

May 13, 2015

MINUTES**THE STATE MEDICAL BOARD OF OHIO****May 13, 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: 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.; Robert P. Giacalone; and Andrew P. Schachat, M.D. The following member arrived at a later time: Michael L. Gonidakis, Vice President. The following member did not attend: Sushil M. Sethi, 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, Greg Taposci, James Roach, and Kimberly Lee, Enforcement Attorneys; Kyle Wilcox and James Wakley, Assistant Attorneys General; R. Gregory Porter, Chief Hearing Examiner; Danielle Blue, Hearing Examiner; William Schmidt, Senior Counsel for Investigations; Gary Holben, Operations Administrator; Danielle Bickers, Compliance Supervisor; Annette Jones and Angela Moore, Compliance Officers; Mitchell Alderson, Chief of Licensure; Chantel Scott, Chief of Renewal; Christine Schwartz, Legal Services Contractor; Jacqueline A. Moore, Legal/Public Affairs Assistant; Ruth Pologruto, Public Inquires Assistant; and Benton Taylor, Board Parliamentarian.

MINUTES REVIEW

Dr. Saferin moved to approve the draft minutes of the April 8, 2015, Board meeting, as written. Dr. Steinbergh seconded the motion. A vote was taken:

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

The motion 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 genetic counselor applicants listed in Exhibit “B,” the massage therapist applicants listed in Exhibit “C,” the physician assistant applicants listed in Exhibit “D,” the physician applicants listed in Exhibit “E,” and the cosmetic therapist applicants listed in Exhibit “F.” Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:	Dr. Rothermel	- aye
	Dr. Saferin	- aye
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Mr. Kenney	- aye
	Dr. Soin	- aye
	Mr. Giacalone	- aye
	Dr. Schachat	- 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: Freeda J. Flynn, M.D.; Richard Anthony Greene, M.D.; Arif Husain Hakim, M.D.; Nilesh B. Jobalia, M.D.; and Poornanand Palaparty, M.D.

A roll call was taken:

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

FREEDA J. FLYNN, M.D.

Mr. Kenney directed the Board's attention to the matter of Freeda J. Flynn, M.D. Objections were 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. Flynn. Five minutes will be allowed for that address.

Dr. Flynn was represented by his attorney, Eric Plinke.

Mr. Plinke stated that this case involves mental health issues, which the Board deals with frequently, but most often in cases with a significant illness and clear deviations from the standards of care. Mr. Plinke stated that in the matter of Dr. Flynn, however, the mental health diagnosis is not clear or significant and was described by the Board's psychiatric expert, Stephen G. Noffsinger, M.D., as mild depression. Mr. Plinke added that there is also no evidence that Dr. Flynn's current medical practice is below the minimal standards of care.

Mr. Plinke stated that in cases like Dr. Flynn's the Board presents Dr. Noffsinger with a standard that is self-fulfilling and discriminatory. Based on the Board's standard, if a mental health diagnosis exists then Dr. Noffsinger must find that there is impairment. Mr. Plinke stated that the implications of such a standard are extensive in cases like Dr. Flynn's where the diagnosis is, at best, borderline. Mr. Plinke submitted that the use of Dr. Noffsinger's opinion to equate a diagnosis with impairment as a substitute for the legal requirement of proof of sub-standard care is legally improper under the Americans with Disabilities Act (ADA), Section 119 of the Ohio Revised Code, and the Board's case law.

Mr. Plinke stated that no evidence has been presented to show that Dr. Flynn provided sub-standard care within the last five years. Mr. Plinke acknowledged that there is an allegation, with no supporting evidence, that Dr. Flynn yelled at a patient three to four years ago; Mr. Plinke noted that the patient in question was a drug-seeker. Mr. Plinke also noted an allegation, again without supporting evidence, that Dr. Flynn called the police on a patient's son because he was being abusive.

Dr. Plinke stated that the Assistant Attorneys General have presented three items to demonstrate Dr. Flynn's current inability to practice:

- Dr. Flynn's 1993 medical license application which contains information that Dr. Flynn saw a physician when she was getting divorced and was separated from her family
- Dr. Flynn self-reported in 2002 that her medical staff privileges had been summarily suspended and subsequently reinstated due to a dispute with a nurse regarding the handling of a patient
- Some of the circumstances regarding how Dr. Flynn lost her job at Mercer Health after three months of employment

Mr. Plinke stated that the 150 to 200 pages of documents regarding Dr. Flynn's employment at Mercer Health were provided to him the day before Dr. Flynn's hearing. Prior to receiving the documents, Mr. Plinke stated that he had not been aware that the Assistant Attorney General, Mr. Wakley, intended to present any information regarding Mercer Health. At Dr. Flynn's hearing, Mr. Wakley stated, "We are not offering this to prove that these incidents happened." Mr. Plinke stated that Mr. Wakley made this statement because if Dr. Noffsinger makes a diagnosis that requires any type of follow-up, it becomes an impairment case regardless of whether there is actual proof of sub-standard care as the law requires. Mr. Plinke stated that in cases of border-line impairment such as this, the Board's actions result in a violation of the ADA and a failure to conform to Section 119, Ohio Revised Code.

Mr. Plinke stated that this matter reminds him of the similar case of Melanie Leu, M.D. When Dr. Leu addressed the Board in February 2011, the Board stated that it would review how cases involving depression are handled. Mr. Plinke suggested that the Board has not done such a review because the facts of Dr. Flynn's case predate that of Dr. Leu.

Mr. Plinke stated that the applicable law requires the Board to adopt an Order different from the Hearing Examiner's Proposed Order. Mr. Plinke stated that if suspension of Dr. Flynn's medical license was appropriate, the Board would have done so when it received Dr. Noffsinger's report last year.

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 in Dr. Flynn's hearing, Dr. Noffsinger was asked the following questions:

- Is there any evidence that Dr. Flynn suffers from any mental disorder or psychopathology?
- If the answer to the first question is affirmative, is Dr. Flynn currently capable of practicing medicine according to acceptable and prevailing standards of care?

Mr. Wakley stated that Dr. Noffsinger answered “yes” to both these questions. Mr. Wakley stated that after his and his staff’s evaluation of Dr. Flynn, Dr. Noffsinger opined that Dr. Flynn was incapable of practicing medicine safely and that opinion formed the basis of the Board’s proceeding with this case. Mr. Wakley stated that the Board is not required to have evidence of current substandard practice. Mr. Wakley stated that the Board can consider why this case has been in process for five years. However, Mr. Wakley stated that the Board acted in good faith based on the record and preceded appropriately.

Regarding the fact the Dr. Flynn’s attorney received employment records the day before the hearing, Mr. Wakley noted that this case was under negotiation until the Friday before the hearing, when Dr. Flynn rejected a negotiated settlement. For these reasons, Dr. Flynn’s employment records were disclosed late. Mr. Wakley noted that these documents were from Dr. Flynn’s own employment record at Mercer Health. Mr. Wakley further noted that Dr. Flynn’s attorney had a copy of Dr. Noffsinger’s report well in advance of the hearing. Mr. Wakley stated that Dr. Flynn’s written statement directly addressed the issues that occurred at Mercer health. Mr. Wakley stated that Dr. Noffsinger’s opinion, while referring to the Mercer Health documents, were not based entirely or, in Mr. Wakley’s opinion, substantially on those documents. Rather, Dr. Noffsinger based his opinion on his direct observations of Dr. Flynn, her behavior, and her reports during his evaluation.

Mr. Wakley stated that the State fully supports the Hearing Examiner’s Report and Recommendation. Mr. Wakley added that the ADA is not implicated in this matter.

Dr. Steinbergh moved to approve and confirm Ms. Blue’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Freeda J. Flynn, M.D. Dr. Ramprasad seconded the motion.

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

Mr. Giacalone briefly reviewed Dr. Flynn’s medical career. In a letter dated March 5, 2014, the Medical Board ordered Dr. Flynn to a psychiatric evaluation with Stephen G. Noffsinger, M.D., due to one or more of the following events:

- On or about January 29, 2010, Dr. Flynn’s corporation gave notice that it was terminating her contract of employment due to inappropriate and disruptive behavior in the office including interactions with administration, at least two instances of improper charting that could have resulted in patient harm had her orders been followed, and failure to complete medical records in a timely and complete manner (Mr. Giacalone noted that at the time of her termination Dr. Flynn had at least 133 incomplete charts dating to October 2009).
- In or about 2012 at Dr. Flynn’s current practice location, when she found that a patient had not made a certain appointment as she had instructed, Dr. Flynn slammed a clipboard on examination table, yelled at the patient using expletives, threw items, and ordered the patient to get out.
- In a January 17, 1994 letter sent to the Board when she was applying for an Ohio medical license, Dr. Flynn explained that she had changed her residency program from Duke University to Wheeling

Hospital because of an unexpected divorce that had caused a great deal of emotional distress and she had made a “powerful enemy” at Duke. Dr. Flynn reported that allegations had been made that she ordered test without the approval of the attending physician and made medication errors. One of Dr. Flynn’s treatment providers submitted a letter to board stating that she diagnosed Dr. Flynn with Depressive Disorder, Not Otherwise Specified, and prescribed Prozac. A second provider reported that at the time she started seeing Dr. Flynn she was taking Wellbutrin but was having breakthrough symptoms including decreased mood, crying spells, feelings of low self-esteem, fatalism, anxiety, poor energy, and lack of interest. Dr. Flynn was restarted on Prozac and switched to Zoloft.

- In or about 2002, Dr. Flynn’s hospital privileges at Ohio Valley Medical Center in Wheeling, West Virginia, were summarily suspended based on allegations by two nurses that her conduct was disruptive to the orderly operations of the hospital. However, Dr. Flynn’s privileges were subsequently restored.

Mr. Giacalone stated that despite these events, as of 2013 the Board had information that Dr. Flynn had not been taking medications for conditions related to mental illness, psychological problems, and personality disorders.

Following his evaluation of Dr. Flynn, Dr. Noffsinger sent a letter to the Board indicating that Dr. Flynn had a mental disorder, namely Persistent Depressive Disorder, which was characterized by symptoms of chronic mild depression, mild fatigue, anxiety, difficulty tolerating stress, and mildly impaired concentration. Dr. Noffsinger further stated that this disorder results in Dr. Flynn being unable to practice medicine according to acceptable and prevailing standards of care. Dr. Noffsinger stated that Dr. Flynn’s condition is amenable to treatment which would include seeing a Board-approved psychiatrist, administration of anti-depressant or anti-anxiety medications to be determined by her treating psychiatrist, a brief course of psychotherapy to be administered by a psychologist or professional counselor to assist Dr. Flynn in developing coping skills to address multiple stressors, and that her treating psychiatrist and psychotherapist report to the Board regarding her compliance with treatment and her clinical status. Dr. Noffsinger opined that Dr. Flynn should be capable of practicing medicine according to acceptable and prevailing standards of care, provided that she adheres to these treatment recommendations.

Based on the evidence and testimony, Mr. Giacalone agreed with the Hearing Examiner’s Findings of Fact and Conclusions of Law.

Dr. Steinbergh stated that it is clear the Dr. Flynn suffers from Persistent Depressive Disorder, but expressed concern about whether Dr. Flynn needed to be removed from practice at this time. Dr. Steinbergh noted that in the past Dr. Flynn had successfully managed these issues by attended counseling and taking prescribed anti-depressants. However, beginning in 2002 Dr. Flynn has had multiple instances of disruptive and inappropriate behavior at different medical facilities with respect to her interaction with hospital administration, office staff, and patients. Dr. Flynn’s behavior in 2009 resulted in termination of her employment. In 2012 Dr. Flynn allegedly yelled at a patient at her family practice.

Dr. Steinbergh stated that she thoroughly read Dr. Flynn’s objections and found them to be sound. Dr. Steinbergh stated that if the Board had felt that Dr. Flynn was a danger to her patients when she was

ordered to a psychiatric examination, then the Board should have summarily suspended her medical license at that time. Dr. Steinbergh stated that there is enough evidence to establish that Dr. Flynn has chronic depression and that the Board has a right to ensure that her patient care is appropriate.

Based on the foregoing, Dr. Steinbergh offered an amendment to the Proposed Order. If accepted by the Board, the amended Order would place Dr. Flynn's medical license on probation for a minimum of three years. The probationary terms include the requirement to undergo psychiatric assessment and treatment by a psychiatrist of her choice, subject to approval by the Board, and the requirement to complete educational courses in disruptive physicians, professional ethics, and office management. Dr. Steinbergh stated that the amended Order would provide Dr. Flynn the opportunity to improve her mental health and behavior while continuing to practice medicine. Dr. Steinbergh added that the office management course may help Dr. Flynn manage her practice as a solo practitioner.

Dr. Steinbergh stated that if the Board-approved psychiatrist finds that Dr. Flynn is unable to safely practice medicine at this time, then the Board should do its due diligence and be obligated to appropriately suspend her license.

Dr. Steinbergh moved to approve the Proposed Order to read as follows:

It is hereby ORDERED that:

- A. **PROBATION:** The certificate of Freeda J. Flynn, M.D., to practice medicine and surgery in the State of Ohio shall be subject to the following PROBATIONARY terms, conditions, and limitations for a period of at least three years:
1. **Obey the Law:** Dr. Flynn shall obey all federal, state, and local laws, and all rules governing the practice of medicine and surgery in Ohio.
 2. **Declarations of Compliance:** Dr. Flynn shall submit quarterly declarations under penalty of Board disciplinary action and/or criminal prosecution, stating whether there has been compliance with all the conditions of this Order. The first quarterly declaration must be received in the Board's offices on or before the first day of the third month following the month in which this Order becomes effective. Subsequent quarterly declarations must be received in the Board's offices on or before the first day of every third month.
 3. **Personal Appearances:** Dr. Flynn shall appear in person for an interview before the full Board or its designated representative during the third month following the month in which this Order becomes effective, or as otherwise directed by the Board. Subsequent personal appearances shall occur every three months thereafter, and/or as otherwise directed by the Board. If an appearance is missed or is rescheduled for any reason, ensuing appearances shall be scheduled based on the appearance date as originally scheduled.

4. **Psychiatric Assessment/Treatment:** Within 30 days of the effective date of this Order, or as otherwise determined by the Board, Dr. Flynn shall submit to the Board for its prior approval the name and curriculum vitae of a psychiatrist of Dr. Flynn's choice.

Upon approval by the Board, Dr. Flynn shall obtain from the approved psychiatrist an assessment of Dr. Flynn's current psychiatric status. The assessment shall take place no later than 60 days following such approval, unless otherwise determined by the Board. Prior to the initial assessment, Dr. Flynn shall furnish the approved psychiatrist copies of the Board's Order, including the Summary of the Evidence, Findings of Fact, and Conclusions of Law, and any other documentation from the hearing record which the Board may deem appropriate or helpful to the psychiatrist.

Upon completion of the initial assessment, Dr. Flynn shall cause a written report to be submitted to the Board from the approved psychiatrist. The written report shall include:

- a. A detailed report of the evaluation of Dr. Flynn's current psychiatric status and condition;
- b. A detailed plan of recommended psychiatric treatment, if any, based upon the psychiatrist's informed assessment of Dr. Flynn's current needs;
- c. A statement regarding any recommended limitations upon her practice; and
- d. Any reports upon which the treatment recommendation is based, including reports of physical examination and psychological or other testing.

Should the Board-approved psychiatrist recommend psychiatric treatment, and upon approval by the Board of the treatment plan, Dr. Flynn shall undergo and continue psychiatric treatment at the rate of visits recommended by the approved treating psychiatrist, or as otherwise directed by the Board. The sessions shall be in person and may not be conducted by telephone or other electronic means. Dr. Flynn shall comply with her psychiatric treatment plan, including taking medication(s) as prescribed for her psychiatric disorder and submitting to periodic tests of her blood and/or urine.

Dr. Flynn shall continue in psychiatric treatment until such time as the Board determines that no further treatment is necessary. To make this determination, the Board shall require reports from the approved treating psychiatrist. The psychiatric reports shall contain information describing Dr. Flynn's current treatment plan and any changes that have been made to the treatment plan since the prior report; her compliance with the treatment plan; her psychiatric status; her progress in treatment; and results of any laboratory or other studies that have been conducted since the prior

report. Dr. Flynn shall ensure that the reports are forwarded to the Board on a quarterly basis and are received in the Board's offices no later than the due date for Dr. Flynn's declarations of compliance.

Dr. Flynn shall ensure that her treating psychiatrist immediately notifies the Board of Dr. Flynn's failure to comply with her psychiatric treatment plan and/or any determination that Dr. Flynn is unable to practice due to her psychiatric disorder.

In the event that the designated psychiatrist becomes unable or unwilling to serve in this capacity, Dr. Flynn shall immediately so notify the Board in writing and make arrangements acceptable to the Board for another psychiatrist as soon as practicable. Dr. Flynn shall ensure that the previously designated psychiatrist also notifies the Board directly of his or her inability to continue to serve and the reasons therefor.

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

5. **Disruptive Physician Course(s)**: Before the end of the first year of probation, or as otherwise approved by the Board, Dr. Flynn shall provide acceptable documentation of successful completion of a course or courses dealing with disruptive physicians. The exact number of hours and the specific content of the course or courses shall be subject to the prior approval of the Board or its designee. Any course(s) taken in compliance with this provision shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which they are completed.

In addition, at the time Dr. Flynn submits the documentation of successful completion of the course(s) dealing with disruptive physicians, she shall also submit to the Board a written report describing the course(s), setting forth what she learned from the course(s), and identifying with specificity how she will apply what she has learned to her practice of medicine in the future.

6. **Professional Ethics Course(s)**: Before the end of the first year of probation, or as otherwise approved by the Board, Dr. Flynn shall provide acceptable documentation of successful completion of a course or courses dealing with professional ethics. The exact number of hours and the specific content of the course or courses shall be subject to the prior approval of the Board or its designee. Any course(s) taken in compliance with this provision shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which they are completed.

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

7. **Office Management Course(s):** Before the end of the first year of probation, or as otherwise approved by the Board, Dr. Flynn shall submit acceptable documentation of successful completion of a course or courses dealing with office management. The exact number of hours and the specific content of the course or courses shall be subject to the prior approval of the Board or its designee. Any course(s) taken in compliance with this provision shall be in addition to the Continuing Medical Education requirements for relicensure for the Continuing Medical Education period(s) in which they are completed.

In addition, at the time Dr. Flynn submits the documentation of successful completion of the course(s) dealing with office management, she shall also submit to the Board a written report describing the course(s), setting forth what she learned from the course(s), and identifying with specificity how she will apply what she has learned to her practice of medicine in the future.

8. **Releases:** Dr. Flynn shall provide authorization, through appropriate written consent forms, for disclosure of evaluative reports, summaries, and records, of whatever nature, by any and all parties that provide treatment or evaluation for Dr. Flynn's psychiatric condition and/or related conditions, or for purposes of complying with this Order, whether such treatment or evaluation occurred before or after the effective date of this Order. To the extent permitted by law, the above-mentioned evaluative reports, summaries, and records are considered medical records for purposes of Section 149.43, Ohio Revised Code, and are confidential pursuant to statute.

Dr. Flynn shall also provide the Board written consent permitting any treatment provider from whom he obtains treatment to notify the Board in the event Dr. Flynn fails to agree to or comply with any treatment contract or aftercare contract. Failure to provide such consent, or revocation of such consent, shall constitute a violation of this Order.

9. **Required Reporting of Change of Address:** Dr. Flynn shall notify the Board in writing of any change of residence address and/or principal practice address within 30 days of the change.
10. **Tolling of Probationary Period While Out of Compliance:** In the event Dr. Flynn is found by the Secretary of the Board to have failed to comply with any provision of this Order, and is so notified of that deficiency in writing, such period(s) of

noncompliance will not apply to the reduction of the probationary period under this Order.

- B. **TERMINATION OF PROBATION:** Upon successful completion of probation, as evidenced by a written release from the Board, Dr. Flynn's certificate will be fully restored.
- C. **VIOLATION OF THE TERMS OF THIS ORDER:** If Dr. Flynn violates the terms of this Order in any respect, the Board, after giving his notice and the opportunity to be heard, may institute whatever disciplinary action it deems appropriate, up to and including the permanent revocation of her certificate.
- D. **REQUIRED REPORTING WITHIN 30 DAYS OF THE EFFECTIVE DATE OF THIS ORDER:**
1. **Required Reporting to Employers and Others:** Within 30 days of the effective date of this Order, Dr. Flynn shall provide a copy of this Order to all employers or entities with which she is under contract to provide healthcare services (including but not limited to third-party payors), or is receiving training; and the Chief of Staff at each hospital or healthcare center where she has privileges or appointments. Further, Dr. Flynn shall promptly provide a copy of this Order to all employers or entities with which she contracts in the future to provide healthcare services (including but not limited to third-party payors), or applies for or receives training, and the Chief of Staff at each hospital or healthcare center where she applies for or obtains privileges or appointments.

In the event that Dr. Flynn provides any healthcare services or healthcare direction or medical oversight to any emergency medical services organization or emergency medical services provider in Ohio, within 30 days of the effective date of this Order, she shall provide a copy of this Order to the Ohio Department of Public Safety, Division of Emergency Medical Services.

These requirements shall continue until Dr. Flynn receives from the Board written notification of the successful completion of her probation.

2. **Required Reporting to Other Licensing Authorities:** Within 30 days of the effective date of this Order, Dr. Flynn shall provide a copy of this Order to the proper licensing authority of any state or jurisdiction in which she currently holds any professional license, as well as any federal agency or entity, including but not limited to the Drug Enforcement Administration, through which she currently holds any license or certificate. Also, Dr. Flynn shall provide a copy of this Order at the time of application to the proper licensing authority of any state or jurisdiction in which she applies for any professional license or reinstatement/restoration of any professional

license. This requirement shall continue until Dr. Flynn receives from the Board written notification of the successful completion of her probation.

3. **Required Documentation of the Reporting Required by Paragraph D:** Dr. Flynn shall provide this Board with **one** of the following documents as proof of each required notification within 30 days of the date of each such notification: (a) the return receipt of certified mail within 30 days of receiving that return receipt, (b) an acknowledgement of delivery bearing the original ink signature of the person to whom a copy of the Order was hand delivered, (c) the original facsimile-generated report confirming successful transmission of a copy of the Order to the person or entity to whom a copy of the Order was faxed, or (d) an original computer-generated printout of electronic mail communication documenting the e-mail transmission of a copy of the Order to the person or entity to whom a copy of the Order was e-mailed.

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

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

ROLL CALL:	Dr. Rothermel	- abstain
	Dr. Saferin	- abstain
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Mr. Kenney	- aye
	Dr. Soin	- aye
	Mr. Giacalone	- aye
	Dr. Schachat	- 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 Freeda J. Flynn, 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. Kenney	- aye
	Dr. Soin	- aye
	Mr. Giacalone	- aye
	Dr. Schachat	- aye

The motion to approve carried.

RICHARD ANTHONY GREENE, M.D.

Mr. Kenney directed the Board's attention to the matter of Richard Anthony Greene, M.D. Objections were filed to Ms. Blue's Report and Recommendation, but the objections were not filed in a timely manner. Mr. Kenney stated that the Board can decide whether or not to accept Dr. Greene's objections.

Dr. Steinbergh moved to accept Dr. Greene's written objections. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion to accept the objections carried.

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

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

Dr. Schachat stated that in May 2014, the Virginia Board of Medicine indefinitely suspended Dr. Greene's license to practice medicine in that state for at least one year based on narcotics prescribing shortcomings. Dr. Schachat briefly reviewed Dr. Greene's career, including his service in the Navy Medical Corps as an anatomic pathologist. From 2010 to 2014 Dr. Greene was employed as a physician at the Day Star Medical Center in Staunton, Virginia, which he described as a day spa with some urgent care, where he saw between five and forty patients per day and was paid about \$40.00 per patient. Dr. Greene testified that many of these patients were chronic pain patients, though he had no training in pain management.

Dr. Schachat continued that the Virginia Board Order includes a number of patient care concerns regarding controlled substance prescribing. For example, Dr. Greene prescribed narcotics for a patient who was pregnant; though Dr. Greene did not know the patient was pregnant, there were indications in the medical record that she was pregnant. Dr. Schachat noted a patient for whom Dr. Green prescribed a controlled substance with no evidence of an underlying diagnosis. Dr. Greene also failed to make appropriate referrals and failed to detect patients who were doctor shopping based on pharmacy profiles. A number of Dr. Greene's patients did not have a comprehensive treatment plan.

Dr. Schachat observed Dr. Greene's testimony that he had not been used to working with non-military

patients at that time and had not been appreciative of the narcotic-seeking behavior of his patients. The Virginia Board of Medicine indefinitely suspended Dr. Greene's Virginia medical license and required him to surrender his Drug Enforcement Administration (DEA) certificate. The Maryland Board of Physicians also took an action based on the Virginia action. Dr. Schachat stated that Dr. Greene has not practiced since the Virginia action and he has complied with the Virginia Order by taking courses in substance abuse, dependence, and pain management.

Dr. Schachat stated that the Hearing Examiner felt that the mitigating factors in this case do not outweigh the seriousness of Dr. Greene's offenses in practicing at what would be considered a pill mill. The Hearing Examiner's Proposed Order is for permanent revocation of Dr. Greene's Ohio medical license. Dr. Schachat agreed that this is a very serious matter, but opined that Dr. Greene can learn to practice appropriately. Dr. Schachat suggested an alternative order to limit his Ohio medical license to non-direct patient care or as an anatomic pathologist, the field in which he was trained. Dr. Schachat also opined that Dr. Greene's ability to prescribe narcotics should be restricted.

Dr. Greene moved to amend the Proposed Order so that Dr. Greene's Ohio Medical License will be limited to non-direct patient care or to the practice of anatomic pathology, and restricting Dr. Greene's authority to prescribe narcotics. Dr. Ramprasad seconded the motion.

Mr. Giacalone respectfully disagreed with Dr. Schachat, stating the Dr. Greene has shown blatant disregard for patient care. Mr. Giacalone noted that according to the Virginia Board Order, Dr. Green prescribed Dilaudid and MS Contin to Patient A, despite the fact that she had gone to 14 different prescribers in the preceding years. Patient B had multiple signs of drug-seeking behavior, including stealing oxycodone, using morphine that had been prescribed for her sister, early refill requests, prior treatment for substance abuse, a drug-related felony arrest, and signs of IV drug use. Patient C had six prescribers of controlled substances and a history of injecting crushed morphine tablets. Patient D had a history of Xanax abuse and was receiving narcotics from another prescriber. Mr. Giacalone stated that the list of similar patients in the record stretches from A to K.

Regarding Dr. Greene's service in the United States Navy, Mr. Giacalone stated that this country's service men would be remiss in having such poor prescribing habits. Mr. Giacalone also noted that there is an issue with drug abuse in the Veteran's Administration. Mr. Giacalone favored the Proposed Order of permanent revocation.

Dr. Steinbergh agreed with Dr. Schachat's comments. Dr. Steinbergh stated that under the terms of his Virginia Board Order, Dr. Greene has the burden of proving his competency and fitness to practice medicine in a safe manner before his Virginia medical license can be reinstated. Dr. Steinbergh stated that Dr. Greene certainly practiced inappropriately and will not be prescribing controlled substances again because he surrendered his DEA certificate.

Dr. Steinbergh stated that Dr. Greene intends to apply for reinstatement of his Virginia medical licenses so that he can seek employment in pathology or research. Dr. Steinbergh stated that if Dr. Greene's Ohio medical license were to be permanently revoked, it may render the reinstatement of his Virginia medical license impossible. Dr. Steinbergh opined that Dr. Greene is remediable. Dr. Steinbergh favored

suspending Dr. Greene's Ohio license indefinitely until his Virginia medical license has been fully reinstated. Dr. Steinbergh further suggested that if Dr. Greene applies for reinstatement of his Ohio medical license, it should be restricted to the practice of anatomic pathology.

Dr. Steinbergh opined that Dr. Greene will never practice in this fashion again. Dr. Steinbergh saw no reason to permanently revoke Dr. Greene's Ohio medical license because he still has an ability to provide care within his specialty.

Dr. Soin stated that he appreciates Dr. Schachat's and Dr. Steinbergh's efforts to restrict Dr. Greene from prescribing controlled substances to patients. However, Dr. Soin agreed with Mr. Giacalone that Dr. Greene's prescribing patterns were egregious by any reasonable standard. Dr. Soin stated that Dr. Greene's actions in prescribing large amounts of controlled substances resulted in societal harm, even if that harm cannot be specifically identified. Dr. Soin favored permanent revocation of Dr. Greene's Ohio medical license.

Mr. Giacalone opined that if Dr. Greene had taken these actions in Ohio, the Board would permanently revoke his license. In addition to his previous comments on Dr. Greene's patients, Mr. Giacalone stated that one patient traveled two-and-a-half hours to see Dr. Greene, another patient crushed Dilaudid and injected it into his PICC line in the hospital, and another patient's insurance company sent Dr. Greene a letter regarding the patient's potential drug abuse. Mr. Giacalone stated that Dr. Greene destroyed people's lives and he should not be rewarded based on the actions taken by the Virginia Board. Mr. Giacalone opined that the Virginia Board should have permanently revoked Dr. Greene's Virginia medical license.

Mr. Kenney stated that in regards to patient safety, Dr. Greene's actions were egregious and he should not be practicing medicine. Mr. Kenney agreed with Mr. Giacalone that Dr. Greene's Ohio medical license should be permanently revoked. Mr. Giacalone added that Dr. Greene's actions continued over a long period of time, from 2010 to 2014.

Dr. Steinbergh stated that she considers the patient care of Patient A to be the worst in this matter. Dr. Steinbergh stated that Dr. Greene assessed Patient A's pharmacy profile which indicated that she had been prescribed controlled substances by 14 different prescribers in the preceding year. Dr. Greene failed to address this evidence of doctor shopping and prescribed Dilaudid and Morphine Sulfate Extended-Release (MSER). Patient A's medical records also showed that she was taking prenatal vitamins, which should have indicated to Dr. Greene that she was pregnant. At the time that Patient A gave birth she tested positive for marijuana, opiates, amphetamines, and a medication which had not been prescribed. Dr. Steinbergh opined that Dr. Greene's lack of vigilance in monitoring Patient A's narcotics usage put her infant at risk.

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

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

Mr. Kenney	- nay
Dr. Soin	- nay
Mr. Giacalone	- nay
Dr. Schachat	- abstain

The motion to amend did not carry

A vote was taken on Dr. Steinbergh's motion to approve the Hearing Examiner's Proposed Order:

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

Having failed to obtain six affirmative votes, the motion to approve did not pass.

Dr. Steinbergh voted to table this matter. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion to table carried.

ARIF HUSAIN HAKIM, M.D.

Mr. Kenney directed the Board's attention to the matter of Arif Husain Hakim, 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. Hakim. Five minutes will be allowed for that address.

Dr. Hakim asked for permission to read from a prepared statement. Mr. Kenney replied that Dr. Hakim may address the Board in any way he chooses. Dr. Hakim read the following statement:

The entire matter occurred in Michigan and Michigan authorities fully investigated and concluded that my mistakes were due to inexperience in this matter and unfamiliarity with the monitoring tools, and not due to ill intent. I accepted my responsibility. [The Michigan Board] imposed a fine and limited restriction on my license that allowed me to continue to practice in Michigan, even to prescribe all controlled substances in hospitals and Schedule III and below in office. Comparatively, the unaffected sister state of Ohio proposed to revoke even my inactive license. Nonetheless, the Michigan restrictions severely affected my practice as many insurances and institutions, by their bylaws, mandate unrestricted license. This matter did not involve Ohio, after all, hence it can't be the objective Board to punish me for it.

If [The Ohio Board] wants to sanction me to protect Ohio residents, then they are already fully protected. I have not practiced in Ohio for four years and gave up my license more than two years ago before any of this matter came up, and did not seek to reactivate it even when my Michigan license was at risk. I cannot activate my Ohio license by summary process without going through the full scrutiny of the Board who can then control any risk to Ohio by imposing a practice plan. A sanction at this time will not enhance protection to Ohio, but would serve only to destroy my practice and livelihood in Michigan by collateral damage and punishment for the same offense twice.

The Hearing Examiner has proposed to revoke my license for inexcusable failure to have adequate documentation of past medical history, options discussed with the patient at that time. This is totally based on allegations in the Michigan administrative complaint. These allegations were specifically in relation to controlled substances and not the general care of the patient, with the expert witness repeatedly acknowledge [sic] was above the norm. These are based on review of pre-selected [patient charts], a small fraction of my practice, and none of these were inpatients, and inpatient is 75% of my practice. Moreover, many deficiencies cited in the administrative complaint were based on uncaredful [sic] review of the medical records by the expert witness and had many errors that I could easily demonstrate from the medical record. There were many mitigating factors to this contention that are detailed in my formal objection.

These allegations were never proven by testimonials or cross-examination. The Michigan Board itself did not make much of it in the compliance conference. Main issue was my failure to monitor for abuse and diversion. Had I known this would be an issue for Ohio, I would have insisted on including my objections in the Consent Agreement. How can it be fair to impose such a harsh sanction based on unscrutinized and untested allegations? The Hearing Examiner did not even ask me to explain these alleged deficiencies in record-keeping, and yet she recommended revocation on this basis.

The state may claim that the proposed sanction is according to the Ohio guidelines and that no lesser sanction is available in this matter, or that the Board must follow the suggested recommendation by the Attorney General. As you earlier said, the Board is not obligated to impose this sanction because in the State Medical Board of Ohio memorandum to myself [sic] it states that the guidelines do not limit any sanction that the Board may impose and that the range of sanctions available in this matter extends from dismissal to permanent revocation. The Board can digress from the guidelines and impose no sanction, or other arrangements in the interest of fairness.

Your obligation is to protect OH residents and not to punish me for offenses in another state, especially since I have already been punished severely by the fact that the proposed sanction is much harsher than what affected the [Michigan Board] itself imposed and the sanction will not even enhance Ohio residents' protection. It will only unable [sic] me to practice even in Michigan, which the state of Michigan itself did not intend or want. You are basing this disciplinary action on Michigan consent agreement, then you should also give weight to the spirit of this consent agreement, which is that I do not deserve to have my license suspended or revoked. Michigan Deputy Attorney General and Chief of Board of Medicine reached this conclusion after two hours of face-to-face compliance conference with myself [sic]. Mitigating factors are considered by all courts for all offenses, even capital cases. You please must consider them in my case as well.

Dr. Hakim thanked the Board for allowing him to make his statement.

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 his recommendation at Dr. Hakim's hearing had been to mirror the conditions that had been imposed on his Michigan medical license. However, since Dr. Hakim has neither an active license nor a pending application for restoration of his expired license, the Board's legal options are permanent revocation, revocation, reprimand, or no further action. Mr. Wakley opined that reprimand and no further action are not appropriate in this case, and therefore the only appropriate option is non-permanent revocation of Dr. Hakim's expired Ohio medical license.

Dr. Steinbergh moved to approve and confirm Ms. Blue's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Arif Husain Hakim, M.D. Dr. Soin seconded the motion.

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

Dr. Ramprasad stated that the basis of the Board's proposed action is an Order issued by the Michigan Board of Medicine on October 8, 2013. The Michigan Order was due to a pattern of prescribing controlled substances without following applicable standards of practice, including documenting patient history pertaining to pain complaints, obtaining necessary prior records, documenting indications for high-risk

medications, and trying alternative medications. Dr. Hakim also continued prescribing to patients when presented with evidence of drug abuse or diversion. The Michigan Order limited Dr. Hakim's Michigan medical license for one year such that he cannot obtain, possess, prescribe, dispense, or administer and Schedule I or Schedule II medication unless it is prescribed or administered to him by a licensed physician as a patient. Dr. Hakim was also fined \$50,000.

Dr. Ramprasad continued that Dr. Hakim had testified that as a private solo practitioner, he took on prescribing pain medications out of concern for his patients' multiple points of care. However, Dr. Hakim lacked the adequate tools or knowledge to manage his pain patients. Dr. Hakim testified that since these events he has not prescribed pain medications and has no intention of doing so in the future.

Dr. Ramprasad noted that the Proposed Order is to revoke Dr. Hakim's expired Ohio medical license. Dr. Ramprasad stated that considering the Board's limited options in this matter, he favored reprimanding Dr. Hakim's license instead of revoking it. Dr. Ramprasad opined that the Board's sanction should not be more severe than that imposed by the Michigan Board. Dr. Ramprasad suggested that if Dr. Hakim applies for restoration of his Ohio license in the future and he meets licensure standards, his license should be limited to the practice of cardiology only. Dr. Ramprasad would also favor suspending Dr. Hakim's Ohio license until all restrictions on his Michigan license are lifted.

Dr. Steinbergh stated that Dr. Hakim has been compliant with his Michigan Order, has paid a substantial fine, and has completed continuing medication education in the area of pain management. Dr. Steinbergh stated that Dr. Hakim realizes that he made a mistake by stepping away from his specialty of cardiology and opined that he will not do that again. Dr. Steinbergh commented that revocation may have implications on Dr. Hakim's ability to become licensed in other states in the future. Dr. Steinbergh further commented that Dr. Hakim has excellent credentials in cardiology and opined that to remove Dr. Hakim from practice would be a waste. Dr. Steinbergh agreed with Dr. Ramprasad that Dr. Hakim's expired Ohio license should be reprimanded and any future license should be restricted to the practice of cardiology.

Ms. Anderson stated that since there is no pending application for restoration of Dr. Hakim's expired Ohio medical license, the Board is unable to place restrictions or limitations on any future license that Dr. Hakim may hold in Ohio; if Dr. Hakim applies to restore his Ohio license, then the Board at that time may place restrictions on the license or deny the application. At this time, the Board's options for discipline are limited to reprimand, revocation, or permanent revocation.

Mr. Giacalone reviewed some of Dr. Hakim's patient care as related in the Report and Recommendation. Patient M.C. was prescribed Vicodin, Soma, and Xanax despite the fact that M.C. had multiple prescribers and had failed a urine test. Dr. Hakim prescribed Lorcet and Soma to Patient J.S. without an adequately-documented history of pain complaints, without checking the Michigan Automated Prescription System (MAPS), and without obtaining a urine screen. Dr. Hakim prescribed Vicodin and Soma to Patient J.O. without checking MAPS and without obtaining a urine screen. Dr. Hakim prescribed Lorcet and Soma to Patient R.P. without checking MAPS, despite a history of IV drug abuse; these prescriptions occurred before Dr. Hakim documented that Patient R.P. had terminal cancer, a diagnosis that was not substantiated in the patient chart. Dr. Hakim continued to prescribe Vicodin and Soma to Patient L.S. after he had referred the patient to an orthopedic specialist, despite the fact that there is no record that Patient L.S.

actually went to the orthopedic specialist.

Mr. Giacalone noted Dr. Hakim's statement that his patients were elderly, disabled, inner-city patients who had been on controlled substances for many years and he was only continuing the prescriptions. The Michigan Board had found Dr. Hakim negligent in the care of 20% to 25% of his patients. Mr. Giacalone also noted the Hearing Examiner's statement: "However, the Hearing Examiner does not believe that this is a credible explanation for failing to document a past medical history of pain complaint, his medical rationale for selecting medications, and an assessment of the benefit/harm of various medications. Moreover, he failed to obtain prior medical records for his patients. There is no excuse for his conduct because it is fundamental to the practice of medicine."

Lastly, Mr. Giacalone opined that Dr. Hakim showed no remorse for his actions when he addressed the Board today. Rather, Mr. Giacalone felt that Dr. Hakim expressed indignation that the Ohio Board may take action in addition to the Michigan Board's action. Mr. Giacalone questioned whether Dr. Hakim should practice in Ohio given his history and the fact that one out of four of his patients had been adversely affected. Mr. Giacalone opined that a non-permanent revocation of Dr. Hakim's expired Ohio medical license is in order.

Dr. Ramprasad opined that, since the Ohio Board did not have an opportunity to investigate these matters itself, the Order should not supersede the Michigan Order. However, if the option is between a reprimand alone and a revocation, Dr. Ramprasad favored revocation because a reprimand alone does not seem right under these circumstances. Dr. Steinbergh agreed with Dr. Ramprasad that revocation is preferable to a simple reprimand in this matter. Dr. Steinbergh disagreed with Mr. Giacalone that Dr. Hakim's address to the Board today was indignant. Dr. Soin opined that Dr. Hakim's work had been sloppy and he made many mistakes. Dr. Soin stated that if Dr. Hakim does apply for restoration of his Ohio medical license in the future, he would not support that application.

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

The motion to approve carried.

NILESH B. JOBALIA, M.D.

Mr. Kenney directed the Board's attention to the matter of Nilesh B. Jobalia, 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. Jobalia. Five minutes will be allowed for that address.

Dr. Jobalia was represented by his attorney, Levi Tkach.

Mr. Tkach stated that this case is very different from most cases the Board sees in which a probationer has been non-compliant with a consent agreement. Mr. Tkach stated that the record shows that Dr. Jobalia worked very closely with Ms. Bickers, the Board's Compliance Supervisor, to find a replacement monitoring physician. Mr. Tkach stated that Dr. Jobalia was in full compliance with his Consent Agreement by the time of his hearing. Mr. Tkach supported the Proposed Order to extend Dr. Jobalia's probationary monitoring for an additional six months.

Dr. Jobalia stated that he had been out of compliance with his Consent Agreement because he did not have a monitoring physician for six months after his then-current monitoring physician moved to Florida. Dr. Jobalia stated that when he was made aware of this deficiency, he worked with Ms. Bickers and got a new monitoring physician approved by the Board. Dr. Jobalia stated that he takes his Consent Agreement very seriously and he will make sure he is compliant in the future.

Mr. Kenney asked if the Assistant Attorney General would like to respond. Mr. Wilcox stated that he did not wish to respond.

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

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

Dr. Soin stated that Dr. Jobalia is before the Board today because he failed to be supervised by a monitoring physician for a period of six months, in violation of his May 2009 Consent Agreement. In addition, Dr. Jobalia submitted two Declarations of Compliance during that time in which he failed to disclose that he did not have a monitoring physician. Dr. Jobalia subsequently found a new monitoring physician and he is currently in compliance with his Consent Agreement.

Dr. Soin opined that Dr. Jobalia is very lucky to be practicing medicine today. Dr. Soin opined that if Dr. Jobalia came before the current Board for the actions that had first brought him to the Board in 2009, he would almost certainly have had his medical license permanently revoked. Dr. Soin stated that the current Board does not take prescription drug abuse, diversion of medication, and physician/patient boundary issues the same as it did in 2009. Dr. Soin stated that the Board in 2009 gave Dr. Jobalia a second chance. Dr. Soin opined that Dr. Jobalia wasted that second chance by declaring that he was in compliance with his Consent Agreement when he was not.

Dr. Soin stated that he supports the Proposed Order to extend Dr. Jobalia's probationary term by six months, but stated that this now represents a third chance given to Dr. Jobalia. Dr. Soin stated if Dr. Jobalia appears before the Board again, even for the smallest infraction, he would support permanent

revocation of Dr. Jobalia's Ohio medical license. Mr. Kenney agreed with Dr. Soin's statements. Mr. Kenney stated that he had considered proposing a greater extension of Dr. Jobalia's probation by perhaps one or two years. However, Dr. Kenney opined that such a greater extension would not serve a purpose.

Dr. Steinbergh noted that at the Board's recent retreat, it had instructed the Board staff to develop new guidelines that would suspend the licenses of non-compliant probationers, rather than simply extending their probationary period. The process of developing the new guidelines is currently ongoing. Dr. Steinbergh noted that that discussion was in relation to impaired physicians who did not comply with drug testing requirements, rather than issues involving a monitoring physician as in Dr. Jobalia's case. However, Dr. Steinbergh stated that Dr. Jobalia's non-compliance was significant and asked the Board to consider suspending Dr. Jobalia's Ohio medical license for six months. Dr. Soin stated that he would strongly favor such a suspension. Dr. Soin stated that the fact that Dr. Jobalia submitted false declarations of compliance makes him wonder what else could be happening in Dr. Jobalia's practice.

Ms. Anderson reminded the Board that in making its determination in the matter of Dr. Jobalia, it is confined to the facts that are within the hearing record today. Mr. Kenney and Dr. Soin agreed.

Mr. Giacalone stated that when Dr. Jobalia's monitoring physician moved away, the onus was on Dr. Jobalia to get a new monitoring physician and to comply with that portion of his Consent Agreement. Mr. Giacalone acknowledged that Dr. Jobalia quickly corrected this situation when it was brought to his attention. Mr. Giacalone favored extending Dr. Jobalia's probationary term for an additional 30 days beyond the 180 days added by the Proposed Order, for a total of 210 additional days

Mr. Giacalone moved to amend the Proposed Order so that Dr. Jobalia may not request termination of his May 2009 Consent Agreement before March 8, 2017. Dr. Soin seconded the motion.

Mr. Kenney opined that adding an additional 30 days to the Proposed Order's extension of Dr. Jobalia's probationary period would not have a meaningful impact. Mr. Kenney stated that he favors the Proposed Order as written.

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

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

The motion to amend did not carry.

A vote was taken on Dr. Steinbergh's motion to approve and confirm Ms. Blue's Findings of Fact,

Conclusions of Law, and Proposed Order:

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

The motion to approve carried.

The Board recessed for lunch at 11:20 a.m. and returned at 12:25 p.m. Dr. Saferin was not present when the meeting resumed.

RICHARD ANTHONY GREENE, M.D.

Dr. Steinbergh moved to remove the matter of Richard Anthony Greene, M.D., from the table. Dr. Ramprasad seconded the motion. A vote was taken:

ROLL CALL:	Dr. Rothermel	- abstain
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Mr. Kenney	- aye
	Dr. Soin	- aye
	Mr. Giacalone	- aye
	Dr. Schachat	- aye

The motion to remove from the table carried.

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

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

Dr. Schachat stated that Dr. Greene's actions were medically inappropriate and harmful to others. Dr. Schachat stated that the question before the Board is whether Dr. Greene should never have an ability to regain his Ohio medical license, or if he should have a limited ability to obtain a limited license.

Dr. Saferin returned to the meeting at this time.

Dr. Schachat stated that he favored an action that would allow Dr. Greene to engage in other activities,

such as research, which Dr. Greene has expressed an interest in pursuing. Dr. Schachat stated that some research positions require a medical license even if the person is not engaging in the clinical practice of medicine. Dr. Schachat stated that permanently revoking Dr. Greene's Ohio medical license may compromise his ability to obtain such a position or to get another medical license. Dr. Schachat expressed a desire to craft an Order that would allow Dr. Greene to engage in such activity and still protect the public in Ohio.

Responding to questions from Dr. Steinbergh, Ms. Anderson stated that Dr. Greene's Ohio medical license lapsed in January 2015 due to non-renewal. Since there is no active license on which to impose a suspension or probationary terms, Ms. Anderson stated that the actions that the Board can take are limited to reprimand, revocation, permanent revocation, or no further action.

The Board continued to discuss this matter thoroughly. Dr. Steinbergh stated that the Virginia Board will allow Dr. Greene to reapply for a Virginia medical license. Dr. Ramprasad stated that the patient care in question did not occur in Ohio and opined that the Ohio Board's actions should not supersede that of the Virginia Board, where the care took place. Dr. Ramprasad opined that if the Ohio Board permanently revoked Dr. Greene's Ohio medical license, it is akin to dictating to another state board what it should be doing. Dr. Ramprasad also noted that as a bootstrap action, the Ohio Board did not have an opportunity to fully investigate this matter. Mr. Giacalone stated that the Ohio Board is not obligated to take a lenient stance just because another medical board did so.

Dr. Soin stated that Dr. Greene's inappropriate prescribing and the harm he did to society is indicative of sloppiness and poor physician work. Dr. Soin stated that he favors permanent revocation, even if it has consequences on Dr. Greene's ability to do research. Dr. Soin opined that Dr. Greene lost his right to be a research physician by his poor practice behavior.

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

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

The motion to approve did not carry.

Dr. Schachat moved to approve and confirm Ms. Blue's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Richard Anthony Greene, M.D. Dr. Soin seconded the motion.

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

Dr. Steinbergh moved to amend the Proposed Order to a non-permanent revocation of Dr. Greene's license to practice medicine in Ohio. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:	Dr. Rothermel	- abstain
	Dr. Saferin	- abstain
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Mr. Kenney	- aye
	Dr. Soin	- aye
	Mr. Giacalone	- aye
	Dr. Schachat	- 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 Richard Anthony Greene, 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. Kenney	- aye
	Dr. Soin	- aye
	Mr. Giacalone	- aye
	Dr. Schachat	- aye

The motion to approve carried.

POORNANAND PALAPARTY, M.D.

Mr. Kenney directed the Board's attention to the matter of Poornanand Palaparty, M.D. No objections have been filed. Mr. Porter was the Hearing Examiner.

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

Dr. Palaparty was represented by his attorney, Susan Scheutzow.

Ms. Scheutzow stated that Dr. Palaparty is one of the physicians who had pleaded guilty to a misdemeanor charge of misbranding drugs which had been purchased from outside the United States. As the Board had already heard the cases of the other physicians, Ms. Scheutzow did not want to reiterate those same facts today. However, Ms. Scheutzow did want to note some things that were particular to Dr. Palaparty's case.

Ms. Scheutzow stated that as soon as Dr. Palaparty learned of the illegality of his actions, he ceased immediately and fully cooperated with investigators. Dr. Palaparty admits that he received notices from the Food and Drug Administration (FDA) and that he read the notices. Ms. Scheutzow stated that the notices received by Dr. Palaparty said either “No further action is required on your part” or “This notice does not in any manner accuse you of violating the law.” Rather than seek an attorney for advice, Dr. Palaparty had his office contact the company. In response, the company said that the notices were routine and sent Dr. Palaparty a new shipment of medications. Dr. Palaparty acknowledges that he should have consulted an attorney about the FDA notices.

Ms. Scheutzow continued that following these events, Dr. Palaparty realized that he did not want to run a practice and only wanted to practice medicine. Dr. Palaparty took employment with St. Vincent Charity Hospital and intends to maintain this employment until he retires. Ms. Scheutzow stated that St. Vincent Charity Hospital now manages Dr. Palaparty’s practice, including ordering oncology drugs. Ms. Scheutzow noted that David Perse, M.D., the President of St. Vincent Charity Hospital, wants Dr. Palaparty to continue practicing medicine.

Ms. Scheutzow stated that any suspension of Dr. Palaparty’s Ohio medical license would be a hardship, even if the suspension is stayed. Ms. Scheutzow stated that Dr. Palaparty has already appealed all the denials from insurance companies and gotten himself reinstated with them; a suspension would trigger that process with the insurance companies again. Ms. Scheutzow respectfully requested that the Board issue a reprimand in this matter.

Dr. Palaparty stated that he sincerely apologizes for his actions. As noted by Ms. Scheutzow, Dr. Palaparty did not seek legal counsel when we received the FDA notices. Dr. Palaparty stated that since these events, he has served one-year of probation and paid restitution. Dr. Palaparty stated that he has taken a course in bioethics and has come to understand the boundaries between professionalism and ethics. Dr. Palaparty stated that he will not purchase medications in the future and he only wants to take care of his patients and continue teaching residents and medical students.

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. Palaparty’s case is unique because he admits that he received the FDA retainer notices. Mr. Wakley stated that each of the FDA notices stating that his shipment of drugs was detained at the border should have indicated to Dr. Palaparty that something was wrong. Mr. Wakley stated that the FDA notices stated that what Dr. Palaparty ordered did not appear to be legal; this should have prompted more than just a call to the company to get a new shipment.

Mr. Wakley opined that in light of Dr. Palaparty’s honesty, his sanction should be less than what had been imposed on Dr. Massouh, but should still warrant a suspension. Mr. Wakley suggested that a 30-day suspension of Dr. Palaparty’s medical license, not stayed, would be appropriate.

Dr. Steinbergh moved to approve and confirm Mr. Porter’s Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Poornanand Palaparty, M.D. Dr. Sojin seconded the motion.

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

Dr. Steinbergh briefly reviewed Dr. Palaparty's career.

Mr. Gonidakis entered the meeting at this time.

Dr. Steinbergh stated that on August 13, 2013, Dr. Palaparty was charged in U.S. District Court with purchasing and receiving oncology drugs from a foreign-based drug distributor located in Canada between 2004 and 2009. These drugs originated outside the United States and were never approved by the FDA. The drugs were misbranded for lacking adequate directions for use. In September 2013, Dr. Palaparty entered into a plea agreement and pleaded guilty to one count of misbranding, a Class A misdemeanor. Dr. Palaparty was sentenced to one year of probation and was ordered to pay restitution to Medicare and Medicaid in the amount of \$128,160. Dr. Palaparty testified that he pleaded guilty because he knows that "ignorance of the law is not an excuse." Dr. Steinbergh stated that Dr. Palaparty has served his probation and had paid restitution in full. As a result of the misdemeanor conviction, Dr. Palaparty's privileges in hospitals were suspended and he was dropped from private insurance plans, as well as Medicare and Medicaid. Dr. Palaparty testified that he has since regained his hospital privileges and has been reinstated to Medicare, Medicaid, and most private insurance plans.

Dr. Steinbergh continued that, according to his testimony, Dr. Palaparty had not known that the medications he had been receiving were not FDA-approved until FDA agents visited his office in 2009. Dr. Palaparty testified that when he asked the FDA agents what he should do with the remainder of his medications, he was told that he could use them but to not order any more. Dr. Palaparty is now employed by Cuyahoga Physician Network and he no longer orders prescription drugs. In September 2014, Dr. Palaparty proactively attended the *Intensive Course in Medical Ethics, Boundaries, and Professionalism*, which the Proposed Order will require if it is accepted by the Board.

Dr. Steinbergh stated that she agreed with the Findings of Fact and Conclusions of Law in the Proposed Order. Dr. Steinbergh also agreed with the Hearing Examiner's Rationale for the Proposed Order, except that Dr. Steinbergh felt that Dr. Palaparty has already paid the price for his actions. Specifically, Dr. Steinbergh stated that Dr. Palaparty had been suspended from Medicare, Medicaid, and private insurances, lost his privileges at hospitals, and paid a significant restitution. Dr. Steinbergh stated that because there is no evidence of patient harm in this case and because Dr. Palaparty has already taken the educational course the Proposed Order would require, she favored a reprimand in this matter.

Dr. Steinbergh moved to amend the Proposed Order to a reprimand of Dr. Palaparty. Dr. Schachat seconded the motion.

Mr. Kenney asked whether Mr. Gonidakis had received, read and considered the hearing records, the Findings of Fact, Conclusions of Law, Proposed Orders, and any objections filed in the matter of Poornanand Palaparty, M.D. Mr. Gonidakis answered affirmatively. Mr. Kenney asked whether Mr. Gonidakis understands that the disciplinary guidelines do not limit any sanction to be imposed, and that the range of sanctions available in each matter runs from dismissal to permanent revocation. Mr. Gonidakis

answered affirmatively.

Mr. Giacalone compared the matter of Dr. Palaparty to that of Dr. Massouh, who was recently suspended by the Board for 60 days based on similar circumstances. Mr. Giacalone stated that the FDA notices received by Dr. Palaparty and Dr. Massouh were almost identical and specifically stated that their respective products were misbranded and were detained at the border. Mr. Giacalone stated that Dr. Palaparty received much more of the misbranded product because he began receiving it two years earlier than Dr. Massouh. Mr. Giacalone stated that Dr. Massouh had testified that he never saw the FDA notice until his criminal trial, whereas Dr. Palaparty stated that he received the notices and read them.

Mr. Giacalone noted Dr. Palaparty's testimony that FDA agents had told him he could use the remainder of his misbranded medications as long as he did not order more. Mr. Giacalone opined that an FDA agent would never tell someone they could use a misbranded or adulterated product whose origin and distribution channel was unknown and which could have been counterfeit medication.

Mr. Giacalone asked how Dr. Palaparty could receive a reprimand when Dr. Massouh, whose case was in some respects less egregious than Dr. Palaparty's, received a 60-day suspension. Dr. Steinbergh stated that she finds reprimand acceptable in the case of Dr. Palaparty for the reasons outlined by his attorney and by the Hearing Examiner, namely that he has already paid a steep penalty for his actions. Dr. Ramprasad added that Dr. Massouh had lied about never receiving the FDA notices, whereas Dr. Palaparty admitted to receiving the notices. Dr. Ramprasad stated that there are many reasons why a physician, who may not be a good businessman, would believe that medications from Canada were the same as medications from the United States. Dr. Ramprasad stated that the FDA notices received by Dr. Palaparty did not specifically say that what he was doing was illegal, only that the medications had been impounded.

Dr. Soin opined that a reprimand would be too lenient in the matter of Dr. Palaparty. Dr. Soin appreciated Dr. Palaparty's attitude and his taking ownership of the situation, but he still did something egregiously wrong for critically ill patients. Dr. Soin opined that Dr. Palaparty's case and those similar to it resulted from a desire to profit. Dr. Soin noted that in all these cases the physician owned their practice and therefore they benefited financially by purchasing cheaper medications that had not been approved by the FDA. Dr. Soin opined that if a physician chooses to run their own practice, it is their responsibility to ensure that they are purchasing medications legally. Dr. Soin favored the Proposed Order of a stayed 30-day suspension with probationary terms.

Mr. Giacalone stated that the laws requiring FDA approval are designed to protect patients from, among other things, unsafe or misrepresented foods and drugs. Mr. Giacalone stated that the FDA approval process ensures that medications are what they purport to be and that the supply chain is proper. Mr. Giacalone noted that the FDA notice received by Dr. Palaparty indicates that the medications he ordered appear to be an unapproved new drug. Dr. Steinbergh stated that Mr. Giacalone, as a pharmacist, has a much better understanding of the drug approval process than most physicians do.

Dr. Steinbergh stated that the purpose of the Medical Board is to protect the public. Dr. Steinbergh stated that in this case the public has already been protected by the courts and by the actions of Dr. Palaparty, who has removed himself from the business of ordering medications. Dr. Steinbergh stated that besides

this mistake, all indications are that Dr. Palaparty is a fine physician. Dr. Steinbergh did not see the purpose of a suspension of Dr. Palaparty's medical license.

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

ROLL CALL:	Dr. Rothermel	- abstain
	Dr. Saferin	- abstain
	Dr. Ramprasad	- aye
	Dr. Steinbergh	- aye
	Mr. Kenney	- aye
	Dr. Soin	- nay
	Mr. Gonidakis	- nay
	Mr. Giacalone	- nay
	Dr. Schachat	- 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 Poornanand Palaparty, M.D. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion to approve, lacking six affirmative votes, did not carry.

Dr. Steinbergh moved to table the matter of Dr. Palaparty. Mr. Giacalone seconded the motion. A vote was taken:

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

Dr. Schachat - aye

The motion to table carried.

ADDITIONAL APPLICANT FOR LICENSURE

Dr. Steinbergh moved to approve for licensure, contingent upon all requested documents being received and approved in accordance with licensure protocols, the physician applicant listed in Exhibit "F." Dr. Saferin seconded the motion. A vote was taken:

ROLL CALL:

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

The motion carried.

FINDINGS, ORDERS, AND JOURNAL ENTRIES

Mr. Kenney stated that in the following matters, the Board issued Notices of Opportunity for Hearing, and documentation of Service was received for each. There were no requests for hearing filed, and more than 30 days have elapsed since the mailing of the notices. The matters are therefore before the Board for final disposition. These matters are non-disciplinary, and therefore all Board members may vote.

MICHELLE GAIL PAVEL, M.T.

Dr. Steinbergh moved to find that the allegations set forth in the March 3, 2015 Notice of Opportunity for Hearing have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective immediately upon mailing, granting Ms. Pavel's application for restoration, provided that she takes and passes the Massage and Bodywork Licensing Examination within six months of March 3, 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. Kenney	- aye
Dr. Soin	- aye
Mr. Gonidakis	- aye

Mr. Giacalone - aye
Dr. Schachat - aye

The motion carried.

JAY RONALD ROWES, M.D.

Dr. Saferin moved to find that the allegations set forth in the March 3, 2015 Notice of Opportunity for Hearing have been proven to be true by a preponderance of the evidence, and that the Board enter an Order, effective immediately upon mailing, granting Dr. Rowes' application for licensure; limiting such license to the practice of administrative, non-clinical medicine and participation in a Board-approved preceptorship; and to remove the limitation upon Dr. Rowes' submission of documentation from the preceptor that he has successfully completed the preceptorship, and documentation that he has successfully recertified his American Board of Ophthalmology certification. Dr. Steinbergh seconded the motion. A vote was taken:

ROLL CALL:

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

The motion carried.

EXECUTIVE SESSION

Dr. Steinbergh moved to go into Executive Session to confer with the Medical Board's attorneys 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. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

Dr. Rothermel	- aye
Dr. Saferin	- aye
Dr. Ramprasad	- aye
Dr. Steinbergh	- aye
Mr. Kenney	- aye
Dr. Soin	- aye
Mr. Gonidakis	- aye
Mr. Giacalone	- aye
Dr. Schachat	- 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. Schmidt, Mr. Katko, Ms. Marshall, the Enforcement Attorneys, the Assistant Attorneys General, Ms. Bickers, Ms. Jones, Ms. Schwartz, and Mr. Taylor in attendance.

The Board returned to public session.

RATIFICATION OF SETTLEMENT AGREEMENTS

DAVID O'CONNELL, M.D. – STEP II CONSENT AGREEMENT

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

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

The motion to ratify carried.

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

Dr. Steinbergh moved to ratify the Proposed Step II 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. Kenney	- aye
	Dr. Soin	- aye
	Mr. Gonidakis	- aye
	Mr. Giacalone	- aye
	Dr. Schachat	- aye

The motion to ratify carried.

JEROME DAVID HOMISH, D.O. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE
OSTEOPATHIC MEDICINE AND SURGERY

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

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

The motion to ratify carried.

LAWRENCE DAVID MASON, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO
PRACTICE MEDICINE AND SURGERY AND PERMANENT WITHDRAWAL OF APPLICATION
FOR LICENSURE RESTORATION

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

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

The motion to ratify carried.

RANDALL GREGORY WHITLOCK, JR, P.A. – ADDENDUM TO PRIOR STEP II CONSENT
AGREEMENT

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

ROLL CALL:

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

The motion to ratify carried.

RICHARD S. SKOBLAR, M.D. – PERMANENT SURRENDER OF CERTIFICATE TO PRACTICE
MEDICINE AND SURGERY

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

ROLL CALL:

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

The motion to ratify carried.

SUMAN C. VELLANKI, M.D. – STEP I CONSENT AGREEMENT

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

ROLL CALL:

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

Dr. Schachat - aye

The motion to ratify carried.

AMANDA S. CONN, M.T. – CONSENT AGREEMENT

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

ROLL CALL:

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

The motion to ratify carried.

DAVID JAY FISHMAN, M.D. – CONSENT AGREEMENT

Dr. Steinbergh moved to ratify the Proposed Consent Agreement with Dr. Fishman. Dr. Soin seconded the motion. A vote was taken:

ROLL CALL:

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

The motion to ratify carried.

ADAM MAIER, D.O. – CONSENT AGREEMENT

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

ROLL CALL:

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

The motion to ratify carried.

JESSE MICHAEL EWALD, M.D. – STEP I CONSENT AGREEMENT

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

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

The motion to ratify carried.

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

FONDA LYNN BLACKER – 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. Blacker. Dr. Soin seconded the motion. A vote was taken:

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

Dr. Soin	- aye
Mr. Gonidakis	- aye
Mr. Giacalone	- aye
Dr. Schachat	- aye

The motion to send carried.

JOSEPH CLAUDE CARVER, 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. Carver. Dr. Soin seconded the motion. A vote was taken:

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

The motion to send carried.

ANITA CHRISTINE DEPLANTY – 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. Deplanty. Dr. Soin seconded the motion. A vote was taken:

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

The motion to send carried.

BERNARD DESILVA, 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. DeSilva. Dr. Soin seconded the motion. A vote was taken:

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

The motion to send carried.

DEBORAH S. LUBITZ, 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. Lubitz. Dr. Soin seconded the motion. A vote was taken:

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

The motion to send carried.

JAMES THOMAS LUTZ, 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. Lutz. Dr. Soin seconded the motion. A vote was taken:

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

The motion to send carried.

WALEED NASR MANSOUR, 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. Mansour. Dr. Soin seconded the motion. A vote was taken:

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

The motion to send carried.

JUDITH ANN MARIOTTI-BOYER – 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. Mariotti-Boyer. Dr. Soin seconded the motion. A vote was taken:

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

The motion to send carried.

ARMAND LOUIS MINOTTI, D.O. – CITATION LETTER

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

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

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

The motion to send carried.

TERRANCE DASHAWN ROQUEMORE – 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. Roquemore. Dr. Soin seconded the motion. A vote was taken:

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

The motion to send carried.

CHRISTOPHER A. STEGAWSKI, 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. Stegawski. Dr. Soin seconded the motion. A vote was taken:

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

The motion to send carried.

PATRICIA JOANNE WARDROP, 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. Wardrop. Dr. Soin seconded the motion. A vote was taken:

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

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

The motion to send carried.

PAUL W. WILSON, D.O. – CITATION LETTER

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

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

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

The motion to send carried.

NATHAN BUCHANAN FRANTZ, D.O. – NOTICE OF SUMMARY SUSPENSION AND OPPORTUNITY FOR HEARING

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

Dr. Steinbergh moved to enter an Order of Summary Suspension in the matter of Nathan Buchanan Frantz, D.O., in accordance with Section 4731.22(G), Ohio Revised Code, and to issue the Notice of Summary Suspension and Opportunity for Hearing. Dr. Ramprasad seconded the motion. A vote was taken:

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

Dr. Soin	- aye
Mr. Gonidakis	- aye
Mr. Giacalone	- aye
Dr. Schachat	- aye

The motion carried.

REPORTS AND RECOMMENDATIONS

POORNANAND PALAPARTY, M.D.

Dr. Steinbergh moved to remove the topic of Poornanand Palaparty, 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. Kenney	- aye
	Dr. Soin	- aye
	Mr. Gonidakis	- aye
	Mr. Giacalone	- aye
	Dr. Schachat	- aye

The motion to remove from the table carried.

Dr. Steinbergh moved to approve and confirm Mr. Porter's Findings of Fact, Conclusions of Law, and Proposed Order in the matter of Poornanand Palaparty, M.D. Mr. Gonidakis seconded the motion. A vote was taken:

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

The motion to approve carried.

OPERATIONS REPORT

Human Resources: Mr. Groeber stated that the hiring process for the position of Attorney 2 continues and that position may be filled by the next Board meeting. The Attorney 4 position is now posted externally. Mr. Groeber stated that a candidate for the Chief of Investigations position is being reviewed and the two Investigator Supervisor positions are pending. Mr. Groeber stated that David Fais has been hired as a new Deputy Director and will begin on May 18. Interviews are being scheduled to fill the position of Project Manager 1.

Budget: Mr. Groeber stated that the Board's finances continue to improve. The Board's cash balance is now \$4,342,000, an increase from this time last year.

Information Technology: Mr. Groeber stated that the Board is currently working through the pilot of the E-Licensure 2.0 system, which is being used to process new licenses and renewals for massage therapists. Mr. Groeber stated that the process has gone very well so far and additional licensure modules and an enforcement module will hopefully be implemented in the next few months.

Mr. Groeber stated that the phone system is being closely examined to close the loops in places where calls could be dropped.

Communications and Outreach: Mr. Groeber stated that a large number of meetings and presentations have taken place over the last month, most notably the Federation of State Medical Boards (FSMB) Annual Meeting which was attended by some Board members and staff. Staff members also attended the Ohio Osteopathic Association (OOA) Annual Meeting. Mr. Groeber noted that Ms. Anderson received an award from the Academy of Medical of Cleveland and Northern Ohio (AMCNO).

Mr. Groeber stated that the number of presentations given by the Board takes significant amounts of time, and therefore other technological methods to deliver some presentations are being explored without sacrificing the integrity of the Board's message.

Agency Operations: Mr. Groeber referred to a flow chart indicating the Board's operational flow. Mr. Groeber noted that licensure continues to do well. Mr. Groeber stated that Mr. Miller, Mr. Alderson, and Ms. Scott continue to explore ways to obtain information as early in the licensure process as possible.

Dr. Ramprasad noted that the Compliance Section has seen a significant increase in the number of relapses among probationers. Dr. Ramprasad asked if this increase is based on the use of a new test. Ms. Bickers replied that the Board has increased its use of the Phosphatidylethanol (PEth) test, which can pick up alcohol at smaller dosages over a longer period of time. The Board engaged in a brief discussion of the Board's drug testing process, the various tests that are available, and the reason for using certain tests in a given situation.

Mr. Groeber stated that there has been a further 1.8% reduction in complaints thanks to the staff's efforts to resolve older complaints. Mr. Groeber stated that the Enforcement Section has seen a 100% increase in the number of assigned complaints as a result of assigning older complaints, which should prove to be

temporary; the Investigations Section has seen a similar phenomenon. Mr. Groeber stated that this is part of an overall improvement in the process. Mr. Groeber stated that he is working with Mr. Porter on getting more hearing examiners under contract to help with the increased caseload.

Dr. Ramprasad exited the meeting at this time.

Speed and Ease Initiative: Mr. Groeber stated that the staff is working on the acknowledgement and close letters that the Board sends out in order to make them more transparent regarding the Board's process. There are also plans to develop materials for investigations to provide to licensees, as well as standard material that the investigators can reference. Mr. Groeber stated that the concept of a "Large Case Team" is being developed in order to better coordinate efforts in investigating and managing cases that are expected to take a great deal of time and resources.

Dr. Rothermel exited the meeting at this time.

RULES AND POLICIES

RULES FOR APPROVAL FOR JCARR FILING

Dr. Steinbergh moved to approve the following proposed, amended, and rescinded rules for formal filing with the Joint Committee for Agency Rule Review (JCARR):

- **4730-1-06.1 (military provisions related to certificate to practice as a physician assistant)**
- **4731-6-35 (processing applications from service members, veterans, or spouses of service members or veterans)**
- **4731-24-05 (military provisions related to certificate to practice as an anesthesiologist assistant)**
- **4762-1-01 (military provisions related to certificate to practice acupuncture or oriental medicine)**
- **4774-1-02.1 (military provisions related to certificate to practice as a radiologist assistant)**
- **4778-1-02.1 (military provisions related to certificate to practice as a genetic counselor)**
- **4731-9-01 (record of board meetings; recordings, filming, and photographing of meetings)**
- **4731-11-02 (general provisions for prescribing controlled substances)**
- **4731-11-03 (utilization of anabolic steroids, Schedule II controlled substance cocaine hydrochloride, and Schedule II controlled substance stimulants)**
- **4731-11-04 (utilization of short term anorexiant for weight reduction)**
- **4731-11-04.1 (utilization of controlled substances for chronic weight management)**
- **4731-11-05 (use of drugs to enhance athletic ability)**
- **4731-11-07 (research utilizing controlled substances).**

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

ROLL CALL:	Dr. Saferin	- aye
	Dr. Steinbergh	- aye
	Mr. Kenney	- aye

Dr. Soin	- aye
Mr. Gonidakis	- aye
Mr. Giacalone	- nay
Dr. Schachat	- aye

The motion to approve carried.

Dr. Ramprasad returned to the meeting at this time.

REPORTS BY ASSIGNED COMMITTEES

POLICY COMMITTEE

PROPOSED AMENDMENTS TO RULES

RULE 4731-11-09, PRESCRIBING TO PATIENTS NOT SEEN

Ms. Debolt reviewed some clarifying changes in the language of proposed Rule 4731-11-09, based on comments received from interested parties.

Dr. Rothermel returned to the meeting at this time.

Dr. Saferin moved to approve Rule 4731-11-09 for filing with the Common Sense Initiative Office. Dr. Steinbergh seconded the motion. A vote was taken:

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

The motion to approve carried.

RULE 4731-11-11, OARRS

Ms. Anderson reviewed the draft of proposed Rule 4731-11-11 as approved by the Policy Committee, including the addition of eight red flags that will require a check of the Ohio Automated Rx Reporting System (OARRS). The red flags added to the draft Rule are:

- a known history of chemical abuse or dependence

- appearing impaired or over-sedated during an office visit or examination
- requesting reported drugs by street name, color, or identifying marks
- frequently requesting early refills of reported drugs
- frequently losing prescriptions for reported drugs
- history of illegal drug use
- sharing reported drugs with another person
- recurring visits to non-coordinated sites of care such as emergency departments, urgent care facilities, or walk-in clinics

Dr. Saferin moved to approve Rule 4731-11-11 for filing with the Common Sense Initiative Office. Dr. Steinberg seconded the motion. A vote was taken:

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

The motion to approve carried.

YOUTH SPORTS CONCUSSION AND HEAD INJURY RETURN-TO-PLAY GUIDELINES COMMITTEE REPORT

Ms. Anderson stated that the Board is required by statute to adopt rules in response to the report of the Youth Sports Concussion and Head Injury Return-to-Play Guidelines Committee (Concussion Committee). The Board's rule must be equal to or more stringent than the Concussion Committee's recommendations. The proposed rule simply states that all licensed allopathic and osteopathic physicians are qualified to clear athletes who have had concussions for return to practice or play and that the physicians will follow the Zurich guidelines that were referenced in the Concussion Committee's report. The rule will also require the physician to use a model form. The Rule must be in place by September 14, 2015.

Dr. Schachat expressed concern because the Board does not have any other rule in which the details of care are specified. Dr. Schachat also found the proposed rule to be ambiguous. Dr. Schachat stated that according to the British Journal of Sports Medicine, the Zurich guidelines resulted from a consensus process, which is the weakest evidence. Further, the authors acknowledge that the science of concussion is evolving and the management of return-to-play decisions remains in the realm of clinical judgment on an individualized basis. Dr. Schachat interpreted this to mean that a physician can follow the guidelines or not. Dr. Schachat stated that as long as it is understood that one does not have to follow the Zurich guidelines, then he is supportive of the rule.

Dr. Rothermel, who served on the Concussion Committee, stated that the Committee carefully considered which guidelines should be referenced. The Committee ultimately chose to recognize the Zurich guidelines or other nationally-recognized return-to-play guidelines that are consistent with the Zurich statement. Dr. Rothermel stated that the Zurich guidelines were chosen in order to provide some consistency with certain groups of chiropractors who will also be able to clear athletes for return to practice or play. Dr. Rothermel noted that all licensed physicians will be able to make such determinations without regard to specialty. Dr. Rothermel further noted that physicians will not have to take concussion-specific continuing medical education (CME), though such CME's are recommended.

Dr. Steinbergh moved to approve the filing of the Rule. Dr. Saferin seconded the motion. A vote was taken:

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

The motion to approve carried.

JOINT REGULATORY STATEMENT ON USE OF PROTOCOLS TO INITIATE OR ADJUST MEDICATIONS

Ms. Anderson stated that this Joint Regulatory Statement has been modified to address recent rule changes made by the Board of Pharmacy.

Dr. Steinbergh moved to approve the amendments to the Joint Regulatory Statement on Use of Protocols to Initiate or Adjust Medications. Dr. Saferin seconded the motion. A vote was taken:

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

The motion to approve carried.

INTERSTATE COMPACT

Ms. Anderson stated that information was provided to the Policy Committee regarding the Interstate Licensure Compact, a project of the Federation of State Medical Boards (FSMB). So far, six states have adopted the compact. Ms. Anderson stated that that staff continues to have several concerns about whether adopting the Compact would be good for Ohio or Ohio physicians. Ms. Anderson stated that the Compact becomes operational when the seventh state adopts it and there are currently 15 states considering the Compact. Ms. Anderson stated that if Ohio's neighboring states adopt the Compact, it may raise questions that the Board must address.

Dr. Steinbergh asked if the Board should take a definitive stand either approving or disapproving the Interstate Compact so that its position is known. Dr. Steinbergh expressed concern that without taking a clear stand, outside groups could reach out to legislators and introduce legislation requiring Ohio to join the Compact.

The Board discussed this matter thoroughly. Mr. Kenney stated that many other state medical boards look to Ohio for direction and choosing to not participate in the Compact may make other boards realize they should not feel pressure to either. Mr. Groeber recommended having the staff draft a letter taking a position on the current model for the Policy Committee's review next month.

UPDATE ON ONE-BITE REPORTING EXEMPTION

Ms. Anderson stated that the Board members have been provided with an outline of the proposed update to the one-bite reporting exemption, which resulted from a meeting that Mr. Gonidakis, Dr. Rothermel, and members of the staff had with the Ohio Physician's Health Program and Justice Stratton.

CORONER'S PROTOCOL FOR OVERDOSE DEATHS

Dr. Soin stated that the Medical Board is working on a protocol to provide consistency in how coroners handle deaths from drug overdose. Dr. Soin stated that the protocol will also deal with the fact that some coroners in rural areas may not have necessary access or funding.

LEGISLATIVE UPDATE

House Bill 40, Fining Authority Legislation: Mr. LaCross stated that Senator Jones indicates that House Bill 40 will not be acted upon until the State Budget bill is resolved. Mr. LaCross noted that the fining authority language is also currently included in the Budget, and therefore passage House Bill 40 may not be necessary.

Podiatric Licensure Bill: Mr. LaCross stated that Representative Schuring has submitted this bill for sponsor requests and it will hopefully move forward following the legislature's summer break.

Senate Bill 55, Physician Assistant Law: Mr. LaCross stated that the language of Senate Bill 55 has been amended into Senate Bill 110. Mr. LaCross stated that he is working with Dr. Steinbergh on some concerns she has with the bill's language. Mr. LaCross has also reached out to the Ohio Physician Assistants Association regarding the bill.

Expedited Partner Therapy Bill: Mr. LaCross stated that the Expedited Partner Therapy (EPT) bill has been passed out of committee and will proceed to the House floor.

House Bill 64, Operating Budget: Mr. LaCross stated that the Operating Budget bill contains language regarding telemedicine which the Board has great concerns about. This language would supersede the Board's rules and would allow for the prescription of antibiotics after an examination by telephone without the use of diagnostic medical equipment. Mr. LaCross stated that he and Dr. Saferin met with Representative Sears, who seemed open to the Board's ideas. However, Mr. LaCross stated that many see this as an access-to-care issue. Dr. Steinbergh stated that the true issue in this matter should be access to appropriate care, noting that not all care is appropriate. Dr. Rothermel agreed with Dr. Steinbergh, particularly in these times when there is a significant effort to encourage physicians to use fewer antibiotics. Mr. LaCross commented that the language in its current form does not represent access to care, but rather access to quick drugs which will exacerbate the state's antibiotics problem.

Mr. LaCross stated that House Bill 64 also contains a requirement for physicians to report felony drug use or possession. There is concern that such a requirement may discourage people from going to a doctor or seeking treatment for drug addiction.

Duplicate Certificate Wallet Card: Mr. LaCross stated that Senator Coley will sponsor the bill to authorize the Medical Board to remove duplicate certificates. Mr. LaCross stated that Cincinnati Children's Hospital has aided the Medical Board in this effort and that hospital systems have been very supportive.

Dr. Steinbergh noted that some physicians would still like to have a wallet card so that they can identify themselves as physicians in an emergency or in a pharmacy. Mr. LaCross stated that there has been discussion of possibly providing something to physicians which they can print out and keep with them similar to a wallet card. Overall, however, physician's license status will be confirmed on the Board's website.

House Bill 184, Music Therapist Licensure: Mr. LaCross stated that Representatives Dovilla and Antonio have introduced a bill that will require the Medical Board to license music therapists. Mr. LaCross stated that the Medical Board is essentially a "placeholder" board in this legislation and efforts are underway to identify another licensing board that would be more appropriate for music therapists.

Surgical Technicians: Mr. LaCross stated that discussions have begun on legislation to have surgical technicians licensed by the Medical Board, and idea that the members of the Medical Board have been open to. Mr. LaCross speculated that the licensing of surgical technicians may be about one year away.

Marijuana: Dr. Steinbergh stated more than one physician has discussed with her the concept of the

Medical Board taking a stand on the issue of the social use of marijuana, as differentiated from medicinal use. Mr. LaCross stated that the Board staff has done some research on this topic and the Governor's office is working with various state agencies to develop a clear and concise position.

PHYSICIAN ASSISTANT/SCOPE OF PRACTICE COMMITTEE REPORT

PROVISIONAL CERTIFICATE TO PRACTICE APPLICATION REVIEW

KISHWER FAIZ, P.A.-C

Dr. Steinbergh moved to approve Ms. Faiz's application for a Provisional Certificate to Prescribe, based upon her completing a course of study clinically relevant to the practice of physician assistants. Dr. Saferin seconded the motion. A vote was taken:

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

The motion to approve carried.

LICENSURE COMMITTEE

LICENSURE APPLICATION REVIEWS

HILARY ESTELLA GODFREY, M.T.

Dr. Saferin moved to approve Ms. Godfrey's request for restoration of her license to practice massage therapy in Ohio, pending successful completion of the Massage and Bodywork Licensing Examination (MBLEX). Dr. Steinbergh seconded the motion. A vote was taken:

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

Dr. Schachat - aye

The motion carried.

LAURA RACHEL MCGUINNESS MAY, M.T.

Dr. Saferin moved to approve Ms. May's request for restoration of her license to practice massage therapy in Ohio, pending successful completion of the Massage and Bodywork Licensing Examination (MBLEX). Dr. Steinbergh seconded the motion. A vote was taken:

ROLL CALL:

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

The motion carried.

RICHARD JOHN WOOD, M.D.

Dr. Saferin moved to approve Dr. Wood's request to deem his training and experience in South Africa and the United Kingdom and his almost 12 months of PGY training in the United States to be equivalent to the 24 months of graduate medical education through the second-year level of graduate medical education so that the may be granted a license. Dr. Steinbergh seconded the motion. A vote was taken:

ROLL CALL:

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

The motion carried.

PROPOSED CHANGES TO CONTINUING MEDICAL EDUCATION REQUIREMENTS

Dr. Saferin stated that the Board's renewal staff has been evaluating Continuing Medical Education (CME) requirements to ensure that the Board can accurately and thoroughly verify the completion of CME hours. Dr. Saferin briefly explained that CME is divided into two categories: Category 1 CME's can only be awarded by organizations or providers accredited by the Accreditation Council for Continuing Medical Education or recognized state medical societies; Category 2 CME's are less structured activities that may include reading medical literature and self-assessment activities.

Dr. Saferin stated that Ohio currently requires physicians to complete 100 hours of CME every two years consisting of 40 Category 1 hours and 60 Category 2 hours. Staff research shows that the median total hours required by other states in a two-year period is 50 hours of CME. It was also found that only eight states specifically require Category 2 CME hours.

In an effort to ensure that all CME hours are verifiable and auditable, the Committee suggests the following changes in the Board's CME requirements:

- Reduce the total CME hours to 50 every two years
- Increase the category 1 hours to 50 and remove all category 2 hours
- Provide that the Board may establish CME that would count toward the 50 hour requirement

Dr. Saferin moved to accept the recommendations of the Licensure Committee regarding CME requirements. Dr. Steinbergh seconded the motion.

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

Mr. Giacalone, noting that the Board will now be reducing the total number of required CME hours, suggested the possibility of requiring physicians to complete three hours of CME on medical jurisprudence, which could be provided on the Board's website. Mr. Giacalone stated that the topic of medical jurisprudence is relevant to every medical specialty. Mr. Giacalone stated that the Pharmacy Board has a similar requirement for pharmacists. Mr. Kenney approved of Mr. Giacalone's suggestion.

The Board engaged in a thorough discussion of Mr. Giacalone's suggestion. Dr. Schachat recommended that the Board should survey how many medical jurisprudence courses are available before mandating such courses. Dr. Schachat also stated that some topics are more germane to some physicians than to others; for instance, Dr. Schachat would not take a course in prescribing narcotics because he has not prescribed any narcotics for 20 years. Dr. Ramprasad agreed with Dr. Schachat.

Dr. Soin strongly opposed the concept of mandatory CME's of specific content. Dr. Soin opined that such requirements are onerous and commented that he let his Florida medical license lapse because the numerous mandatory CME topics became too onerous. Dr. Soin felt that 50 hours of CME every two years is sufficient and it is the responsibility of physicians to educate themselves properly.

Dr. Ramprasad opined that even though the total number of CME hours is being reduced from 100 to 50,

the increase in category 1 requirements from 40 to 50, in a sense, represents an increase because only the category 1 CME hours can be validated or audited. Dr. Ramprasad commented that most physicians complete 70 to 100 hours every two years without much difficulty.

Dr. Steinbergh agreed that the Board should not mandate specific CME's. Dr. Steinbergh also felt that there is an opportunity for the Board to reach licensees during the license renewal process and expose them to medical legal topics. Mr. Groeber stated that Mr. Miller is working with vendors about the possibility of deploying training electronically through the license renewal process.

Dr. Rothermel stated that physicians could be encouraged, but not mandated, to take CME courses in medical jurisprudence. Dr. Rothermel also commented that physicians who have been fulfilling their 60-hour requirement for category 2 CME's through activities such as reading journals will continue those activities regardless of this proposed change.

Dr. Steinbergh opined that with these changes, the Board should also alter its CME audit procedures so that more than 2% of licensees are audited every two years.

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

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

The motion carried.

FINANCE COMMITTEE

FISCAL REPORT

Mr. Kenney stated that in March 2015 the Board's revenue was \$941,000, expenses were \$636,000, and the fund balance was \$4,300,000. Ms. Loe noted that the Board received 24 payments for expedited licensure, which is the most in any month to date. Mr. Loe stated that revenue is somewhat ahead of projections and expenses continue to be down because there are currently ten vacancies on the Board's staff. Mr. Groeber noted that even if the Board's staff positions were fully burdened, revenue would still be ahead of expenses.

Dr. Ramprasad exited the meeting at this time.

E-LICENSE 2.0

Mr. Kenney stated that development of the E-License 2.0 system is on schedule.

2016/2017 BUDGET

Mr. Kenney stated that Mr. Groeber testified before the Senate subcommittee regarding the Board's 2016/2017 budget and no problems are anticipated.

FINING AUTHORITY

Mr. Kenney stated that the fining authority bill is being held in the Legislature until June.

MEDICAL BOARD JOURNAL

Mr. Kenney stated that two vendors for the proposed Medical Board journal have provided samples that look promising. Mr. Kenney stated that work on this project will continue.

FEDERATION OF STATE MEDICAL BOARDS

Mr. Kenney stated that the Finance Committee recommends adoption of a policy regarding future Federation of State Medical Boards (FSMB) annual meetings whereby only those Board and staff members who receive an FSMB scholarship, plus two additional Board members and two additional staff members, will attend such meetings. The proposed policy also stipulates that if the Board President is unable to attend or serve as the Board's voting delegate, the President may select the Vice President or the immediate past President to serve as voting delegate.

Dr. Steinbergh approved the proposed policy, except that she felt that the Board President should be able to select any Board member to serve as voting delegate in his or her absence. Mr. Kenney agreed with Dr. Steinbergh's suggestion.

Dr. Steinbergh moved to approve the policy recommended by the Finance Committee, except that the President may select any Board member to serve as voting delegate if the President is unable to attend the FSMB annual meeting. Dr. Schachat seconded the motion. A vote was taken:

ROLL CALL:

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

The motion carried.

CHIEF MEDICAL BOARD INVESTIGATOR TRAINING

Dr. Steinbergh moved to send incoming Deputy Director David Fais and the incoming Chief of Investigations to be hired to a Chief Medical Board Investigator training in August 2015 in Portland, Oregon, at a cost of \$4,316. Dr. Saferin seconded the motion. A vote was taken:

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

The motion carried.

PAYMENTS FOR EXPERTS

Mr. Kenney stated that experts are currently paid \$100 per hour to review material and \$150 per hour for testimony. Under a new policy, experts will be paid \$200 per hour for review and \$250 per hour for testimony. The purpose of the new policy is to attract more experts so that the Board can process complaints more efficiently. Mr. Groeber added that the Executive Director will have the authority to increase those payments in specific cases up to \$400 per hour; anything beyond \$400 per hour will require the approval of the Board President. Mr. Groeber estimated that this new policy will lead to a \$90,000 increase per year in this expense, but this represents a minimal percentage of the Board's finances and will help improve the efficiency of the process. Mr. Groeber speculated that this change will result in an overall net reduction in cost.

In response to Dr. Steinbergh, Mr. Groeber stated that the Board's new E-Licensure 2.0 system, as it expands beyond licensure, should allow an expert to log on to review materials so that their time and progress can be tracked.

Dr. Ramprasad returned to the meeting at this time.

Mr. Groeber stated that the policy for payment of Quality Intervention Panel (QIP) members will change so that they are paid \$150 per case. Ms. Anderson added stated that the difference in payments between experts and QIP members is due to the fact that unlike QIP members, experts are required under the terms of their contracts to give testimony if needed.

COMPLIANCE COMMITTEE

Dr. Steinbergh stated that on April 8, 2015, the Compliance Committee met with Kevin S. Balter, M.D.; Allan Belcher, D.O.; Jennifer C. Campbell, M.D.; Maneesh L. Mehra, M.D.; Christina L. Summers, M.T., and James A. Williams, D.O., and moved to continue them under the terms of their respective Board actions. The Compliance Committee accepted Compliance staff's report of conferences on March 9 and 10, 2015.

The Board took a brief recess at 4:05 p.m. and returned at 4:15 p.m. Dr. Schachat was not present when the meeting reconvened.

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 request separately. Dr. Steinbergh stated that she wished to discuss the matter of Bruce J. Merkin, M.D., separately.

Dr. Steinbergh stated that Dr. Merkin has a long history of addiction going back to 1984. While Dr. Steinbergh approved of Dr. Merkin's request to discontinue his drug log requirement, she disagreed with discontinuing his polygraph testing requirement. Dr. Steinbergh noted that polygraph testing of probationers is very unusual, and in fact Dr. Merkin is the only probationer with such a requirement. The polygraph testing requirement was included in Dr. Merkin's June 2012 Consent Agreement at the recommendation of the physician who performed his reinstatement assessment due to the fact that the substances Dr. Merkin had relapsed on were not detectable by standard drug screening. Dr. Steinbergh added, as observed by a Board member at that time, that Dr. Merkin is an addictionologist and probably knows what drugs can be taken without detection. Dr. Steinbergh further noted that Dr. Merkin's probationary period had been tolled by 120 days in December 2014. Dr. Steinbergh commented that Dr. Merkin has a significant history of being deceptive.

Ms. Bickers stated that she had brought Dr. Steinbergh's concerns to the Secretary and Supervising Member, who were supportive of reducing Dr. Merkin's polygraph testing to every six months instead of discontinuing it. Dr. Steinbergh agreed.

Ms. Bickers noted that the probationary request of Richard S. Skoblar, M.D., is removed from consideration because the Board ratified his permanent surrender agreement earlier in the meeting.

Dr. Steinbergh moved to accept the Compliance staff's Reports of Conferences and the Secretary and Supervising Member's recommendations, except for the modification to Dr. Merkin's request as discussed, as follows:

- **To grant Mohammad A. Adas, M.D.'s request for reduction in drug and alcohol rehabilitation meetings to two per week;**

- To grant John S. Henry, M.D.'s request for approval of discontinuance of the controlled substance log requirement; reduction in appearances to every six months; and discontinuance of the psychiatric sessions;
- To grant Gregory Gene Johnson, M.D.'s, request for approval of a modified practice plan;
- To grant Joanna C. S. Kauffman, M.D.'s request for reduction in appearances to twice yearly; and reduction in psychiatric sessions to every three months;
- To grant Erik J. Kraenzler, M.D.'s request for reduction in appearances from to every six months; and discontinuance of the chart review requirement;
- To grant Joseph Francis Lydon, Jr., M.D.'s request for approval of Nykolai V. Pikhorodeckyj, M.D., to serve as the new monitoring physician;
- To grant Marwan Massouh, M.D.'s request for approval of *Intensive Course in Medical Ethics, Boundaries, and Professionalism*, administered by Case Western Reserve University, to fulfill the professional ethics course requirement for reinstatement;
- To grant Bruce J. Merkin, M.D.'s request for discontinuance of the drug log requirement; and to approve the Secretary and Supervising Member's recommendation to reduce the polygraph testing to every six months;
- To grant Aldo Antonio Molinar, M.D.'s request for approval of John R. Jakubek, M.D., to serve as the monitoring physician; determination of the frequency and number of charts to be reviewed at 10 charts per month; and approval of Farid Sabet-Sharghi, M.D., to serve as the treating psychiatrist;
- To grant Srinivas Perugu Reddy, M.D.'s request for reduction in appearances to every six months; reduction in drug and alcohol rehabilitation meetings to two per week with a minimum of ten per month; and reduction in drug and alcohol urine testing to two per month;
- To grant Bernard J. Rose, M.D.'s request for permission to travel from Ohio to Michigan until October 2015 without prior permission;
- To grant Carol G. Ryan, M.D.'s request for approval of a modified practice plan;
- To grant Rick D. St. Onge, M.D.'s request for approval of Stephen A. Douglas, Ph.D., to conduct the psychotherapy sessions;
- To grant Zbigniew Trojanowski, M.D.'s request for approval of online course modules I through IV, offered by pmiCME; and approval of *Prescription Opioids: Risk Management and Strategies for Safe Use*, offered by NetCE Continuing Education, to fulfill the controlled substance prescribing course required for reinstatement; and

- **To grant Mark Aaron Weiner, D.O.'s request for approval of Bela S. Shah, M.D., to conduct one of the return-to-work psychiatric assessments.**

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

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

The motion carried.

FINAL PROBATIONARY APPEARANCES

JOHN P. ELLIS, D.P.M.

Dr. Ellis was appearing before the Board pursuant to his request for release from the terms of his December 14, 2011 Consent Agreement. Ms. Bickers reviewed Dr. Ellis' history with the Board.

In response to questions from Dr. Steinbergh, Dr. Ellis stated that he currently practices general podiatry and some podiatric surgery in Cleveland, Ohio. Regarding his recovery, Dr. Ellis stated that he will continue to see his psychologist, Dr. Janesz, and his psychiatrist, Dr. Collins, who have been instrumental in guiding him. Dr. Ellis stated that he will also continue to attend caduceus and Alcoholics Anonymous (AA) meetings. Dr. Ellis stated that he has an AA sponsor and he also sponsors a young physician, which he has found to be a rewarding experience. Dr. Steinbergh asked if Dr. Ellis feels well enough to be released at this time. Dr. Ellis replied that he has never felt better.

Mr. Giacalone asked how Dr. Ellis came to be before the Board. Dr. Ellis stated that he had been diagnosed with stage IV cancer, which resulted in a great deal of depression and anxiety. Dr. Ellis had also been dealing with depression from the death of his brother prior to his diagnosis. Dr. Ellis stated that for some reason, he had thought that taking an item from store would somehow make him feel better, but he got caught.

Mr. Giacalone noted that Dr. Ellis had a 1989 conviction for robbery, an aggravated felony. Dr. Ellis explained that he was under the influence of alcohol at the time; he had tried on a suit in a store and then tried to leave the store while still wearing the suit without paying for it. When a clerk attempted to stop Dr. Ellis, he pushed the clerk aside. Dr. Ellis stated that he was convicted of robbery because he had used force in leaving the property.

Ms. Bickers noted that Dr. Ellis' criminal history includes robbery convictions in 1989 and 1991, plus a

shoplifting conviction in 2011.

Mr. Giacalone asked Dr. Ellis what has changed since these incidents. Dr. Ellis responded that he has learned a great deal from Dr. Janesz and Dr. Collins about living life on life's terms and about balance between his professional and personal lives, which had been lacking during these incidents. Dr. Ellis stated that he no longer drinks and that he has dealt with his past and his brother's death. Dr. Ellis takes depression medications and has no depression or anxiety at this time. Dr. Ellis has also been cancer-free for four years. Dr. Ellis stated that he no longer sees any reason to take other people's property.

Mr. Giacalone noted that Dr. Ellis' probationary period had been tolled in October 2014. Dr. Ellis explained that he had had some confusion about his AA attendance requirement. Specifically, Dr. Ellis had thought that the week began on Monday and ended on Sunday, while the Board considers a week to be from Sunday to Saturday. As a consequence, Dr. Ellis unknowingly attended four meetings some weeks and two meetings other weeks, thereby violating the requirement to attend at least three meetings every week.

Dr. Steinbergh wished Dr. Ellis well and hoped that he will continue with his counseling and recovery plans.

Dr. Steinbergh moved to release Dr. Ellis from the terms of his December 14, 2011 Consent Agreement, effective May 14, 2015. Dr. Soin seconded the motion. A vote was taken:

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

The motion carried.

CRYSTAL L. MILLER, M.T.

Ms. Miller was appearing before the Board pursuant to her request for release from the terms of her march 13, 2013 Consent Agreement. Ms. Bickers reviewed Ms. Miller's history with the Board.

Dr. Ramprasad stated that the Board has often seen massage therapists who continue to practice after the expiration of their license. Dr. Ramprasad asked how this came about in Ms. Miller's case. Ms. Miller replied that she had left massage therapy to go back to the dental field. When Ms. Miller later decided to return to massage therapy, she did not realize that her massage therapy license had expired. Ms. Miller stated that when she was made aware of her error, she took steps to get her massage therapy license restored.

Ms. Miller commented that she carried liability insurance during that time and she would have found it helpful if the insurance company had checked to see if her license was active. Ms. Miller also commented that it would be helpful if employers checked on the status of licenses instead of just asking if the applicant has a license. Dr. Steinbergh stated that it is the licensee's responsibility to ensure that their license is active when they are practicing. Ms. Miller agreed and stated that she takes full responsibility to this incident.

Dr. Soin moved to release Ms. Miller from the terms of her March 13, 2013 Consent Agreement, effective immediately. Mr. Giacalone seconded the motion. A vote was taken:

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

The motion carried.

JAMES H. SILVERBLATT, M.D.

Dr. Silverblatt was appearing before the Board pursuant to his request for release from the terms of his April 10, 2013 Consent Agreement. Ms. Bickers reviewed Dr. Silverblatt's history with the Board.

In response to questions from Dr. Soin, Dr. Silverblatt stated that he has recently started his own practice again and he is a solo practitioner in internal medicine. Dr. Silverblatt stated that his interaction with the Board has made him much more cognizant of the laws and statutes. Dr. Silverblatt added that this has reinvigorated his enthusiasm for medicine because he had not realized how precious his medical license was until he almost lost it.

Dr. Soin asked Dr. Silverblatt to describe the prescribing course he had taken and if he had taken the course online. Dr. Silverblatt responded that he had traveled to Atlanta, Georgia, to take the course in person. Dr. Silverblatt stated that the other participants in the course were mostly pain management specialists. Dr. Silverblatt stated that the stories he heard about patients overdosing on or diverting medications made him, as an internal medicine practitioner who rarely prescribes controlled substances, even more wary of prescribing them. Dr. Silverblatt stated that he only prescribed controlled substances rarely for things such as post-operative pain and he refers all cases of chronic pain to either a pain management specialist or a psychiatrist.

Dr. Soin moved to release Dr. Silverblatt from the terms of his April 10, 2013 Consent Agreement, effective immediately. Dr. Steinbergh seconded the motion. A vote was taken:

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

The motion carried.

Mr. Gonidakis exited the meeting at this time.

DAWN M. ZACHARIAS, M.D.

Dr. Zacharias was appearing before the Board pursuant to her request for release from the terms of the Board's Order of January 11, 2012. Ms. Bickers reviewed Dr. Zacharias' history with the Board.

Dr. Steinbergh commented that Dr. Zacharias wrote a very good description of her course on professional boundaries. Dr. Steinbergh agreed with Dr. Zacharias' statement that all medical students and residents should be required to take a similar course, as well as courses in record-keeping and controlled-substance prescribing. Dr. Steinbergh asked Dr. Zacharias to describe her current work. Dr. Zacharias answered that she has an outpatient practice as an allergist and she works five days per week. Dr. Zacharias stated that her work is going very well.

Dr. Steinbergh asked what Dr. Zacharias expects to do differently in the future. Dr. Zacharias replied that she is doing many things differently. For instance, Dr. Zacharias had thought that she had been keeping good medical records, but the record-keeping course had shown her that she was falling short in some areas. Dr. Zacharias also stated that she now knows her boundaries much better and she understands that just because she is trying to help someone does not mean that it is acceptable to treat someone with whom she has a personal relationship. Dr. Zacharias stated that other providers who have no such personal relationship with the patient are able to provide better treatment.

Dr. Ramprasad asked what had prompted Dr. Zacharias to cross that boundary with her patient. Dr. Zacharias stated that she had initially had sexual contact with the individual about two years prior and the relationship had ended. The individual later came to Dr. Zacharias' office to participate in a four-month study and Dr. Zacharias treated him as part of the study. Months after the study ended, Dr. Zacharias and the patient reengaged their sexual relationship. Dr. Zacharias stated that she crossed the line by not legally breaking the physician/patient relationship.

Dr. Steinbergh opined that Dr. Zacharias is now clear about her boundaries. Dr. Zacharias agreed and stated that when the individual first came to her office for the study, she should have turned him away.

Dr. Steinbergh moved to release Dr. Zacharias from the terms of the Board's Order of January 11, 2012, effective May 26, 2015. Dr. Ramprasad seconded the motion. A vote was taken:

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

The motion carried.

ADJOURNMENT

Dr. Steinbergh moved to adjourn the meeting. Dr. Soin seconded the motion. All members voted aye.
The motion carried.

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

The motion carried.

Thereupon, at 4:50 p.m., the May 13, 2015 session of the State Medical Board of Ohio was adjourned.

We hereby attest that these are the true and accurate approved minutes of the State Medical Board of Ohio meeting on May 13, 2015, as approved on June 10, 2015.



Donald R. Kenney, Sr., President



Kim G. Rothermel, M.D., Secretary

22774

May 13, 2015



(SEAL)