



**Tennessee Board of Medical Examiners
Regular Board Meeting**

Tuesday, January 23, 2024

MINUTES

The regular board meeting of the Tennessee Board of Medical Examiners was called to order at 9:12 a.m. in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Dr. Melanie Blake, Board President.

Board members present: Melanie Blake, MD, President
 Stephen Loyd, MD, Vice President
 Deborah Christiansen, MD
 Keith Anderson, MD
 Samantha McLerran, MD
 Todd Tillmanns, MD
 James Diaz-Barriga, Consumer Member
 John McGraw, MD
 Randall Pearson, MD
 Jennifer Claxton, Consumer Member
 John Hale, MD

Board member(s) absent: Michael Bittell, Consumer Member

Staff present: Francine Baca-Chavez, JD, Office of General Counsel
 Kavita Vankenini, MD, Medical Consultant
 Stacy Tarr, BME Executive Director
 Brandi Allocco, Administrative Director
 Samantha Green, Board Administrator
 Jeffrin Zachariah, Board Administrator

The meeting began with a moment of silence.

I. CONSIDERATION OF APPLICATIONS

Genetic Counselor Applicant Interview(s):

Christine Barth, GC – appeared before the Board without legal representation. Ms. Barth is an applicant for initial genetic counseling licensure with active licenses in thirty-one states, no criminal history, and no prior board action. Ms. Barth graduated from the University of Northern Colorado with a master's degree

in Zoology. Rule 0880-13-.04 states to qualify for a license to practice genetic counseling, a personal shall have: (1) Earned a master's degree from a genetic counseling training program that is accredited by the ABGC, or an equivalent as determined by the ABGC or the ABMG; and (2) Met the examination requirement for certification and have current certification as a genetic counselor by the ABGC or the ABMG. Ms. Barth has submitted a petition for Declaratory Order. Ms. Francine Baca-Chavez went over the rules for the licensure of Genetic Counselors with the Board. Ms. Baca-Chavez notes that the ABGC did not begin accrediting programs until 1996 and stopped accrediting programs in 2012. Ms. Baca-Chavez suggests an update to the Rule be made. Currently the only pathway forward for Ms. Barth is a Declaratory Order hearing. Dr. Deborah Christiansen motions to accept the petition for Declaratory Order and to table the application for six (6) months. Dr. John McGraw seconds the motion and the motion passes.

Jill Yelland, GC – appeared before the Board without legal representation. Ms. Yelland has been out of practice as a genetic counselor since October 2023. Ms. Yelland has job shadowed with University of Tennessee and Le Bonheur Children's Hospital in Memphis. She passed her board exam in August 2023 and has been working full-time as a genetic counselor assistant since that time. As Ms. Yelland has completed steps similar to the Board's preceptorship plan, the Board feels she has completed that requirement for re-entry. Dr. Christiansen motions to grant a full license. Dr. McGraw seconds the motion and the motion passes.

Medical X-Ray Applicant Interview(s):

Letha Faulkner, AMDX – appeared before the Board without legal representation. Ms. Faulkner is an applicant for reinstatement who is ARRT compliant with no criminal history and no prior board action. Ms. Faulkner's last date of clinical practice was in 2017. Dr. Christiansen motions to table the application for up to six (6) months to allow Ms. Faulker to secure a preceptor and submit a preceptorship plan to the medical consultant for approval. The plan should consist of one hundred and twenty (120) hours of practice in general X-Rays. At the conclusion of the preceptorship, the preceptor should submit a letter of successful completion to the Board's medical consultant for review and consideration. Dr. McGraw seconds the motion and the motion passes.

Medical Doctor Applicant Interview(s):

Rebecca Dixon, MD – appeared before the Board without legal representation. Dr. Dixon is an applicant for initial licensure with no malpractice history, no criminal history, and no prior board action. Dr. Dixon has been out of clinical practice since July 2021. Dr. Dixon has plans to practice in Washington for six weeks prior to beginning work in Tennessee. Dr. Dixon has also submitted letters from Niswonger Children's Hospital stating her requirements for employment which includes a two (2) to six (6) month preceptorship prior to independent practice. The letters were not signed. Dr. Christiansen motions to grant a full and unrestricted license contingent upon receipt of the signed letters from Niswonger Children's Hospital by the Board's Medical Consultant. Dr. Stephen Loyd seconds the motion, and it passes.

Adam Silverman, MD – appeared before the Board without legal representation. Dr. Silverman has been out of clinical practice since December 2018. Dr. Silverman has been working for the last five (5) years as a chief medical officer (CMO) for a healthcare technology company, and an advisor to another healthcare technology company. Dr. Silverman was involved in creating care plans, including the development of an at-risk obstetrics outreach project for the state of Wyoming Medicaid Program. Dr. Silverman has completed over one hundred (100) hours of continuing education. Dr. Keith Anderson suggests that due to Dr. Silverman's direct involvement of medicine during his time out of clinical practice, there should be an exception to the preceptorship plan for re-entry. Dr. Anderson motions to grant a full and unrestricted license. Dr. John Hale seconds the motion. Dr. Christiansen voices that while she agrees with Dr.

Anderson, in the past the Board has upheld the preceptorship plan requirement for applicants with similar backgrounds. The motion passes with Dr. Todd Tillmanns opposed.

Robin Freeman, MD – appeared before the Board without legal representation. Dr. Freeman appeared before the Board previously at the July 2023 meeting. Dr. Freeman is an applicant for licensure reinstatement with prior board action, no malpractice history, and no criminal history. Dr. Freeman has been out of clinical practice since 2017 and had Board action related to improper prescribing. At the July meeting, the Board tabled the application to allow Dr. Freeman to meet with the Tennessee Medical Foundation (hereinafter TMF) and comply with the recommendations. Dr. Baron has submitted a letter and Dr. Freeman is present to discuss a preceptorship. The TMF recommendation included signing a five-year monitoring agreement and completion of a twenty-three (23) hour prescribing controlled drugs course offered by Vanderbilt University Medical Center. Dr. Michael Baron, Medical Director for TMF, spoke on behalf of Dr. Freeman. Dr. Freeman has signed the five-year abstinence agreement and reported to the Board that she is scheduled to attend the twenty-three (23) hour prescribing course offered by Vanderbilt University Medical Center in April 2024. Dr. Hale motions to table the application for up to six (6) months to allow Dr. Freeman to complete the prescribing course, secure a board-certified preceptor, and work with Dr. Tillmanns to draft a preceptorship plan. The preceptorship plan should be no less than two thousand hours. Dr. Freeman must appear back before the Board for approval of the preceptorship plan. Dr. Pearson seconds the motion, and it passes.

Jacob H Basham, MD – appeared before the Board without legal representation. Dr. Basham is an applicant for initial licensure with no malpractice history, no criminal history, and no prior board action. Dr. Basham self-reported to his residency program regarding substance use disorder and has been in compliance with his TMF monitoring since. Dr. Baron spoke on behalf of Dr. Basham and the TMF fully supports Dr. Basham’s application for licensure. Dr. Christiansen motions to grant a full and unrestricted medical license. Mr. James Diaz-Barriga seconds the motion and the motion passes.

Alexander Nowicki, MD – appeared before the Board without legal representation. Dr. Nowicki is an applicant for initial licensure with no criminal history, no malpractice history, and no prior board action. Dr. Nowicki is an International medical school graduate who has completed the required postgraduate training however he attended an unapproved medical school and is not currently board certified. Dr. Nowicki will sit for his final board certification exam in May 2024. Ms. Baca-Chavez went over the Board’s “Demonstrated Competency for International Medical School Graduates Applying for a Temporary License” Policy. Dr. Christiansen motions to grant a temporary license for a period of up to one (1) year to allow Dr. Nowicki to sit for his certification exam, after which Dr. Nowicki will be eligible to apply for full licensure. Dr. McGraw seconds the motion and the motion passes.

Preeti Prasad, MD – appeared before the Board without legal representation. Dr. Prasad is an applicant for initial licensure with no criminal history, no malpractice history, and no prior board action. Dr. Prasad is an International medical school graduate who has not completed any ACGME accredited training and is not board certified. Dr. Prasad has submitted a Petition for Declaratory Order for the Board’s consideration. Dr. Prasad is board eligible under the American Board of Radiology’s alternative pathway and will sit for her Board exam in September 2024. Dr. Christiansen motions to accept Dr. Prasad’s Petition for Declaratory Order and to table the application for six (6) months to allow Dr. Prasad to partake in the Declaratory Hearing process. Dr. Anderson seconds the motion and the motion passes.

Mohamed Soltan, MD – appeared before the Board without legal representation. Dr. Soltan is an applicant for initial licensure with no criminal history, no malpractice history, and no prior board action. Dr. Soltan is an International medical school graduate who will have completed two (2) years ACGME accredited training as of September 2024 and is not board certified. Dr. Soltan has submitted a Petition for Declaratory Order for the Board’s consideration. Dr. Christiansen motions to accept Dr. Soltan’s Petition

for Declaratory Order and to table the application for six (6) months to allow Dr. Soltan to partake in the Declaratory Hearing process. Ms. Jennifer Claxton seconds the motion and the motion passes.

Alexander Lakowsky, MD – appeared before the Board without legal representation. Dr. Lakowsky is an applicant for initial licensure with prior board action, no criminal history, and no malpractice history. Dr. Lakowsky signed a public letter of reprimand in California in 2022 after an investigation of overprescribing was conducted by the state’s medical board. Dr. Lakowsky has complied with the terms of the reprimand and has not prescribed any controlled substances since the reprimand. Dr. Lakowsky plans to practice urgent care via telemedicine in Tennessee. Dr. Christiansen motions to grant a full and unrestricted medical license. Dr. Loyd seconds the motion and the motion passes with Dr. Tillmanns abstained.

Timothy Strait, MD – appeared before the Board without legal representation. Dr. Blake recused. Dr. Strait is an applicant for licensure reinstatement with malpractice history, no criminal history, and no prior board action. Dr. Strait plans to practice locum tenens in a consulting role, rather than a surgical role. Dr. Strait’s had four (4) malpractice cases in 1999, 2011, 2014, and 2018. All cases occurred in the state of Tennessee at the time Dr. Strait was licensed. Malpractice cases would have been reported to the Department and would have been investigated at the time. No Board action was taken given the facts reported at the time Dr. Strait was licensed. Dr. Christiansen motions to grant a full and unrestricted medical license. Ms. Claxton seconds the motion and the motion passes with Dr. Randall Pearson, Dr. McGraw, and Dr. Tillmanns opposed and Dr. Blake recused.

II. CONSIDER AND APPROVE CONSENT AGENDA

Dr. Christiansen motions to accept the consent agenda. Dr. McGraw seconds the motion, and it passes. The Consent Agenda contained the following:

1. Approval of November 07-08, 2023, Board of Medical Examiners Meeting minutes
2. Approval of November 30, 2023, Summary Suspension Meeting minutes
3. Approval of December 18, 2023, Informal Hearing Meeting minutes
4. Ratification of new licenses, reinstatement and renewals of Medical Doctors, MD X-Ray Operators, Genetic Counselors, Surgical Assistants
5. Approval of Agreed Citations
 - a. [Ray Walther, MD*](#)
 - b. [James Goss, MD*](#)
6. Review of the Office of General Counsel Report
7. Review report from the Administrative Office
8. Review report from the Office of Investigations

III. TENNESSEE MEDICAL FOUNDATION UPDATE – DR. BARON

Michael Baron, MD, Medical Director of the Tennessee Medical Foundation, was asked to write a chapter for the ASAM criteria fourth edition. The chapter is new to the ASAM criteria and provides information on safety sensitive occupational workers, which includes physicians. Dr. Baron shared a copy of the chapter with the Board. The health of physicians can impact the health of the population.

IV. UPDATES FROM TASKFORCES & COMMITTEE MEETINGS

- a. **Development Committee Meeting Update (Dr. Loyd, Dr. Blake, and Dr. Christiansen, and Dr. McGraw) -**

- i. The Committee met this morning, January 23, 2024.
- ii. Discuss and take action as needed regarding Pain management clinic inspections and BME disciplinary action-TMA and Tennessee Pain Society: The Committee was only able to take this agenda item. The TMA and Tennessee Pain Society (hereinafter “TPS”) put forth fifteen (15) recommendations for pain management clinic oversight and BME discipline. While the Committee felt the recommendations were reasonable requests, there was question on who would have the authority to make changes. The Committee determined there were two actionable items they could address. The Committee motions to review the chronic pain management oversight standards annually at a full BME meeting. The motion passes unanimously. The TMA and TPS will propose legislative changes for the twenty percent (20%) coverage rule. The current guidelines require the supervising physician or medical director be physically present in the clinic twenty percent of the time. The intent behind the original guideline was to eliminate supervising physicians or medical directors from only visiting a site once a year. Under the current twenty percent coverage rule, the medical directors or supervising physicians must be there weekly. TMA and TPS are proposing legislation that would change weekly coverage to quarterly. The Committee motions to endorse TMA and TPS’s proposed change as they lobby the State. The motion passes unanimously. The TMA and TPS will propose legislation to establish an advisory opinion pathway. The Committee motions to endorse the TMA and TPS as they lobby for this change at the State. Ms Baca Chavez went over BME’s advisory ruling opinion process. The motion passes unanimously.

Dr. Samantha McLerran joined the meeting during the update from the Development Committee meeting.

The Board recessed for lunch.

V. UPDATES FROM TASKFORCES & COMMITTEE MEETINGS (CONTINUED)

- a. **Development Committee Meeting Update (Dr. Loyd, Dr. Blake, and Dr. Christiansen, and Dr. McGraw) –**
 - i. The full Board will take up the remaining Development Committee Agenda items.
 - ii. Discuss and take action as needed regarding request(s) for Advisory Ruling:
 1. Emma Rich, MD: The request also lists Kent Colburn, DO, who is licensed by the Board of Osteopathic Examination. The Board of Osteopathic Examination does not have advisory ruling authority. The request is for guidance on the meaning of the phrase “charts monitored or written” in Rule 0880-06-.02(8). The Rule indicates that at least twenty percent (20%) of charts monitored or written by a mid-level must be personally reviewed and certified by signature of the supervising/collaborating physician. To ensure compliance, the requesters are seeking an advisory ruling that collaborating physicians who work in the correctional facility setting are complying with Rule 0880-06-.02(8) if they review twenty percent (20%) of the charts in which there was an inmate/patient encounter that resulted in a progress note or similar entry relating to that encounter. Mr. David Steed, legal representative, spoke on behalf of the physicians seeking an advisory opinion. As the Rules for the Board of Osteopathic Examination refers to

the Rules for the Board of Medical Examiners, it may be argued that the Board of Medical Examiners has the ability to rule on an advisory opinion that includes a DO. Dr. Christiansen motions that the phrase “charts monitored or written” to mean patient encounter. The definition of patient encounter is the rendering of a documented medical opinion concerning evaluation, diagnosis, and/or treatment of a patient whether the physician is physically present in the room, in a remote location within the state, or across state lines. Dr. Anderson seconds the motion and the motion passes.

2. Puja Pape, MD: Dr. Loyd recused. Dr. Pape questioned whether under T.C.A. § 53-11-311(h)(2)(N) a collaborating physician can collaborate with more than two mid-level providers in an office-based opioid treatment (“OBOT”) facility when a collaborating physician rather than the mid-level providers prescribe buprenorphine products for use in recovery or medication-assisted treatment. It is the Board’s understanding that Dr. Pape is employed in an OBOT facility, and Dr. Pape’s employer is seeking to transition to a collaborative practice model where the mid-level providers would see the patients at the OBOT facility but only the collaborating physicians would prescribe buprenorphine products. Dr. Pape’s inquiry is whether under this collaborative practice model this arrangement is permissible under T.C.A. § 53-11-311(h)(2)(N). Specifically, T.C.A. § 53-11-311(h)(2)(N) allows a health care provider licensed under title 63, chapter 7 or 19, who is employed by or contracted with a nonresidential OBOT, as defined in § 33-2-402 to prescribe a buprenorphine product, as approved by the federal food and drug administration for use in recovery or medication-assisted treatment if: when providing direct supervision, the physician does not oversee more than two (2) providers licensed under title 63, chapter 7 or 19, at one time during clinical operations. The proposed collaborative practice model that you have described does not implicate T.C.A. § 53-11-311(h)(2)(N) because this statute only applies to restrictions on mid-level providers who prescribe buprenorphine products in an OBOT facility and does not address physicians who prescribe buprenorphine products. Consequently, as long as the mid-level providers are not prescribing buprenorphine products, there is no statutory limitation on the number of mid-level providers who can collaborate with a physician. Dr. McGraw motions to adopt the draft letter as written by Ms. Baca-Chavez. Dr. Christiansen seconds the motion and the motion passes with Dr. Loyd recused.
- iii. Discuss and take action as needed regarding requirement of transcripts directly from the institutions: International Medical School Graduates have appeared before the Board due to an inability to obtain a primary source transcript as required by Rule. The ECFMG vets their certificate holders by obtaining a primary source transcript at the time of certification. As required by Rule, International Medical School Graduates must be certified by ECFMG as a qualification for licensure. The Board feels the ECFMG certification should be enough for individuals having difficulties obtaining a primary source transcript due to the location of their institution (i.e., a “war-torn” country). This matter would require an official rule change. This matter will be dropped from the Development Committee at this time as the Board’s advisory attorneys are

reviewing rules and making proposed changes to further clarify the Rules for licensees.

- iv. Discuss and take action as needed regarding requests for sponsorship for additional attempts at the USMLE: Requests for additional attempts at the USMLE have historically been handled by the Board's Administrative Office. Out of seventeen Boards participating in a licensing specialist program through Administrators in Medicine, only two Boards entertain these requests. Tennessee is one of the two states that entertains these requests. The Board's Administrative Office receives the requests and determines their nexus to Tennessee. That does not guarantee that after the individual sits for the additional attempt(s) that they will apply for a Tennessee license, not will it guarantee that they qualify for licensure. This service is done by administrative staff free of charge and requires additional time to gather the information for the sponsorship request. The USMLE lowered the attempt limit in 2021 to four attempts and Tennessee lowered the attempt limit to match USMLE's attempt limit in response. One of the questions on the sponsorship form is whether the individual would be eligible for licensure if they pass after more than four attempts, and while the Rules allow for Board certification to be considered as demonstrated competency, there is no guarantee that the individuals will become Board certified. Dr. Anderson motions that we no longer sponsor additional attempts at the USMLE. Mr. Diaz-Barriga seconds the motion. Dr. McGraw questions if the motion includes sponsorship for irregular behavior. The Board votes that this would not preclude sponsorship for irregular behavior. The Board votes to no longer offer sponsorship for additional attempts at the USMLE for individuals who have exceeded the attempt limit.
- v. Discuss and take action as needed regarding midlevel collaboration requirements taskforce: Dr. Loyd requests to leave this on the agenda for the next Development Committee meeting as this is not a matter that can be taken up at the full Board meeting today.
- vi. Discuss and take action as needed regarding education for licensees regarding collaboration: It is the consensus of the Board that some education should be provided regarding supervising/collaboration of mid-levels for licensees to prevent disciplinary actions from individuals that are not experienced with or aware of the Rules regarding supervision/collaboration. The Development Committee will take up this matter at the next meeting with review of the Frequently Asked Questions presented to licensees, as well as ideas for organizations to collaborate with regarding the distribution of education or training on the topic.

VI. PETITION FOR ORDER OF MODIFICATION

Anthony Ramirez, MD – appeared before the Board with his legal representation, Mr. C.J. Gideon. Mr. Gideon presented the petition to the Board. Ms. Brittani Kendrick represented the State. Dr. Ramirez is required to maintain a lifetime contract with, and advocacy of, the Tennessee Medical Foundation. Dr. Ramirez has maintained sobriety since August 15, 2005 and has earned advocacy of the TMF for over fourteen years. Dr. Ramirez requests that any requirement for a lifetime contract with and advocacy by the TMF be eliminated. Ms. Kendrick countered that the threshold for an order of modification as defined in the Rules are not met by the petition. Dr. Baron spoke on behalf of Dr. Ramirez. It is the position of TMF that Dr. Ramirez no longer needs monitoring in consideration of the evaluation by Dr. John Woods. Dr. Ramirez went over the difficulties associated with lifetime monitoring and how he plans to continue sobriety if monitoring is lifted. Dr. McGraw motions to

grant the petition for order of modification. Dr. Anderson seconds the motion, and it passes. The Board will review its Order of Modification rules and may further define what is meant by “impossible” in the rule.

VII. PETITION FOR DECLARATORY ORDER

Ralph Thomas Reach, MD – did not appear before the Board. His legal representative, Mr. C.J. Gideon, appeared on his behalf. Mr. Gideon presented the petition to the Board. Mr. Gerard Dolan represented the State. The petitioner received a letter dated June 30, 2023 stating that the Tennessee Board of Medical Examiners summarily revoked his license as required by T.C.A. § 63-1-170 without notice or a hearing. The petitioner is requesting in accordance with T.C.A. § 4-5-320(c) a written notice of the provisions of the law he violated, and an opportunity to be heard by the Tennessee Board of Medical Examiners before his license is disciplined. Mr. Dolan counters that the Board does not have the jurisdiction to determine the constitutionality of a statute. The Board of Medical Examiners is not the appropriate agency for the petition as the statute pertains to the Division of Health-Related Boards as a whole. Rule 1200-10-01-.11(2)(a) states the Division shall address only those petitions which involve provisions of T.C.A Title 63 Chapter 1 or any rule promulgated, or any order issued pursuant thereto. Even if the Board of Medical Examiners were the appropriate agency to hear this petition, they would still have to deny it. Tennessee Rule 1200-10-01-.11(6)(a) sets forth that if a petition for declaratory order must be denied if “the only issue raised is the facial constitutionality of a statute”. Dr. Pearson motions to deny the petition for declaratory order. Mr. Diaz-Barriga seconds the motion, and it passes with Dr. Loyd recused.

VIII. ORDERS OF COMPLIANCE

Edgar Alan Ongtengco, MD – appeared before the Board without legal representation. Ms. Francine Baca-Chavez presented the Order of Compliance. The petition requests the Board lift the probation on Dr. Ongtengco’s medical license. It is the position of the Disciplinary Coordinator and the Office of General Counsel that he is compliant with the terms of his previous order. Dr. Christiansen motions to accept the order of compliance. Dr. McGraw seconds the motion, and it passes.

Raju Indukuri, MD – appeared before the Board along with his legal representation, Mr. J. Scott McDearman. Ms. Francine Baca-Chavez presented the Order of Compliance. Dr. Blake recused. Dr. Indukuri was found non-compliant at the Board’s September 2023 meeting and his restriction on prescribing was extended an additional three (3) months. The petition requests the Board lifts the restrictions on prescribing opioids on petitioner’s license. It is the position of the Disciplinary Coordinator and the Office of General Counsel that Dr. Indukuri is compliant with the terms of his previous order. Due to the weather closing State offices prior to the meeting, Dr. Indukuri’s payment for the civil penalties was not received in the mail at the time of the meeting, however Dr. Indukuri provided a picture of the payment to the Board to show it has been mailed. Dr. Christiansen motions to accept the order of compliance lifting the restriction on prescribing opioids contingent upon the receipt of the payment for the civil penalties assessed by the Order of Non-Compliance. Mr. Diaz-Barriga seconds the motion, and it passes with Dr. Blake recused.

Karen Armour, MD – did not appear before the Board nor did a legal representative appear on her behalf. Ms. Francine Baca-Chavez presented the Order of Compliance. The initial Consent Order did not require appearance before the Board. The petition requests the Board lifts the restrictions on prescribing opioids on petitioner’s license. It is the position of the Disciplinary Coordinator and the Office of General Counsel that she is compliant with the terms of her previous order. Dr. Christiansen motions to accept the order of compliance. Dr. McGraw seconds the motion, and it passes.

IX. DISCIPLINARY ORDERS

Consent Order(s)

[Frank W. Ling, MD*](#) – did not appear before the Board, his legal representative, Mr. David Steed, appeared on his behalf. Ms. Ashley Fine represented the State. Dr. Tillmanns recused. Dr. Christiansen motions to approve the order. Dr. McGraw seconds, and the motion passes with Dr. Tillmanns recused.

[Oran L. Berkenstock, MD*](#) – did not appear before the Board nor did his legal representative, Mr. Kevin Baskette, appear on his behalf. Ms. Brittani Kendrick represented the State. Dr. Anderson, Dr. Hale, and Dr. Tillmanns recused. Dr. McGraw motions to approve the order. Dr. Christiansen seconds, and the motion passes with Dr. Anderson, Dr. Hale, and Dr. Tillmanns recused.

[Robert Ferland, MD*](#) – did not appear before the Board nor did his legal representative, Mr. Sam Helmbrecht, Esq., appear on his behalf. Ms. Brittani Kendrick represented the State. Dr. McGraw and Dr. Pearson recused. Dr. Christiansen motions to approve the order. Dr. Anderson seconds, and the motion passes with Dr. McGraw and Dr. Pearson recused.

[Melanie Woodall, MD*](#) – did not appear before the Board nor did her legal representative, Mr. Travis Swearingen, appear on her behalf. Ms. Brittani Kendrick represented the State. Dr. Anderson and Dr. Tillmanns recused. Dr. Christiansen motions to approve the order. Dr. McGraw seconds, and the motion passes with Dr. Anderson and Dr. Tillmanns recused.

[Carrie Dowling, MD*](#) – did not appear before the Board nor did her legal representative, Mr. Michael McLaren, appear on her behalf. Ms. Candace Carter represented the State. Dr. Anderson recused. Dr. McGraw motions to approve the order. Dr. Loyd seconds, and the motion passes with Dr. Anderson recused.

Agreed Order(s)

[Bill Boswell, MD*](#) – did not appear before the Board nor did his legal representative, Mr. Jason Long, appear on his behalf. Mr. Michael Varnell represented the State. Dr. Loyd recused. Dr. Christiansen motions to approve the order. Dr. Hale seconds, and the motion passes with Dr. Loyd recused.

Consent Order(s) (continued)

[Andres Perez, MD*](#) – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Paetria Morgan represented the State and Ms. Francine Baca-Chavez presented the order on her behalf. Dr. Christiansen motions to approve the order. Dr. McGraw seconds, and the motion passes.

[Eva Misra, MD*](#) – did not appear before the Board nor did her legal representative, Mr. Garrett Asher, Esq., appear on his behalf. Ms. Paetria Morgan represented the State and Ms. Francine Baca-Chavez presented the order on her behalf. Dr. Christiansen motions to approve the order. Dr. Loyd seconds, and the motion passes.

[Donald Clemons, MD*](#) – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Paetria Morgan represented the State and Ms. Francine Baca-Chavez presented the order on her behalf. Dr. Loyd recused. Dr. Christiansen motions to approve the order. Dr. McGraw seconds, and the motion passes with Dr. Loyd recused.

Next Development Committee Agenda

- a. Discuss and take action as needed regarding midlevel collaboration requirements taskforce
 - b. Discuss and take action as needed regarding education for licensees regarding collaboration (FAQs, SVMIC, and TMA)
- X. **PUBLIC COMMENT** – Public comment was made via electronic correspondence in advance of the meeting by Dr. Sheikh, Dr. Mohammed Amir Hossain Babu, Dr. Azim Saquib, and Dr. Khaoua Lamiaa in regard to Public Chapters 211 and 470. The Board will further discuss the Public Chapters at future meetings.

The Board recessed at 4:00 pm CT.



**Tennessee Board of Medical Examiners
Regular Board Meeting**

Day Two of the Regular Meeting of the Tennessee Board of Medical Examiners

Wednesday, January 24, 2024

The regular board meeting of the Tennessee Board of Medical Examiners was called to order at 9:15 a.m. in the Iris Room Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243.

Board members present: Randall Pearson, MD
 Jennifer Claxton, Consumer Member
 John Hale, MD

Staff present: Francine Baca-Chavez, JD, Office of General Counsel
 Kavita Vankenini, MD Medical Director
 Stacy Tarr, BME Executive Director
 Brandi Allocco, Administrative Director
 Samantha Green, Board Administrator
 Jeffrin Zachariah, Board Administrator

XI. ORDERS OF COMPLIANCE (CONTINUED)

Clay M. Pickard, MD – appeared before a panel of the Board along with his legal representation, Mr. J. Eric Miles. Ms. Francine Baca-Chavez presented the Order of Compliance. The petition requests the Board lift the probation on Dr. Pickard’s medical license. It is the position of the Disciplinary Coordinator and the Office of General Counsel that he is compliant with the terms of his previous order. Dr. Pearson motions to accept the order of compliance. Ms. Claxton seconds the motion, and it passes.

Declaratory Order Hearing – Iris Room

**Sharon K. Carson, MD v. State of Tennessee Board of Medical Examiners
Iris Room**

Administrative Law Judge: Michael Begley

Panelists: Randall Pearson, MD, John Hale, MD, and Jennifer Claxton, Consumer Member

Counsel for State: Francine Baca-Chavez, Deputy General Counsel

Counsel for Respondent: Respondent was not represented

A panel of the Board heard the position of the Petitioner and the State and reviewed any evidence presented. After discussion and consideration, the panel motioned and seconded, which was followed by

an approval of the following Final Order with all findings of fact and conclusions of law considered and agreed upon.

Petitioner, Sharon Carson, MD, attended the University of Toronto in Toronto, Canada and obtained a medical degree in July of 1996. Petitioner is a Canadian medical school graduate who has completed the required postgraduate training but has not taken a board approved exam pursuant to Rule 0880-02-.08. Petitioner passed the Medical Council of Canada Qualifying Examination (MCCQE) Part I in the Spring of 1996 and passed the MCCQE Part II in the Fall of 1997. Petitioner is certified in Pediatrics by the Royal College of Physician and Surgeons of Canada since June 30, 2000. Petitioner completed a four-year post graduate training program in pediatrics at the University of Toronto from July of 1996 to July of 2000. Petitioner completed a post graduate training program in pediatric hematology/oncology at the University of Toronto from July of 2000 to July of 2001. Petitioner was employed as a consulting pediatrician at Joseph Brant Memorial Hospital in Burlington, Ontario from approximately September 2001 to May of 2010. Petitioner was employed as a consulting pediatrician in private practice from approximately June of 2010 to July of 2011. Petitioner has been employed as a pediatric community pediatrician with Beech Tree Medical Centre in Burlington, Ontario since approximately July of 2011. Her practice focus is on child development/behavior and school and mental health issues. Petitioner has approximately twenty-three (23) years of community pediatric experience. In addition to Petitioner's current practice, she is actively involved with the serving on committees, engaging in research and providing educational opportunities for various groups including families, teachers, physicians, and community partners. Petitioner does not currently hold any state medical licenses in the United States. Petitioner has not had any discipline taken on her Canadian medical license. Petitioner has held a medical license in Ontario, Canada since July 1, 1996. The petition for Declaratory Order, for this Petitioner, and the relief requested therein was approved.

Declaratory Order Hearing – Iris Room

Abdulrahman Rageh, MD v. State of Tennessee Board of Medical Examiners

Iris Room

Administrative Law Judge: Michael Begley

Panelists: Randall Pearson, MD, John Hale, MD, and Jennifer Claxton, Consumer Member

Counsel for State: Francine Baca-Chavez, Deputy General Counsel

Counsel for Respondent: Respondent was not represented

A panel of the Board heard the position of the Petitioner and the State and reviewed any evidence presented. After discussion and consideration, the panel motioned and seconded, which was followed by an approval of the following Final Order with all findings of fact and conclusions of law considered and agreed upon.

Petitioner, Abdulrahman Rageh, MD, attended Ain Shams University in Cairo, Egypt and obtained a medical degree in April of 2006. Petitioner is an international medical school graduate who has not submitted evidence of the satisfactory completion of a three-year US ACGME accredited post graduate training program and is not currently certified by an American Board of Medical Specialties, ("ABMS" member board. Petitioner completed a general medicine internship at Ain Shams University in Cairo, Egypt from March 2006 to March 2007. From July 2007 to November of 2009, Petitioner worked in Egypt. Petitioner completed an ophthalmology residency at the National Eye Center in Cairo, Egypt from November 2009 to October 2015. Following the ophthalmology residency, Petitioner studied for the USMLE, and worked in the United States. On or about September 2018, Petitioner was granted asylum in the United States pursuant to the Immigration and Nationality Act. Petitioner then applied for and was granted permanent resident status in April of 2021. Petitioner completed a two-year medical retina fellowship at the Beetham Eye Institute of Joslin Diabetes Center, "Beetham Eye Institute" which is a

Harvard affiliate hospital in Boston, Massachusetts from July of 2019 to July of 2021. In his second year of the fellowship Petitioner was elected a senior medical retina fellow. As part of his role, Petitioner was responsible for training new incoming fellows and supervising them during consults. During the time Petitioner was at Beetham Eye Institute he has two first author abstracts accepted for the Association for Research and Vision and ophthalmology, (ARVO) annual meeting and was awarded the ARVO travel grant. Petitioner also co-authored three (3) peer review manuscripts published in ophthalmology journals. Petitioner completed a one-year ophthalmology ocular oncology fellowship in the Department of Ophthalmology at Duke University Eye Center in Durham, North Carolina from July 2021 to July of 2022. The Duke University Eye Center, residency program is PGY1-PGY4 ACGME accredited; however, the ophthalmology ocular oncology fellowship is not accredited by ACGME. During this fellowship, Petitioner taught ophthalmology residents and would evaluate and manage ocular oncology patients daily. Petitioner has completed over 40 I-125 plaques placements, conducted over 100 EUAs for retinoblastoma and other pediatric disorders, and has completed countless other procedures including injections, transversal/transscleral choroidal biopsies and lasers (PDT/TTT) as a primary and secondary surgeon. The ophthalmic plastic and reconstructive surgery fellowship is the only ophthalmology fellowship accredited by the ACGME. Petitioner began a vitreoretinal fellowship at the University of North Carolina Chapel Hill Ophthalmology Department, (UNC) in Chapel Hill, North Carolina in August of 2022. On or about February 6, 2023, Petitioner submitted a medical license application in Tennessee. As part of the application, the program director for UNC completed the Board's verification of postgraduate training form and signed and dated it September 13, 2023. On the form, the program director indicated that Petitioner had adverse charges or action taken during the fellowship and attached a detailed letter dated September 13, 2023. In the letter, the program director reported that there were repeated patient safety concerns during Petitioner's fellowship. The letter outlined the collection of cases that were of concern beginning in August of 2022 through December of 2022. The letter stated that Petitioner was relieved from seeing patients as of January 9, 2023, and he subsequently resigned on March 30, 2023. Petitioner submitted a written explanation to the Board in regard to his fellowship with UNC and pointed out that the program director at UNC had previously signed postgraduate training forms on December 20, 21, and 22, 2022 when he applied for medical licenses in Missouri, Florida, and Arizona, and he did not provide an adverse information about Petitioner at that time. Petitioner attached copies of the postgraduate training forms from Missouri, Florida, and Arizona. In the postgraduate reference letter for the State Board of Registration for the Healing Arts in Missouri, the program director at UNC checked "no" in response to the following question: Do you have knowledge of any condition or impairment which in any way affects the applicant's ability to practice in a professional competent and safe manner, including but not limited to: (1) a mental, emotional, nervous or sexual disorder; (2) an alcohol or substance abuse disorder; or (3) a physical disease or condition? The program director also indicated that Petitioner was on track to successfully complete the fellowship and that he would recommend Petitioner for licensure to practice medicine and surgery without any reservation. The program director signed the postgraduate reference letter on December 20, 2022. Petitioner also pointed out to the Board in his written explanation that prior to being notified that he was put on personal leave due to patient safety concerns, he had filed discrimination and retaliation claims with UNIC and the EEOC for long standing issues he had faced during the fellowship with UNC. The discrimination complaints are still pending. Petitioner currently holds full and unrestricted licenses in Connecticut, Georgia, Illinois, Iowa, North Carolina, Virginia, Ohio, Missouri, and Arizona. Petitioner has had no disciplinary action taken on these licenses. There is a significant need for a physician with Petitioner's qualifications in Tennessee. The petition for Declaratory Order, for this Petitioner, and the relief requested therein was approved.

This concludes the Board of Medical Examiners Day 2 meeting.