWER, L.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. Brewer. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion to send carried.

AMANDA S. CONN – 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. Conn. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion to send carried.

CLINTON JAMES CORNELL, P.A. – CITATION LETTER

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

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

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

The motion to send carried.

KIMBERLY JO CULL, 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. Cull. Dr. Ramprasad seconded the motion.

A vote was taken:

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

The motion to send carried.

ANTHONY VERNON DALLAS, JR., 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. Dallas. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion to send carried.

ERNEST BITELA DE BOURBON, III, 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. de Bourbon. Dr. Soin seconded the motion. A vote was taken:

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

The motion to send carried.

IRAJ DERAKHSHAN, 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. Derakhshan. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion to send carried.

ADAM MICHAEL HOLMAN – CITATION LETTER

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

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

ROLL CALL:	Dr. Rothermel	- abstain
	Dr. Saferin	- abstain
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye

Mr. Gonidakis	- aye
Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- aye
Mr. Giacalone	- aye

The motion to send carried.

MARK E. HOSTETTLER, 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. Hostettler. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion to send carried.

DAVID R. MANDEL, 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. Mandel. Dr. Ramprasad seconded the motion. A vote was taken:

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

Mr. Giacalone - aye

The motion to send carried.

RICHARD E. PAULUS, 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. Paulus. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion to send carried.

PING WEI – 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. Wei. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion to send carried.

APPLICANTS FOR LICENSURE

Dr. Saferin moved to approve for licensure, contingent upon all requested documents being received and approved in accordance with licensure protocols, the acupuncturist applicants listed in Exhibit “A,” the anesthesiologist assistant applicants listed in Exhibit “B,” the genetic counselor applicants listed in Exhibit “C,” the massage therapist applicants listed in Exhibit “D,” the Oriental medicine practitioner applicants listed in Exhibit “E,” the physician assistant applicants listed in Exhibit “F,” and the physician applicants listed in Exhibit “G.” Dr. Steinbergh seconded the motion. A vote was taken:

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

The motion carried.

PROBATIONARY REQUESTS

Mr. Kenney advised that at this time he would like the Board to consider the probationary requests on today’s consent agenda. Mr. Kenney asked if any Board member wished to discuss a probationary report or probationary request separately. Dr. Steinbergh stated that she wished to discuss select probationary reports separately.

Regarding Aiyappan Menon, M.D., a nephrologist, Dr. Steinbergh noted that he is requesting approval of Jeffrey Cameron, M.D., to serve as the new monitoring physician. Dr. Steinbergh stated that Dr. Cameron is an obstetrician and gynecologist. Dr. Steinbergh opined that if Dr. Menon is unable to find a nephrologist to serve as his monitoring physician, then the name of an internal medicine specialist should be submitted. Dr. Steinbergh stated that Dr. Menon’s monitoring includes chart review and that an internal medicine physician would be better able to fulfill this function.

Ms. Anderson suggested that the matter of Dr. Menon be tabled so that Dr. Menon can have a chance to submit the name of an internal medicine specialist to be the new monitoring physician.

Dr. Steinbergh moved to table the matter of Dr. Menon. Dr. Sethi seconded the motion. A vote was taken:

ROLL CALL:	Dr. Rothermel	- abstain
	Dr. Saferin	- abstain

Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Mr. Gonidakis	- aye
Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- aye
Mr. Giacalone	- aye

The motion to table carried.

Regarding Bradley R. Wolf, M.D., and Randall G. Whitlock, Jr., P.A., Dr. Steinbergh noted that these two practitioners work together. Mr. Whitlock is requesting approval of Leslie R. Dye, M.D, to serve as the new reporting physician. At Dr. Steinbergh's request, Ms. Bickers explained that a reporting physician reports to the Board regarding the respondent's clinical skills, professionalism, ethical behavior, amenability to supervision, and any complaints from patients or coworkers. Dr. Steinbergh stated that she brought this out for discussion for informational purposes.

Dr. Steinbergh stated that Dr. Wolf, who performs hair transplants, is requesting that David Bradley Bobbitt, M.D., an otolaryngologist, be approved to serve as the new monitoring physician. Dr. Steinbergh favored approving Dr. Wolf's request, but wanted to bring it out for discussion so there is an understanding of the nature of Dr. Wolf's practice.

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

- **To grant Kevin Gordon Baldie, M.D.'s request for reduction in appearances to every six months; and reduction in required psychiatric sessions from once per month to every six months;**
- **To grant Courtney D. Bonner, D.O.'s request for approval of David W. Ray, D.O., to serve as the monitoring physician; and determination of the frequency and number of charts to be reviewed at 10 charts per month;**
- **To grant Brian D. Hesler, M.D.'s, request for approval of Evan H. Goulding, M.D., Ph.D., to serve as the treating psychiatrist;**
- **To grant Anthony M. Ruffa, D.O.'s request for approval of Matthew R. DeJohn, M.D., to serve as the new treating psychiatrist;**
- **To grant Myron L. Shank, M.D.'s request for approval of Renato F. Dela Cruz, M.D., to serve as the monitoring physician; and determination of the frequency and number of charts to be reviewed at 10 charts per week;**
- **To grant Terry L. Thomas, D.O.'s request for approval of Amelia R. McPeak, D.O., to serve as an additional monitoring physician; and determination of the frequency and number of harts to be**

reviewed at 5 charts per month from each practice location;

- To grant Mark Aaron Weiner, D.O.'s request for approval of Bela S. Shah, M.D., to conduct psychiatric assessment and subsequent treatment; and permission to travel to Michigan without prior notification;
- To grant Randall G. Whitlock, Jr., P.A.'s request for approval of Leslie R. Dye, M.D., to serve as the new reporting physician; and
- To grant Bradley R. Wolf, M.D.'s request for approval of David Bradley Bobbitt, M.D., to serve as the new monitoring physician;

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

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

The motion carried.

REINSTATEMENT REQUEST

CHRISTINA L. SUMMERS, M.T.

Mr. Kenney stated that on June 11, 2014, the Board issued an Order that suspended Ms. Summer's massage therapy license for an indefinite period, but not less than 30 days. The Order was based on Ms. Summers' conviction in the Lucas County Court of Common Pleas on one felony count of Attempted Trafficking in Cocaine.

Mr. Kenney continued that the June 2014 Order further set out the conditions that Ms. Summer must meet for the reinstatement of her massage therapy to include the following: Submission of a reinstatement application and fee; and successful completion of a course in personal ethics and written report setting forth what she had learned and how she will apply what was learned to her massage therapy practice.

Mr. Kenney stated that Ms. Summers has submitted the required documentation of her ability to resume practice and is currently in compliance with the terms of the June 11, 2014 Board Order.

Dr. Steinbergh moved that the request for the reinstatement of the massage therapy license of

Christina L. Summers, M.T., be approved, effective immediately, subject to the probationary terms and conditions as outlined in the June 11, 2014 Board Order for a minimum of two years. Mr. Giacalone seconded the motion. A vote was taken:

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

The motion carried.

FINAL PROBATIONARY APPEARANCES

GEORGE D. J. GRIFFIN, M.D.

Dr. Griffin was appearing before the Board pursuant to his request for release from the terms of the Board's Order of April 14, 2010. Ms. Bickers reviewed Dr. Griffin's history with the Board.

Dr. Ramprasad noted that he knows Dr. Griffin well, and therefore he is recusing himself from this discussion.

In response to questioning by Dr. Steinbergh, Dr. Griffin stated that he currently practices orthopedics, seeing patients four days per week and operating two days per week. Dr. Griffin's primary effort is in the field of spine reconstruction. Dr. Griffin stated that he has relearned the proper method of prescribing medications and making sure that there are no variances that can be avoided. Dr. Griffin also responded that the courses he has taken in controlled substances management and medical record-keeping have been helpful to him.

Responding to questioning from Mr. Giacalone, Dr. Griffin stated that he initially came to the attention of the Board regarding the amounts of pain medicine he had been prescribing. When asked by Mr. Giacalone if Dr. Griffin thought the amounts were high at the time he prescribed the pain medications, Dr. Griffin responded that the amounts were something that his patients had gradually worked up to. Dr. Griffin also commented that he no longer sees those patients.

Mr. Giacalone recounted the amounts of medication that Dr. Griffin had prescribed at that time and found them to be staggering. Mr. Giacalone asked if Dr. Griffin had been concerned about respiratory distress or addiction. Dr. Griffin replied that he had been concerned about addiction and diversion, so he tested his patient frequently. Dr. Griffin stated that respiratory distress had not been an issue because his patients had gradually worked up to those levels.

Mr. Giacalone noted Patient 11, who had negative drug screens for medications which Dr. Griffin had been prescribing, positive drug screens for other medications, and a criminal history of drug-related felonies. In addition, a pharmacist had advised that Patient 11 was selling drugs. Mr. Giacalone asked if Patient 11 was a normal patient. Dr. Griffin answered that Patient 11 was not a normal patient. Dr. Griffin stated that he is no longer prescribing in those amounts and he tries to stay beneath the Board-recommended level of 80 MED (morphine equivalent dose).

Dr. Soin commented that he can understand how a patient's tolerance can build to a certain level and that this is why the 80 MED threshold was instituted. Dr. Soin asked about Dr. Griffin's protocol for positive drug screens. Dr. Griffin replied that he first talks to the patient, then based on that he may refer the patient to an addiction psychologist, and then based on that he decides whether to continue prescribing pain medication. Dr. Soin asked what would cause Dr. Griffin to continue prescribing medication despite a positive drug screen. Dr. Griffin replied that he may continue prescribing if he has known the patient for a long time, if the patient forthcoming and honest, and if the patient understood that what they were doing was not permitted and that they must be fully compliant moving forward. Dr. Griffin stated that if he received satisfactory answers, he would continue prescribing at a lower level and with closer monitoring.

In response to further questioning by Dr. Soin, Dr. Griffin responded that he provides his patients with written informed consent before prescribing opioids and he discloses that they cannot smoke marijuana while on opioids. Dr. Griffin further responded that the informed consent does not discuss the risks of using cannabinoids or any illicit drugs with opioids, but stated that he discusses this with his patients.

Dr. Soin agreed with Mr. Giacalone's earlier statements that the amounts that had been prescribed by Dr. Griffin were extremely high by any reasonable standard.

In response to questioning by Dr. Sethi, Dr. Griffin stated that he prescribes pain medication for his orthopedic patients post-operatively and pre-operatively if needed, but he does not have a pain management practice. Dr. Griffin further responded that he prescribed post-operatively for up to three months, two weeks at a time, and then decreases the medication until it is gone. Dr. Griffin noted that his patients have major reconstructive spine surgery, including disc and hardware insertion.

Mr. Kenney commented that further practice of this nature could put Dr. Griffin's medical license in jeopardy.

Dr. Steinbergh moved to release Dr. Griffin from the terms of the Board's Order of April 14, 2010, effective immediately. Mr. Gonidakis seconded the motion. A vote was taken:

ROLL CALL:	Dr. Rothermel	- abstain
	Dr. Saferin	- abstain
	Dr. Ramprasad	- abstain
	Dr. Steinbergh	- aye
	Mr. Gonidakis	- aye
	Mr. Kenney	- aye

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Dr. Sethi - aye
Dr. Soin - aye
Mr. Giacalone - aye

The motion carried.

PAUL D. REIKOWSKI, JR., M.T.

Mr. Reikowski was appearing before the Board pursuant to his request for release from the terms of his January 15, 2009 Consent Agreement. Ms. Bickers reviewed Mr. Reikowski's history with the Board.

Dr. Steinbergh asked if Mr. Reikowski has been totally compliant with the terms of his Consent Agreement. Ms. Bickers replied that Mr. Reikowski has been compliant for the last six months; his Agreement was tolled on two occasions for failure to comply with the provision to call into FirstLab daily.

In response to questions from Dr. Steinbergh, Mr. Reikowski stated that he is doing very well and he is active in Alcoholics Anonymous (AA). Mr. Reikowski stated that AA has helped him immensely to grow and to become the man he can be. Mr. Reikowski further responded that he currently practices massage therapy in a chiropractic office five days per week, seeing 50 to 60 patients per week.

Dr. Steinbergh moved to release Mr. Reikowski from the terms of his January 15, 2009 Consent Agreement, effective immediately. Mr. Gonidakis seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel	- abstain
Dr. Saferin	- abstain
Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Mr. Gonidakis	- aye
Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- aye
Mr. Giacalone	- aye

The motion carried.

OPERATIONS REPORT

Human Resources: Mr. Groeber stated that the position of Renewal Supervisor has been filled with a start date of January 26, 2015. Also, the position of License Examiner 2 has been filled by Kenny William as of December 29, 2014. Applications are currently being accepted for the positions of Deputy Director to fill the position vacated by Mr. Blanton. Mr. Groeber added that a parliamentary candidate for the Board will be interviewed. Lastly, Mr. Groeber stated that MaryCourtney Ore, Deputy Director of Communications, has resigned effective January 3, 2015; Mr. Groeber will give an update on the position at the next Board meeting.

Budget: Mr. Groeber stated that revenue and expenses both grew at about the same pace over the previous month. The cash balance as of November 2014 was slightly over \$4,000,000.00.

Information Technology: Mr. Groeber anticipated that the Board's new website will be released by January 23.

Regarding the new e-licensing system being developed, Mr. Groeber stated that the Board continues its efforts to be at the forefront of the solution and hoped to be selected as a pilot board for the new system.

Communications and Outreach: Mr. Groeber noted the list of meetings and presentations on the Operations Report and invited questions from the Board regarding those meetings.

Licensure: Mr. Groeber stated that good progress has been made with the time to license, especially with expedited licensure applications. Mr. Groeber stated that he will provide a full set of statistics at the next Board meeting.

Investigations: Regarding the proposed purchase of bulletproof vests for investigators, Mr. Groeber stated that rules and procedures are being finalized on how to utilize the vests should the Board give its final approval to purchase. Rules and procedures are also being developed should the Board approve the purchase of vehicles for investigators, which would give the Board more options on how to use the vehicles for investigations.

Enforcement: Mr. Groeber stated that the Enforcement caseload remained flat from November to December with an active caseload of 344, somewhat higher than at the same time in the previous year due to the clearing of some "logjams." Mr. Groeber stated that efforts are being made to move active cases through the process as efficiently as possible.

Hearing Unit: Mr. Groeber stated that work is still being done on getting the fine level of detail for the Hearing Unit functions. Mr. Groeber noted that the median days open for cases on the Hearing Unit docket at this time last year was 69 days; it is now 198 days. Mr. Groeber stated that many factors have resulted in that increase and the goal is to reduce the number to a more normalized level over the next several months.

2015 FSMB ANNUAL MEETING

Dr. Steinbergh moved to approve that Donald R. Kenney, Sr., attend the 2015 Annual Meeting of the FSMB and accept the FSMB Voting Delegate scholarship, and that attendance at the meeting is in connection with Mr. Kenney's responsibilities as, and is related to his position as, a member of the State Medical Board of Ohio. Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:	Dr. Rothermel	- aye
	Dr. Saferin	- aye
	Dr. Ramprasad	- aye

Dr. Steinbergh	- aye
Mr. Gonidakis	- aye
Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- aye
Mr. Giacalone	- aye

The motion carried.

Dr. Steinbergh moved to approve that A.J. Groeber, Executive Director, attend the 2015 Annual Meeting of the FSMB and accept the FSMB Executive Director scholarship, and that attendance at the meeting is in connection with Mr. Groeber's responsibilities as, and is related to his position as, Executive Director of the State Medical Board of Ohio. Dr. Saferin seconded the motion. A vote was taken:

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

The motion carried.

The Board engaged in a brief discussion of other Board members who may be interested in attending the 2015 Annual Meeting. Dr. Steinbergh opined that it is important that as many Board members as possible attend the meeting for educational and informational purposes. Dr. Steinbergh asked all Board members to consider attending the meeting.

TRAVEL REQUEST

Dr. Steinbergh moved to approve travel expenses in accordance with the state travel policy of AJ Groeber, Kimberly Anderson, and Jonithon LaCross to attend the Executive Telehealth Spring Summit Meeting on April 9-10, 2015, in Washington, DC, and to find that Mr. Groeber's attendance at conference is in connection to his duties as it relates to his position as Executive Director of the State Medical Board of Ohio, Ms. Anderson's attendance at the conference is in connection with her duties as it relates to her duties as Chief Legal Counsel of the State Medical Board of Ohio, and Mr. Lacross' attendance at the conference is in connection with his duties as it relates to his duties as Director of Public Policy and Government Affairs of the State Medical Board of Ohio. Dr. Saferin seconded the motion.

Mr. Gonidakis question the wisdom of paying \$1,000.00 for attendance to this conference. Mr. Groeber stated that with telemedicine being an important issue, this conference is a good opportunity to see what other medical boards and outside entities are doing in this area. The conference seems to be mostly attuned to the private sector, but Mr. Groeber felt it was important for the State Medical Board of Ohio to be represented since it will draft rules and influence legislation concerning telemedicine. Mr. Groeber stated that he contacted the organizers of the conference seeking to have the fee reduced or waived, but was unsuccessful.

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

ROLL CALL:	Dr. Rothermel	- aye
	Dr. Saferin	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Mr. Gonidakis	- nay
	Mr. Kenney	- aye
	Dr. Sethi	- aye
	Dr. Soin	- aye
	Mr. Giacalone	- aye

The motion carried.

Dr. Steinbergh asked that the agenda for the conference be distributed to the Board members when it is available. Mr. Groeber agreed.

RULES & POLICIES

PROPOSED RULE 4731-11-12, OFFICE-BASED OPIOID TREATMENT

Dr. Steinbergh moved to approve the Findings and Order adopting Rule 4731-11-12, and that the adopted rule be final filed with an effective date of January 31, 2015. Mr. Gonidakis seconded the motion. A vote was taken:

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

The motion carried.

ADOPTION OF AMENDED RULES

Dr. Steinbergh moved to approve the Findings and Order adopting amended Rule 4731-1-06, 4730-1-08, 4731-2-03, 4730-2-05, and 4731-11-12, and that the adopted rules be final files with an effective date of January 31, 2015. Dr. Saferin seconded the motion. A vote was taken:

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

The motion carried.

REPORTS BY ASSIGNED COMMITTEESLICENSURE COMMITTEELICENSURE APPLICATION REVIEWSJAY RONALD ROWES, M.D.

Dr. Saferin stated that the Licensure Committee had a conference call with Dr. Rowes this morning due to concerns that Dr. Rowes, who has applied for medical licensure in Ohio, has not practiced clinical medicine since 2006. Dr. Rowes informed the Committee that he was only interested in administrative medicine, not clinical medicine, and he did not object to a limitation on his license.

Dr. Saferin moved to approve Dr. Rowes' application for a medical license in Ohio and to immediately limit and restrict that license to the practice of administrative, non-clinical medicine. Dr. Saferin further moved that all limitations and restrictions shall terminate upon evidence acceptable to the Board or its designee that Dr. Rowes has successfully recertified with the American Board of Ophthalmology and completed a Board-approved preceptorship. Mr. Gonidakis seconded the motion. A vote was taken:

ROLL CALL:	Dr. Rothermel	- aye
	Dr. Saferin	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Mr. Gonidakis	- aye

Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- aye
Mr. Giacalone	- aye

The motion carried.

PHYSICIAN LICENSURE PROCESS

Dr. Saferin stated that the Licensure Committee discussed ways to improve the licensure process. Based on recommendations from Mr. Miller, the Committee makes two recommendations. First, the Committee recommends discontinuance of the requirement that applicants submit certificates of recommendation. Information provided by Mr. Miller showed that the certificates of recommendation accounts for 15% of the time and effort to get licensed.

Mr. Miller stated that the certificates of recommendation have traditionally been a way to demonstrate good moral character, which is a function now being fulfilled by the criminal background check requirement. Mr. Miller stated that the certificates of recommendation are invariably positive, but can hold up an application when they are not sent in by the recommender in a timely manner or when the recommender fills out the form incorrectly.

Dr. Steinbergh noted that in the past few years, the Board has taken disciplinary action two times based on improper certificates of recommendation. Mr. Miller noted that those two cases concerned a restoration of licensure application; The current proposal, if adopted by the Board, will eliminate the requirement for initial applications but not for restoration applications. Mr. Miller further noted that the Board's actions in those cases were against the recommenders, not the applicant.

Dr. Saferin moved to discontinue the requirement for certificates of recommendation for applications for initial medical licensure. Mr. Giacalone seconded the motion.

In response to further questioning, Mr. Miller stated that the Board will continue to receiving applicant information on education and training, criminal background checks, actions taken by other state medical boards, Drug Enforcement Administration (DEA) actions, employer recommendations, and profiles from the American Medical Association (AMA) and the American Osteopathic Association (AOA).

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

ROLL CALL:	Dr. Rothermel	- aye
	Dr. Saferin	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Mr. Gonidakis	- aye
	Mr. Kenney	- aye
	Dr. Sethi	- aye

Dr. Soin - aye
Mr. Giacalone - aye

The motion carried.

Second, Dr. Saferin stated that the Licensure Committee recommends discontinuing the requirement that the Board issue wallet cards. Dr. Saferin stated that this requirement is statutory, and therefore a change in the law would be required to implement this.

Mr. Miller stated that at a meeting a credentialers two years ago, it was requested that the Board discontinue this requirement. Since that time, the interest in this among credentialers has only increased. Mr. Miller noted that some other healthcare regulatory boards in Ohio have discontinued wallet cards without any apparent problems. Mr. Miller stated that the Board's website is approved by the Joint Commission and the National Committee for Quality Assurance as a primary source of license verification. Mr. Miller also stated that the Board's website gives more detailed and up-to-date information than wallet cards do.

Dr. Steinbergh stated that at time she has used her wallet card, along with her identification, at pharmacies to authorize prescriptions or prescription renewals. Mr. Miller stated that a pharmacy would also be able to access the Board's website for verification, along with the physician's identification, and would get more up-to-date information than a wallet card would be able to provide. Board members also noted the savings that would result from not printing the wallet cards.

Dr. Saferin moved that the Board support discontinuing the issuance of wallet cards to physicians. Dr. Sethi seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel	- aye
Dr. Saferin	- aye
Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Mr. Gonidakis	- aye
Mr. Kenney	- aye
Dr. Sethi	- aye
Dr. Soin	- aye
Mr. Giacalone	- aye

The motion carried.

SPECIALTY BOARD RECERTIFICATION & CONTINUING MEDICAL EDUCATION

Dr. Saferin stated that the American Board of Medical Specialties (AMBS) has inquired as to whether the Board would consider counting an individual's Maintenance of Certification (MOC) activities towards meeting Ohio's Continuing Medical Education (CME) requirements for license renewal. The Committee will invite representatives from the ABMS to a telephone conference to gather information and to discuss

this matter further. Mr. Miller stated that the courses required by MOC would obviously count towards the CME requirement, but the larger question is whether or how other MOC activities can or should be counted.

Dr. Saferin stated that he will report back to the Board following the conversation with the ABMS.

POLICY COMMITTEE

LEGISLATIVE UPDATES

ONE-BITE REPORTING EXEMPTION

Mr. Gonidakis stated that the one-bite reporting exemption was discussed by the Policy Committee. A draft of this proposed legislation should be ready for the Board's review by next month. Mr. LaCross commented that Mr. Gonidakis, Dr. Rothermel, and Mr. Giacalone have provided valuable input on this matter.

LEGISLATIVE UPDATE

Mr. LaCross stated that the 131st Legislative Assembly has begun. The new Chair of the House Health and Aging Committee is Representative Gonzalez and the new ranking member is Representative Antonio. The Chair of the Subcommittee on Health is Representative Sprague.

Mr. LaCross stated that he is working with Mr. Kenney, Mr. Gonidakis, and others to reintroduce fining authority bill into the House. Mr. LaCross will keep the Board members informed of its progress. Mr. LaCross further stated that he has been working on this bill with the help of Dr. Saferin. Mr. LaCross stated that both this bill and the fining authority bill are included in the Board's budget proposal. When hearings on both these bills are scheduled, Mr. LaCross will invite Board members to provide their expertise to help prepare Mr. Groeber's testimony. Dr. Steinbergh asked if language for an administrative license will be included in the podiatric licensing bill. Mr. LaCross confirmed that such language will be included in the podiatric licensing bill.

Mr. LaCross continued that conversations about Expedited Partner Therapy continue, with the help of Mr. Gonidakis and Dr. Steinbergh. Mr. LaCross continued that the Physician Assistants bill is being drafted and should look like the bill that passed the House in the last legislative session. Lastly, Mr. LaCross stated that bills concerning Suboxone clinics and opioids will likely be presented to the legislature in the near future.

Regarding the issue of Suboxone clinics, Dr. Soin stated that he is personally resistant to the model used for the Pain Management Clinics legislation, which requires that such a clinic be owned by a physician. Dr. Soin preferred the model used by the Board of Pharmacy, in which each clinic has a responsible person or party. Dr. Soin cited two reasons for his position. First, there are several addiction and treatment centers that are not owned by physicians that should have opportunity to provide good service. Second, Dr. Soin felt that the Board of Pharmacy model is more consistent with free markets and the free flow of

capital. Dr. Soin commented that under the current model, when he dies his wife will become a criminal because she will own his pain clinic without being a physician.

Mr. Gonidakis stated that the Board members will receive regular reports from Mr. LaCross and himself throughout this year. Mr. Gonidakis invited Board members' suggestions regarding legislation.

DRAFT GUIDANCE ON PRESCRIBING EXTENDED-RELEASE OPIOIDS FOR THE TREATMENT OF CHRONIC, NON-TERMINAL PAIN

Dr. Soin stated that these draft guidelines are a collective effort of many people, including Ms. Anderson, Mr. Schmidt, and Mr. LaCross, and he thanked them for their efforts.

Dr. Soin moved to approve draft guidance on prescribing extended-release opioids for the treatment of chronic, non-terminal pain for circulation to interested parties. Mr. Gonidakis seconded the motion. A vote was taken:

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

The motion carried.

RULES & AMENDMENTS

Dr. Steinbergh moved to approve draft amended Rules 4731-11-01, 4731-11-09, and 4731-11-11 for circulation to interested parties. Mr. Gonidakis seconded the motion. A vote was taken:

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

The motion carried.

FINANCE COMMITTEE

Mr. Kenney stated that the Board's revenue and expenses are in-line with the projections with only slight variation.

INVESTIGATOR VEHICLES

Mr. Groeber stated that currently, some Board investigators use state vehicles leased by the Board while others use their own vehicles and are paid reimbursement, depending on each investigator's circumstances. Mr. Groeber is exploring the possibility of providing all Board investigators with vehicles. Mr. Groeber noted several advantages to this, including doing away with mileage reimbursement, having to manage only a single standard, being able to purchase additional technology for the vehicles, and being able to normalize the mileage by rotating vehicles between investigators. Mr. Groeber stated that the additional cost of this proposal, based on an initial analysis, would be between \$5,000.00 and \$7,000.00 annually.

Mr. Groeber will perform further analysis for the Board's consideration.

INVESTIGATOR VESTS

Mr. Kenney stated that information on bulletproof vests for the investigators will be provided at the next Board meeting, including different types of vests and the costs. Mr. Kenney hoped to have the proposal ready for the vote by the Board at the next meeting.

Dr. Rothermel asked if investigators will be required to wear the vests if they are purchased. Mr. Groeber stated that the proposed rules regarding the vests are still being finalized and he will discuss this with the investigators. Mr. Groeber opined that in some situations, wearing the vests may not be necessary. Mr. Kenney stated that this is not an effort to make the investigators more like police officers and that the investigators' demeanor will continue to be cordial and professional. Mr. Kenney stated that the Committee has discussed rules that the investigator must wear the vest whenever they are carrying their firearm, and wearing the vest would be optional at other times. Dr. Steinbergh stated that though she had opposed arming the investigators, she supports the use of vests.

PHYSICIAN ASSISTANT/SCOPE OF PRACTICE COMMITTEE REPORTPHYSICIAN ASSISTANT FORMULARY REVIEW

Dr. Sethi stated that Michael Dobrovich, D.O., has requested that physician assistants be able to give IV medications, including IV diuretics, IV Ace Inhibitors, IV electrolyte replacement solutions, anti-arrhythmic agents, IV inotropic agents, IV hydralazine, IV anti-hypertensives. The Committee discussed this and concluded that physician assistants are not qualified to give these IV medications due to the many possible side-effects. The Committee recommends retaining those medications in the "physician initiated" category.

Dr. Sethi continued that regarding the physician assistant formulary, the Committee has recommended adding the medication Marinol to the appetite-stimulant category and moving the medication Magace into that same category.

Dr. Steinbergh moved to approve the recommendations of the Physician Assistant/Scope of Practice Committee. Dr. Saferin seconded the motion. A vote was taken:

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

The motion carried.

REPORTS AND RECOMMENDATIONS

KURT WILLIAM FROEHLICH, M.D.

Ms. Anderson informed the Board that a motion for reconsideration of the matter of Kurt William Froehlich, M.D., has been filed by Dr. Froehlich's attorney. The motion alleges that there was no proper motion to amend the Proposed Order. The motion further alleges that the Board did not properly consider the written objections filed in that matter. In addition, a question has been raised about whether the 30-day wind-down period included in the Proposed Order was left in place in the Amended Order.

Ms. Anderson reminded the Board that a motion for reconsideration can be passed by the Board so that procedural matters may be addressed, such as the possibility of not having made a proper motion and clarification of the 30-day wind-down issue.

Dr. Steinbergh moved to reconsider the matter of Kurt William Froehlich, M.D. Mr. Giacalone seconded the motion. A vote was taken:

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

Mr. Giacalone - aye

The motion to reconsider carried.

Mr. McGovern rose and began addressing the Board. Not having been recognized, Mr. Kenney ruled that Mr. McGovern was out of order. Mr. McGovern continued to attempt addressing the Board. At Mr. Kenney's direction, the Ohio State Highway Patrolman present escorted Mr. McGovern from the meeting.

Dr. Steinbergh moved to amend the Proposed Order in the matter of Kurt William Froehlich, M.D., to permanently revoke Dr. Froehlich's license to practice medicine and surgery in Ohio, effective immediately upon mailing of the notification of approval by the Board. Dr. Sethi seconded the motion.

Mr. Kenney stated that he will now entertain discussion in the above matter.

Ms. Anderson reiterated that the Findings of Fact and Conclusions of Law in the matter of Dr. Froehlich have already been accepted by the Board.

Mr. Giacalone asked if the Board should consider including a 30-day wind-down period following the effective date of the Order. Dr. Steinbergh disagreed with having a wind-down period due to the seriousness of this matter. However, Dr. Steinbergh stated that she could accept such language if the Board finds it acceptable. Dr. Steinbergh suggested tabling this matter so that the proposed Order can be reviewed by the Board members. Dr. Ramprasad agreed that the proposed Order should be drafted for the Board's review, though he opined that Dr. Froehlich's attorney has raised many questions that do not seem to make any difference to Dr. Ramprasad. Dr. Ramprasad recommended that a 30-day wind-down period be included, stating that Dr. Froehlich does not seem to be a danger to current patients and he has been practicing continuously since the events of 2012.

Regarding the allegation that Dr. Froehlich's written objections were not properly considered by the Board, Dr. Steinbergh stated that all Board members attested to having read and considered all objections. Ms. Anderson agreed, but stated that the question regarding consideration of objections is not a procedural matter and is not proper to be addressed in a reconsideration.

Dr. Steinbergh moved to table this discussion. Dr. Sethi seconded the motion. A vote was taken:

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

The motion to table carried.

COMPLIANCE COMMITTEE

Mr. Kenney stated that on December 10, 2014, the Compliance Committee met with Christopher Demas, M.D.; Harry F. Howell, II, M.T.; David B. Levy, D.O.; Cassandra R. Parrott, D.O.; Carol G. Ryan, M.D.; and Donald R. Savage, Jr., M.D., and moved to continue them under the terms of their respective Board actions.

Further, the Compliance Committee accepted Compliance staff's report of conferences on November 3rd and 4th, and further approved the draft minutes from the November 5, 2014 Compliance Committee.

The Board took a brief recess at 4:20 p.m. and returned at 4:45 p.m.

REPORTS AND RECOMMENDATIONS

KURT WILLIAM FROEHLICH, M.D.

Dr. Steinbergh moved to remove the matter of Kurt William Froehlich, M.D., from the table. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion carried.

Dr. Steinbergh stated that her motion to amend has been drafted and distributed to the Board members. The amended Order will permanently revoke Dr. Froehlich's license to practice medicine and surgery in Ohio on the 31st day following the effective date of the Order. During the 30-day interim, Dr. Froehlich shall not undertake the care of any patient not already under his care. The Order will become effective immediately upon mailing of the notification of approval by the Board.

Mr. Taylor noted that this amended Order differs from Dr. Steinbergh's initial motion, which is currently before the Board for consideration, in that it includes a 30-day wind-down period. Mr. Taylor asked if any Board member objected to the change in Dr. Steinbergh's motion.

No Board member objected to the change in Dr. Steinbergh's motion. The change to the motion was accepted.

Ms. Debolt noted that, with the exception of the wind-down period, the proposed amended Order is consistent with the intent that had been previously expressed by the Board.

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

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

The motion carried.

Dr. Steinbergh moved to approve the Order, as amended, in the matter of Kurt William Froehlich, M.D. Dr. Sethi seconded the motion. A vote was taken:

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

The motion carried.

January 14, 2015

Thereupon, at 4:50 p.m., the January 14, 2015 session of the State Medical Board of Ohio was adjourned by Dr. Ramprasad.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio meeting on January 14, 2015, as approved on February 11, 2015.



Donald R. Kenney, Sr., President



Kim G. Rothermel, M.D., Secretary

(SEAL)

