



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

**Tuesday, May 28, 2019  
Wednesday, May 29, 2019**

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**MINUTES**

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The regular board meeting of the Tennessee Board of Medical Examiners was called to order at 8:38 a.m. in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Dr. W. Reeves Johnson, Board President.

Board members present:           W. Reeves Johnson, MD, President  
                                                  Melanie Blake, MD, Vice President  
                                                  Charles Handorf, MD, Secretary  
                                                  Neal Beckford, MD  
                                                  Julianne Cole, Consumer Member  
                                                  Robert Ellis, Consumer Member  
                                                  Phyllis Miller, MD  
                                                  Deborah Christiansen, MD  
                                                  Jennifer Claxton, Consumer Member

Board member(s) absent:           John Hale, MD

Staff present:                         Mary K. Bratton, JD, Chief Deputy General Counsel  
                                                  Rene Saunders, MD, BME Medical Consultant  
                                                  Angela Lawrence, BME Executive Director  
                                                  Stacy Tarr, Administrative Director  
                                                  Candyce Wilson, Administrative Director

**I. CONSIDERATION OF APPLICATIONS**

**Medical X-Ray Operator Applicant Interview(s):**

**Kellie McClintock, AMDX** – appeared before the Board without legal representation. Ms. McClintock appeared due being out of clinical practice since August 2016. Ms. McClintock informed the Board she has twenty-two (22) years of experience as an x-ray operator and ceased practice in August 2016 due to personal matters which prevented her from being able to practice. Ms. McClintock informed the Board of her limitations on obtaining remediation hours in the area she lives in. The Board discussed the requirement of remediation in order for Ms. McClintock to be granted licensure. Dr. Charles Handorf

motioned to table the application for six (6) months to give the applicant time to develop, along with Dr. Rene Saunders as the Boards Consultant, an acceptable remediation plan and to follow through with completing that plan. Dr. Neal Beckford seconded the motion and it passed.

**Deborah Jones, AMDX** – appeared before the Board without legal representation. Ms. Jones submitted an application for limited licensure with a scope in chest x-rays. Per the Board Consultant, which was verified by a call to the indicated physician, her application contained a Physician Competence Statement with a forged signature. Along with other apparent factors implicating that she was attempting to obtain a license by deceit. Dr. Melanie Blake stated when one matter is called into question and more questions continue arise it is difficult to discern what is factual. Dr. Blake motioned to deny the application and Dr. Beckford seconded the motion. Ms. Jones withdrew her application for licensure.

#### **Medical Doctor Applicant Interview(s):**

**Angela Culbreth, MD** – appeared before the Board without legal representation. Dr. Culbreth is an applicant for reinstatement having been out of clinical practice since December 2014. She has taken and passed the Family Medicine Certification Examination in 2013; however she is not currently Board Certified because she must first have an active license. Dr. Culbreth practiced for nine (9) years prior to retiring from practice. The Board discussed possible re-entry options for the applicant. Based on the applicants' circumstances, the Board feels as though completion of a preceptorship would be an appropriate form of remediation and Dr. Culbreth has expressed she has a physician willing to assist her in completing the remediation hours. Dr. Beckford motioned to grant a license contingent on successful completion of a preceptorship, in which the applicant will devise the re-entry plan with Dr. Johnson and Dr. Saunders. Dr. Blake seconded the motion and it passed.

Based on these deliberations, Dr. Blake proposed a revision to the re-entry diagram is necessary for clarity on the procedural steps which must occur when the Board makes such a motion and a re-entry plan is to be devised.

Dr. Deborah Christiansen joined the meeting via teleconference at 9:30am CST.

#### **Medical X-Ray Operator Applicant Interview(s) continued:**

**Patricia Wieck, MDXL** – appeared before the Board without legal representation. Ms. Wieck appeared before the Board in January 2019 at which time the Board tabled her application and required a remediation plan to be devised and completed. At this time, Ms. Wieck has completed 45 of the 50 core course hours, 14 of the 24 chest hours and all 40 hours in extremities required by Board rule. She has not completed the skull or sinus hours and cannot take the certification exam until the fall. Dr. Blake, Dr. Christiansen and Dr. Phyllis Miller advocated that the additional five (5) hours in chest, to meet the full 50 hours required by rule, is not necessary for Ms. Wieck. Dr. Christiansen motioned to grant a limited license for chest and extremities. Dr. Miller seconded the motion and it passed. Ms. Wieck must complete all other modality hours required by Board rule, submit a new application and fee if she desires to add those modalities to her license.

**Zohaib Mumtaz, MD** – did confirm scheduled appearance before the Board but was not present. The Board did not deliberate on this application.

**Willie Mae Jackson, MD** – appeared before the Board without legal representation. Dr. Jackson appeared before the Board due to failing the USMLE more than three (3) times and is not currently ABMS Board Certified as required per Board Rule 0880-02-.08(2)(c). She currently practices in Illinois and Kentucky. Dr. Jackson is scheduled to take the Psychiatry Board Certification exam in September

2019 and it may take up to three (3) months for her to receive the exam results. Dr. Jackson reports she has sat for and failed her board certification exam three (3) times. The Board does not feel there is a pathway to licensure at this time due to her circumstances. Dr. Handorf motioned to table the application for up to nine (9) months to permit the applicant time to achieve Board Certification and should she pass she will be issued full licensure and should she not pass the application may be withdrawn or closed. Dr. Miller seconded the motion and it passed.

**Courtney Forbis, MD** - appeared before the Board without legal representation. Dr. Forbis has been a participant in the Kentucky and Illinois Physician Health Programs (hereinafter “PHP”) during her Residency and Fellowship. Dr. Forbis indicates she self-reported to her program director during her second year of residency. Dr. Michael Baron, Tennessee Medical Foundation (hereinafter “TMF”) Medical Director, advocated for the applicant and informed the Board he does have proof that she has been in compliance with all of her current monitoring. Mr. Robert Ellis motioned to approve licensure contingent upon her signing a contract with TMF with a length that will mirror her current PHP contract. Dr. Christiansen seconded the motion and it passed.

**Makkalon Em, MD** - appeared before the Board without legal representation. Dr. Em is currently a participant in the Pennsylvania PHP where he is exercising a five (5) year monitoring contract. Dr. Em does have a history of relapse. He has a letter of evaluation and recommendation from TMF. Dr. Baron advised the Board, that given the applicants history, a five (5) year monitoring contract with TMF would be most appropriate. Dr. Beckford motioned to grant conditional licensure based on signing and maintaining TMF monitoring and advocacy for five (5) years and for any reports received by Dr. Baron be available for the Board. Dr. Christiansen seconded the motion and it passed.

**Amirtha Dileepan, MD** – appeared before the Board without legal representation. Dr. Blake and Dr. Handorf recused themselves. Dr. Dileepan was dismissed from her Residency Program after several warnings and probationary actions for behavioral problems and competency issues. She was given two (2) years of credit by her last residency program. However, a statement was provided from that program indicating that she had unmet professional responsibilities throughout her residency training and was dismissed from the program. The Board addressed concerns about competency and whether or not the applicant *satisfactorily* completed the two (2) years of training as required by statute. Dr. Miller motioned to deny the application for licensure and Ms. Jennifer Claxton seconded the motion. Dr. Dileepan withdrew her application.

**John Shell, MD** - appeared before the Board without legal representation. Dr. Shell appeared before the Board due to his resignation from his Surgical Residency Program after a Performance Improvement Plan was initiated based on competency concerns. Dr. Handorf recused himself. Dr. Shell informed the Board that he struggled each year of training and eventually realized surgery was not the specialty which best suits him. The Board led a lengthy discussion with the applicant regarding the importance of him choosing a specialty which he can successfully practice in without personal interference when patient outcome is unfavorable. Dr. Beckford motioned to approve his application for full and unrestricted licensure. Dr. Blake seconded the motion and it passed with Dr. Handorf recusing and Dr. Christiansen abstained.

**Robert Windsor, MD** – appeared before the Board with legal representation by Mr. Kelly Street. Dr. Windsor appeared before the Board in January 2019. At that time, his Georgia license reinstatement decision was pending. Since then, the Georgia Medical Board has reinstated his license to an unrestricted license and he is now reappearing at this Boards request to determine a re-entry pathway. Dr. Windsor reported he has been practicing since April 2019 in Georgia doing neuromuscular skeleton intervention. He further reports his federal probationary period will likely conclude in December 2019. The Board led a lengthy discussion on his need to complete a re-entry plan.

Dr. Christiansen motioned to grant unrestricted licensure contingent upon a letter from his preceptor showing clinical competency after three (3) months of remediation, this may include the six (6) weeks he has already completed, but the preceptor must be approved by Dr. Saunders and the preceptor must be knowledgeable in the area of training for which Dr. Windsor is trained in, and contingent on the completion of his federal probation. Ms. Julianne Cole seconded the motion. The motion passed with Dr. Beckford abstained and Dr. Handorf opposed.

The Board recessed for lunch.

### **APPROVAL OF MINUTES**

The Board reviewed the March 19 – March 20, 2019 regular Board meeting minutes. Dr. Johnson requested a few minor changes. Mr. Ellis motioned to approve the minutes with the requested revisions. Dr. Beckford seconded the motion and it carried.

### **TMF Update from Dr. Michael Baron**

- TMF is receiving an increase in referrals for distressed or disruptive behavior. These individuals are not always placed on monitoring but they are placed in therapy or a distressed physician course offered at Vanderbilt, Case Western or at the University of Florida.
- On October 1<sup>st</sup>, 2018 TMF launched use of a phone app for electronic compliance with 12 step meetings.
- TMF has developed a recovery maintenance program for participants who are beyond any formal obligation but still want advocacy or monitoring.
- He is participating on the FSMB workgroup that is working to revise the Sexual Boundaries violation policy.
- Brenda Williams discussed a new program that is underway for fall 2019. This program will function as an online screening tool for mental health, this will prompt an individual to provide a little demographic information and answer several questions. This program is not to be used as an immediate crisis tool. Once they have finished answering all of the questions, it will automatically rate the individual into three different tiers. Resource information will be provided, and it will have the ability for the user to connect to a counselor or if they are in an immediate crisis they can connect with the crisis line.

### **Quiz-Time Update by Dr. David Reagan and team**

- Project is still in the beta testing phase, with 599 enrollees
- Projected launch in June 2019

**Dr. Carla Worley Saunders** – *One Tennessee* is a 501(c)(3) which was created at the desire of the providers in the state to have a collaborative response to substance use disorder.

**Dr. Kim Garvey** – provided the Board with a real time example of how QuizTime functions.

- It lets you learn on your phone, in your work place
- Spaced learning modules which teaches information in micro-bites at a time compared to an information flood all at once

The Board provided positive feedback from their experience with QuizTime over the testing phase.

The Board was requested to either provide the e-mail addresses of all licensees for QuizTime to notify all licensees or for the Board's administrative office to notify all licensees about this service. The Board led a discussion on the best method to inform licensees about QuizTime. Dr. Blake motioned for administrative staff to notify licensees of this service by e-mail. Dr. Handorf seconded the motion and it passed.

### **Buprenorphine Treatment Guidelines Update by Wesley Gamet, with the Department of Mental Health & Substance Abuse Services**

The amended version, of the Tennessee Non-Residential Buprenorphine Treatment Guidelines, was disseminated to the Board for their review. Due to statutory changes, revisions were made to the Guidelines. Mr. Gamet outlined the key changes to the Guidelines and the Board was asked to adopt the revisions. Dr. Handorf motioned to adopt the updated Guidelines into policy. Mr. Ellis seconded the motion and it passed. The revised Guidelines will be available on the Board's website.

### **Petition(s) for Order of Compliance**

**Tomasz Zurawek, MD** – appeared before the Board with legal representation from Ms. Wells Trompitor. On May 18, 2016 the Petitioner's license was placed on probation for a period of three (3) years and until such time as he complied with its requirements. The Board was presented with the affidavit from the Disciplinary Coordinator confirming compliance with the terms of the 2016 order and the Office of General Counsel was not in opposition of the lifting of the Petitioner's probation. Dr. Handorf motioned to approve the order of compliance. Ms. Claxton seconded the motion and it passed.

**Jennifer Donnelly, MD** – appeared before the Board without her legal representation. In 2017, the Petitioner's license was placed on probation for a period of two (2) years. The Board was presented with the affidavit from the Disciplinary Coordinator confirming compliance with the terms of the 2017 order and the Office of General Counsel was not in opposition of the lifting of the Petitioner's probation. Dr. Blake motioned to approve the order and lift the probation. Dr. Miller seconded the motion and it passed.

**Damian McGovern, MD** - appeared before the Board with legal representation from Mr. Robert Kraemer. Dr. McGovern was issued a license by the Board through the condition that he sign and maintain compliance with a TMF contract for five (5) years. TMF has reported compliance with the contract. The Office of General Counsel was not in opposition of the lifting of the Petitioner's probation. Dr. Beckford motioned for approval. Dr. Handorf seconded the motion and it passed.

**Linda Kensington, MD** – appeared before the Board without legal representation. In March 2015, the Board placed her license on probation for two (2) years and required two (2) years of affiliated monitoring. In Sept 2016, another consent order approved by the Board placed her license on probation for an additional two (2) years and the requirement that she continue compliance with 2015 order. The Board was presented with proof that she has complied with both consent orders and the Office of General Counsel was not in opposition of the lifting of the Petitioner's probation. Mr. Ellis motioned for approval. Dr. Christiansen seconded and the motion passed.

### **Update from Committee and Taskforce Members**

**Development Committee** – has not met so there are no updates to provide at this time.

**Advanced Practice Professionals Taskforce** – Ms. Lawrence informed the Board that the PA Committee and Nursing Board have appointed members to this taskforce and administrative staff will work towards scheduling a meeting.

**Office Based Surgery Committee** - Dr. John Hale and Dr. Miller were appointed as new members to the OBS Committee. Dr. Christiansen motioned to approve the appointments and Mr. Ellis seconded. The motion passed.

**IMLCC FSMB Representative** - Dr. Handorf motioned and Dr. Beckford seconded to nominate Ms. Lawrence to fill the role as IMLCC FSMB representative. The motion passed.

### **Order of Modification(s)**

**Dennis Velez, MD** – appeared before the Board with legal representation by Mr. M. Todd Sandahl. The Board was provided a copy of the request for order of modification. On September 27, 2017, the Board placed the Petitioner’s license on probation to run concurrent with his Missouri Settlement Agreement and lasting at least until November 12, 2019. Mr. Sandahl avers that the Petitioner is having difficulty complying with the Missouri order and has been unable to petition for modifications due to no response from the Missouri Board. He further explains that the Petitioner is unable to find employment due the restrictions on his license. Ms. Bratton explained to the Board that the Petitioner is trying to demonstrate impossibility of compliance to comply with his current Tennessee order because he cannot comply with his Missouri order. Ms. Bratton reports the Office of General Counsel’s concern is the lifting of his probation without a restriction to neurosurgery practice. She indicated even that option would be a restriction to his license which does not remedy the employment concern he reports having. Ms. Bratton proposed, as a pathway back to licensure since clearance from the Missouri Medical Board is not an option, is for the Petitioner to successfully complete his current fellowship program and successfully complete a preceptorship. The Board led a lengthy discussion on their concerns about granting an unrestricted license which would permit practice in neurosurgery. They further discussed having a lack of information as to why the Missouri Board is unwilling to revise their order. Mr. Ellis motioned to table this request in order to obtain more information from the Missouri Medical Board on why they are not modifying the Petitioner’s order if it is impossible for him to meet the terms. Dr. Handorf seconded the motion. The motion passed with one recusal from Dr. Christiansen.

**Amphetamine Committee** – Dr. Christiansen reports this Committee has not been able to meet and a report will be provided at the next meeting.

### **Legislative Update by Patrick Powell**

#### **[Public Chapter 12](#)**

This act allows a qualified registered nurse, if the nurse has a cooperative working relationship with a physician and follows hospital protocols, to determine whether a patient presenting to a hospital has an emergency medical condition. Emergency medical condition and qualified registered nurse are defined in the statute. This legislation was brought by the Tennessee Hospital Association.

This act took effect March 20, 2019.

#### **[Public Chapter 61](#)**

This act states that an entity responsible for an AED program is immune from civil liability for personal injury caused by maintenance or use of an AED if such conduct does not rise to the level of willful or wanton misconduct or gross negligence.

This act took effect on March 28, 2019.

### **Public Chapter 117**

This act defines “alternative treatments” to 63-1-164 pertaining to the restrictions and limitations on treating patients with opioids.

This act took effect April 9, 2019.

### **Public Chapter 124**

This act makes a variety of small changes and additions to the TN Together opioid initiative put in place in 2018. One addition is allowing access to CSMD data to a healthcare practitioner under review by a quality improvement committee (QIC), as well as to the QIC, if the information is furnished by a healthcare practitioner who is the subject of the review by the QIC.

The requirement for e-prescribing of all schedule II substances by January 1, 2020 has been delayed to January 1, 2021 and is modified to require all schedule II through V prescriptions to be e-prescribed except under certain circumstances. The law also requires all pharmacy dispensing software vendors operating in the state to update their systems to allow for partial filling of controlled substances.

Definitions are given by this act to the terms palliative care, severe burn and major physical trauma. Along with its new definition, palliative care has now joined severe burn and major physical trauma as an exception to the opioid dosage limits otherwise required under TN Together.

An unintended consequence of last year’s Public Chapter 1039 was on cough syrup. This act establishes that the law does not apply to opioids approved by the FDA to treat upper respiratory symptoms or cough, but limits such cough syrup to a 14 day supply.

Also changed from last year’s act is the requirement to partial fill. Partial filling of opioids is now permissive.

Finally, the opioid limits under have been simplified from the previous year’s act. The twenty day supply and morphine milligram equivalent limit has been eliminated. Three day and ten day requirements remain the same. Instances such as more than minimally invasive surgery, which previously fell under the twenty day provision, now can be treated under the limits of the thirty day category.

This act took effect on April 9, 2019.

### **Public Chapter 144**

This act amends the Prevention of Youth Access to Tobacco and Vapor Products Act by limiting the places in which one may use vapor products. The act defines vapor products and prohibits the use of such products in a number of locations including child care centers, group care homes, healthcare facilities (excluding nursing homes), residential treatment facilities, school grounds, and several other areas. Several locations have specific exceptions set forth in the statute.

This act took effect on April 17, 2019.

### **Public Chapter 156**

This public chapter creates a commemorative certificate of nonviable birth. The licensed healthcare practitioner who attends or diagnoses a nonviable birth, may, based on the practitioner’s best medical judgment and knowledge of the patient, advise a patient that experiences a nonviable birth that the patient may obtain a commemorative certificate from the Department of Health. The Department shall provide a

form on its website that the practitioner shall execute and provide to the patient. Upon the request of the patient, the Department shall issue the commemorative certificate within 60 days after the request and shall charge a fee not to exceed the actual cost for issuing the certificate.

This act took effect April 18, 2019.

### **Public Chapter 183**

This act permits advanced practice registered nurses (APRNs) and physician assistants (PAs) working in a community mental health center to have their chart review done remotely by their collaborating physician. The electronic means by which the transmission occurs must be HIPAA- compliant.

This act took effect April 23, 2019.

### **Public Chapter 195**

The majority of this act pertains to boards governed by the Department of Commerce and Insurance. One small section applies to the health related boards. Currently, the health related boards have an expedited licensure process for military members and their spouses. Previously, a spouse of an active military member had to leave active employment to be eligible for this expedited process. This act removes that requirement. This section applies to all health related boards. The Commissioner of Health is permitted to promulgate rules, but rules are not needed to implement the act.

This act takes effect July 1, 2019.

### **Public Chapter 229**

This act allows healthcare professionals to accept goods or services as payment in direct exchange of barter for healthcare services. Bartering is only permissible if the patient to whom services are provided is not covered by health insurance. All barters accepted by a healthcare professional must be submitted to the IRS annually. This act does not apply to healthcare services provided at a pain management clinic.

This act took effect April 30, 2019.

### **Public Chapter 243**

This act mandates that an agency that requires a person applying for a license to engage in an occupation, trade, or profession in this state to take an examination must provide appropriate accommodations in accordance with the Americans with Disabilities Act (ADA). Any state agency that administers a required examination for licensure (except for examinations required by federal law) shall promulgate rules in regard to eligibility criteria. This legislation was introduced to assist individuals with dyslexia.

This act took effect May 2, 2019 for the purpose of promulgating rules, and for all other purposes, takes effect July 1, 2020.

### **Public Chapter 255**

The act permits a medical professional who has a current license to practice from another state, commonwealth territory, or the District of Columbia is exempt from the licensure requirements of such boards if: (1) the medical professional is a member of the armed forces; and (2) the medical professional is engaged in the practice of the medical profession listed in 68-1-101 through a partnership with the Federal Innovative Readiness Training. The respective health boards may promulgate rules for implementation.



This act took effect April 18, 2019 for the purpose of promulgating rules, and for all other purposes, takes effect July 1, 2019.

#### **Public Chapter 259**

This act allows a licensed nonresidential office-based opiate treatment facility to employ or contract with a physician if: (1) the facility has a physician in the ownership structure; and (2) the employment relationship is evidenced by a written contract. The contract must contain language that does not restrict a physician from exercising independent professional medical judgement in regard to his/her patients.

This act took effect April 30, 2019.

#### **Public Chapter 264**

This act permits the attorney general, reporter, and personnel to access confidential data from the Controlled Substance Monitoring Database upon request for the purposes of investigation or litigation of a civil action. Release of this information to other parties must be accompanied by an appropriate protective order. This bill was brought by the Office of the Attorney General.

This act took effect April 30, 2019.

#### **Public Chapter 268**

This act rewrites the criminal offense for female genital mutilation. Those who knowingly mutilate a female, facilitate the mutilation, or knowingly transport or facilitate the transportation of a female for the purposes of mutilation are subject to a class D felony. Such individuals are also liable civilly. Any physician, physician in training, certified nurse or midwife or any other medical professional that performs, participates in, or facilitates a mutilation shall be subject to disciplinary action by the appropriate licensing board in addition to criminal penalties. Certain medical procedures listed in the statute are not considered violations.

This act takes effect July 1, 2019.

#### **Public Chapter 307**

This act requires the Department of Health to include data related to complications of induced abortions, including the number and type of complications in its annual induced termination of pregnancy (ITOP) data report. The department shall not release any data that could identify individual patients. The department may promulgate rules necessary to implement this act.

This act took effect May 8, 2019 for the purpose of promulgating rules, and for all other purposes will take effect July 7, 2019.

#### **Public Chapter 327**

This act requires the Commissioner of Health, by January 1, 2020, to study instances when co-prescribing of naloxone with an opioid is beneficial and publish the results to each prescribing board and to the board of pharmacy. The findings shall be included in the chronic pain guidelines adopted by the Chronic Pain Guidelines Committee.

This act took effect May 8, 2019.

### [Public Chapter 357](#)

This act states that a massage establishment license is no longer required for the office of a licensed medical doctor, osteopathic doctor, or chiropractor if a massage for compensation is provided within that office by a licensed massage therapist.

This act became effective May 10, 2019.

### [Public Chapter 424](#)

This act modifies the Child Rape Protection Act of 2006 by requiring a physician to report when a minor who is at least 13 but no more than 17 requests an elective abortion. Reporting is required only if the physician has reasonable cause to believe child abuse is involved. Requirements for reporting abortions for minors under the age of thirteen remain the same.

This act took effect May 21, 2019.

### [Public Chapter 447](#)

This act permits law enforcement agencies to subpoena materials and documents pertaining to an investigation conducted by the Department of Health prior to formal disciplinary charges being filed against the provider. This bill was brought by the Tennessee Bureau of Investigation.

This act went into effect May 22, 2019.

### **\*Insurance Legislation\***

Multiple acts were passed during the 2019 legislative session that affect healthcare plans and insurance and create certain obligations on providers and facilities. A few pieces of legislation include [Public Chapter 407](#) and [Public Chapter 239](#). Healthcare providers and facilities are encouraged to review these to make sure they meet their statutory obligations.

### **ADMINISTRATIVE OFFICE REPORTS**

The Board reviewed the statistical licensing report for the time period of March 1<sup>st</sup> to April 30<sup>th</sup>, 2019.

#### New Applications Received

- Medical Doctors 355
- Compact MD 34
- Locum Tenens 1
- Special Training 1
- Single Purpose 12
- St. Jude 0
- Medical Spas 13
- MD X-Ray Operator (Full) 43
- MD X-Ray Operator (Limited) 15
- Surgical Assistants 12
- Office Based Surgery 1

#### Total Number of Reinstatements

- Medical Doctors 29

- MD X-Ray Operator 17

Total New Licenses Issued

- Medical Doctors 283
- Administrative 2
- Compact MD 40
- Locum Tenens 2
- IMG 1
- Telemedicine 0
- Special Training 3
- Single Purpose 0
- St. Jude 0
- MD X-Ray Operator (Full) 62
- MD X-Ray Operator (Limited) 12

Total Number Failed to Renew – 154

Total Number of Retired Licenses – 77

Total number of active licensees as of April 30, 2019 is 22,977.

Total number of active licensees as of April 30, 2019 with a Tennessee mailing address is 16,954.

Total number of Telemedicine License – 328

Total number of Special Training License – 76

Total number of Active Physician Assistants – 2,456

Orthopedic Physician Assistants – 14

Total number of Active X-Ray Operators – Full – 2,728 Limited – 1,163

Total number of Active Perfusionists – 140

Total number of Active Acupuncturists – 234

Acupuncture Detoxification Specialists – 51

Total number of Active Radiologist Assistants – 17

Total number of Office Based Surgery licensed – 16

Total number of Active Genetic Counselors – 206

Total number of Active Polysomnographers – 534

**REPORT FROM THE OFFICE OF INVESTIGATIONS**

The Board accepted receipt of the previously disseminated Office of Investigations report.

Currently in the Office of Investigations the following are being monitored:

- twenty-four (24) suspended medical doctor licensees
- fifty-six (56) medical doctor licensees on probation
- forty (40) medical doctor licensees under a board order
- sixty-five (65) medical doctor licensees are revoked or surrendered
- zero (0) x-ray technologist licensees suspended
- one (1) x-ray technologist licensee on probation
- twelve (12) x-ray technologist licensees under a board order
- three (3) x-ray technologist licensees revoked or surrendered

## **CONDUCT NEW BUSINESS**

### **Ratify new licensees**

The Board reviewed the list of new licenses approved since the last Board meeting. Dr. Handorf motioned to ratify the list. There was a second and the motion passed.

### **Request to send Attorney with the Office of General Counsel to upcoming FARB Seminar**

Dr. Beckford motioned to approve the request to send one (1) attorney to the fall 2019 FARB Seminar. Dr. Handorf seconded the motion and it passed.

## **OFFICE OF GENERAL COUNSEL REPORT**

Ms. Bratton provided the following report from the Office of General Counsel:

1. The examination rules, continuing education rules, intractable pain repeal rules and licensure rules for surgical assistants, limited licensure, temporary licensure, and St. Jude are in the internal review process.
2. The rules to cease issuance of inactive licensure status and begin querying the national practitioner databank on every application are in the internal review process.
3. The fee increase rules are at the Attorney General's Office and will be filed for an effective date with the Secretary of State once the Office of General Counsel receives approval.
4. There are four (4) pending appeals from board action.
5. As of January 14<sup>th</sup>, there were seventy-one (71) disciplinary complaints against fifty (50) respondents pending in the Office of General Counsel.
6. There is one (1) civil lawsuit pending that names Dr. Ali, as President of the Board of Medical Examiners, in his official capacity. The suit involves the enforcement of the 48 hour waiting period for an abortion and includes the Memphis Center for Reproductive Health, Planned Parenthood – Greater Memphis Region, Planned Parenthood – East Tennessee and the Knoxville Center for Reproductive Health.
7. Alton Ingram, MD has filed a lawsuit naming Dr. Ali, Dr. Zanolli, Dr. Saunders, Dr. Arnold, and Ms. Huddleston regarding the handling of his application and appeal. The Attorney General's Office is representing the named parties, and as such in the handling of that matter, all communication from Dr. Ingram should be referred to the Attorney General.

## **Overview of the April 25 – 27<sup>th</sup>, 2019 FSMB Annual Meeting in Fort Worth, Texas**

Dr. Johnson provided the Board with the following highlights from the FSMB meeting:

- Dr. Baron, with TMF, talked about the opioid crisis and the need for pro-active actions
- The keynote speaker discussed measuring competency and being engaged as the opposite of physician burnout
- Discussion on sexual misconduct and boundary violations – these are repeated behaviors and not a one-time event and they can even occur with a chaperone present. The chaperone may not be trained, may be distracted or fearful of their job if they speak out.
- Discussion and tips on communicating with the media
- An FDA representative proclaimed that if there are no other options for disposal then flushing opiates is an option. That is in recognition that the most common misuse of opiates is someone else accessing another person's prescription.

Dr. Johnson discussed the by-laws amendment that was previously submitted by the Board to increase the number of public members on the Federation Board of Directors. That amendment was tabled last year and was passed this year.

**Continuing Medical Education Agreed Citation(s)**

Dr. Johnson identified errors in three continuing education citations. Staff noted the necessary corrections and will send revisions to the licensees. These citations will be ratified at a later date.

The following continuing education related agreed citations were previously distributed to the Board for review: Jean-Claude Loiseau, MD (license #30033), Jennifer Wilbourne, MDX (license #64869), Richard Pearce, MD (license # 15829) and Tami Latham, MDXL (license #3970). Mr. Ellis motioned to ratify the agreed citations as a whole. Ms. Cole seconded the motion and it passed.

**Unlicensed Practice Agreed Citation(s)**

The following unlicensed practice related agreed citations were previously distributed to the Board for review: Becky L. Reid (unlicensed practice polysomnography) and Christopher E. Slaymaker (unlicensed practice polysomnography). Dr. Handorf motioned to approve the agreed citations and Mr. Ellis seconded the motion. The motion passed.

The Board recessed and will continue with Board business during day 2, May 29th, 2019.



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

**Day Two of the Regular Meeting of the Tennessee Board of Medical Examiners  
Wednesday, May 29, 2019**

The regular board meeting of the Tennessee Board of Medical Examiners was called to order at 8:46 a.m. in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Dr. W. Reeves Johnson, Board President.

Board members present:	W. Reeves Johnson, MD, President
	Melanie Blake, MD, Vice President
	Charles Handorf, MD, Secretary
	Phyllis Miller, MD
	Neal Beckford, MD
	John Hale, MD
	Julianne Cole, Consumer Member
	Robert Ellis, Consumer Member

Jennifer Claxton, Consumer Member  
Deborah Christiansen, MD

Board member(s) absent: None

Staff present: Mary K. Bratton, JD, Chief Deputy General Counsel  
Rene Saunders, MD, Medical Consultant, BME  
Angela Lawrence, BME Executive Director  
Candyce Wilson, Administrative Director

**Michael LaPaglia, MD** – The copy provided to the Board is incomplete. The Board will revisit this matter later in this meeting.

### **Consent Order(s)**

**Tracie Tubbs, PA** – did not appear before the Board nor did a legal representative appear on her behalf. Ms. Andrea Huddleston represented the State. Respondent has been licensed since January 31, 2015, which expires on January 31, 2020. Due to an error, Respondent was issued a full license rather than a temporary license. She has never successfully completed the licensure examination required for full licensure. Respondent falsely claimed to one employer or potential employer that she was certified by the National Commission on Certification of Physician Assistants (hereinafter “NCCPA”). Respondent forged documentation in furtherance of this scheme. Respondent falsely claimed to another employer that she was licensed as a physician assistant in the state of Alabama. Respondent forged a licensure document and provided same to the employer or proposed employer. Respondent was ultimately terminated by an employer based on her fraudulent conduct and evidence that she was impaired at work. Based on the above conduct and after an investigation, the NCCPA permanently revoked Respondent’s certification eligibility. This order shall revoke Respondents license effective from the date of entry of this order. Respondent agrees to surrender her Drug Enforcement Administration registrations for all schedules of controlled substances. Respondent shall pay actual and reasonable costs of this case not to exceed one thousand dollars (\$1,000.00). Dr. Beckford motioned for approval. Dr. Handorf seconded the motion and it passed.

**Urma Boston, MD** – did not appear before the Board nor did legal representation appear on her behalf. Mr. Peyton Smith represented the State. Respondent has been licensed since July 31, 2006 with an expiration date of December 31, 2020. From September 2016 until March 2018, Respondent wrote twenty-nine (29) prescriptions for thirty (30) tabs of Phentermine to a friend without establishing a doctor/patient relationship, without performing a physical examination, without making a diagnosis and formulating a therapeutic plan, and without creating and maintaining a medical record. Respondent failed to check the CSMD before prescribing to the friend and the friend also received forty (48) prescriptions for thirty (30) tabs of phentermine from another practitioner during the same time period. From November 2016 until January 2018, Respondent wrote ten (10) prescriptions for thirty (30) tabs of Phentermine to a co-worker without establishing a doctor/patient relationship, without performing a physical examination, without making a diagnosis and formulating a therapeutic plan, and without creating and maintaining a medical record. This order shall reprimand the Respondents license effective the date of entry of this order. Respondent must enroll in and successfully complete within one (1) year, the two (2) day medical course entitled “Medical Documentation: Clinical, Legal and Economic Implications for Healthcare Providers”. Respondent must enroll in and successfully complete within one (1) year the course entitled “Prescribed Controlled Drugs”. Respondent must pay actual and reasonable costs of this case not to exceed two thousand five hundred dollars (\$2,500.00). Respondent shall pay thirty-nine (39) “Type B” Civil Penalties for a total of nineteen thousand five hundred dollars

(\$19,500.00). Dr. Christiansen motioned to approve the order. Dr. Beckford seconded the motion and it passed.

**Ryan Dickens, AMDX** – did not appear before the Board nor did legal representation appear on his behalf. Dr. Christiansen recused herself. Mr. Peyton Smith represented the State. Respondent has been licensed since May 26, 2010 with an expiration date of October 31, 2021. From approximately November 2017 until September 2018, Respondent worked as a medical x-ray operator for eleven (11) months while his medical x-ray operator certificate was expired. This order shall reprimand the Respondents license effective the date of entry of this order. Respondent shall pay nine (9) “Type C” civil penalties for a total of nine hundred dollars (\$900.00). Respondent must pay actual and reasonable costs of this case not to exceed two thousand hundred dollars (\$2,000.00). Dr. Blake motioned to approve the order. Dr. Handorf seconded the motion and it passed with one (1) recusal by Dr. Christiansen.

**Ronald McDow, MD** – did not appear before the Board nor did legal representation appear on his behalf. Dr. Christiansen recused herself. Mr. Peyton Smith represented the State. Respondent has been licensed since February 2, 1982 with an expiration date of November 30, 2019. From 2014 until 2017, Respondent was in a romantic relationship with P.M. P.M., and P.M.’s daughter and son lived with Respondent from 2015 until 2017. Respondent has maintained his medical license since 1982 but has not regularly engaged in practice. He has not regularly prescribed medications since 2008 but he did continue to possess prescription pads until about December 2017. One or more such prescription pads were stored in an office in Respondent’s private home. Around August 2016 through November 2017, numerous prescriptions were written from the pad(s) at Respondents home for P.M., as well as for her daughter and son. Respondent denies writing the prescriptions but admits failure to adequately safeguard the prescription pad(s). Respondent admits to having treated family and friends in the past as a matter of convenience without maintaining medical records for them. This order shall place Respondents license on probation for a period of at least three (3) years, effective the date of entry of this order. Respondent must enroll and complete the course entitled “Medical Ethics, Boundaries & Professionalism”. Respondent shall pay actual and reasonable costs of this case not to exceed five thousand dollars (\$5,000.00). Respondent shall pay thirty-two (32) “Type B” civil penalties for a total of six thousand four hundred dollars (\$6,400.00). Dr. Miller motioned to approve the order. Mr. Ellis seconded the motion and it passed with one (1) recusal by Dr. Christiansen.

**Mohammed Yousuf, MD** – did not appear before the Board but was represented by Mr. James Bradshaw. Ms. Paetrea Morgan represented the State. Respondent has been licensed since May 27, 1998, which expires on May 31, 2020. During the spring of 2018, Respondent treated approximately ten (10) residents of The Bridge at Ridgely skilled nursing facility. On April 8, 2018, Respondent arrived at The Bridge with prewritten progress notes for his patients. The Respondent submitted prewritten progress notes for at least six (6) months. With the exception of the date, the progress notes for the Respondent’s patients were identical from month to month. The Respondent dated progress notes for the first of each month even if he saw the patient before or after that date. The Respondent submitted a progress note for a patient that was discharged from The Bridge at Ridgely four days prior. This order shall place Respondents license on probation for a period of at least one (1) year, effective the date of entry of this order. Respondent shall pay ten (10) “Type B” civil penalties for a total of four thousand dollars (\$4,000.00). Respondent must submit proof of completion of the medical course entitled “Medical Documentation: Clinical, Legal and Economic Implications for Healthcare Providers”. Respondent shall pay actual and reasonable costs of this case not to exceed six thousand dollars (\$6,000.00). After the expiry of the probationary period, Respondent must petition for an Order of Compliance if he wishes for the restrictions to be lifted. Dr. Hanforf motioned for approval. Dr. Beckford seconded the motion and it passed.

**Toby Hampton, MD** – did not appear before the Board nor did his legal representative Ms. Alex Fisher. Ms. Jennifer Putnam represented the State. Respondent’s medical license number 37736 shall immediately be placed on suspension. Respondent is currently pending litigation involving criminal charges and has voluntarily admitted himself into treatment. This order will suspend the Respondents medical license pending the completion of the criminal matter and the completion of his treatment. Once the Respondent enters into a monitoring agreement with the TMF and the TMF notifies the Board that Respondent is safe to practice medicine, the Respondent will then be eligible to enter into a Consent Order placing his license on probation with terms. The probationary period and terms specified in the Consent Order will become effective once ratified by the Board. Dr. Hale motioned to approve the order. Dr. Miller seconded the motion. The motion passed.

**Michael LaPaglia, MD** – did not appear before the Board nor did legal representation appear on his behalf. Dr. Christiansen recused herself. Mr. Andrew Coffman represented the State. Respondent has been licensed since July 24, 2007, which expires on November 30, 2019. Respondent’s medical license was placed on probation on November 18, 2014 and remains on probation. Respondent was required to maintain advocacy with TMF. Respondent surrendered his DEA registration in March 2014. In 2018, Respondent opened a practice called L & B Healthcare in conjunction with Charles Brooks, MD, in order to provide medical assisted treatment for patients with substance use disorders. L & B operated between March 2018 and October 15, 2018. Respondent saw L & B patients at his own home, at patient residences, and Respondent saw two (2) patients at a McDonalds. During this time period, Respondent wrote prescriptions for controlled substances to L & B patients. Respondent used blank pre-signed, by Dr. Brooks, prescription pads. Dr. Brooks was aware Respondent was engaging in this conduct. Respondent plead guilty to two (2) federal felonies as a result of his unlawfully writing prescriptions for controlled substances using the DEA number of Dr. Charles Brooks. On January 2, 2019, Respondents license was summarily suspended based on the above conduct. On March 20, 2019, Respondent voluntarily provided truthful testimony regarding his conduct during the contested case hearing of Dr. Charles Brooks in front of this Board. This order shall suspend Respondents license for not less than six (6) months from the date of its initial suspension, January 2, 2019. Respondent shall enter into a two (2) year monitoring agreement with TMF, comply with all requests and recommendations of TMF, shall cause quarterly reports be issued to the Board and pay costs associated with TMF monitoring. Respondent shall remain suspended until TMF advocacy is obtained. Following the lifting of the suspension, Respondent’s license shall be placed on probation for a period of at least five (5) years. Respondent shall be prohibited from prescribing controlled substances and from delegating that authority to any other practitioner for a period of two (2) years from the lifting of the suspension. After those two (2) years, Respondent may appear before the Board to request permission to prescribe controlled substances. Before requesting that permission, Respondent must complete the course “Prescribing Controlled Drugs: Critical Issues and Common Pitfalls”. The order outlines stipulations if the Board shall grant Respondent permission to prescribe controlled substances. Respondent shall be prohibited from supervising or collaborating with an APRN or PA during his probation. Respondent shall pay one (1) “Type A” Civil Penalty for a total of one thousand dollars (\$1,000.00). Respondent shall pay actual and reasonable costs of this case not to exceed three thousand dollars (\$3,000.00).

The Board held a lengthy discussion regarding this order. Dr. Blake and Dr. Handorf acknowledged that the Respondents testimony in the case against Dr. Charles Brooks was extremely valuable. Dr. Blake averred that the Respondent was a driver in the business, he found the patients and wrote the prescriptions, and his role in the scheme was substantial. Ms. Claxton, Mr. Ellis and Ms. Cole spoke against allowing him to ever write controlled substance prescriptions again. Dr. Blake supports that the Respondent is an appropriate candidate for lifetime TMF monitoring and advocacy and Dr. Baron concurred. If the Board denies this order, Dr. LaPaglia’s license will remain summarily suspended. Dr. Hale motioned to deny the order. Ms. Claxton seconded the motion and it passed with one (1) recusal from Dr. Christiansen.



*Iris Room Panel: Dr. Johnson, Dr. Handorf and Mr. Ellis*

**Petition for Declaratory Order**

**Xiangxia Liu, MD v. State of Tennessee Board of Medical Examiners**

**Iris Room**

**Administrative Law Judge: Elizabeth Cambron**

**Panelists: W. Reeves Johnson, MD; Charles Handorf, MD; Robert Ellis, Consumer Member**

**Counsel for State: Mary Katherine Bratton, Chief Deputy General Counsel**

**Counsel for Petitioner: James Bradshaw III, Esq.**

Petitioner, Dr. Xiangxia Liu, appeared before the full Board in March 2019 with an application for licensure and to request a petition for declaratory order. Mr. James Bradshaw presented his case with two (2) witnesses.

Ms. Mary Katherine Bratton presented the State's position, in opposition of granting the petition due to the Petitioner not meeting the statutory requirements for licensure.

Petitioner, Xiangxia Liu, MD, attended medical school in Guangzhou, China from 1996 to 2001. Additionally, Dr. Liu received a Master of Medicine (Plastic and Reconstructive Surgery) in 2003, and in 2009 Dr. Liu received a Doctor of Medical Science (Breast Surgery), both from Sun Yat-sen University. Dr. Liu completed a five-year plastic and reconstructive surgery residency from 2001 to 2006 at First Affiliated Hospital of Sun Yat-sen University and from 2007 to 2013 was an attending surgeon at First Affiliated Hospital of Sun Yat-sen University. Upon completion of training, Dr. Liu was a research scholar with the Division of Plastic and Reconstructive Surgery at Stanford University from 2013 to 2015. From 2015 to 2016, Dr. Liu was Associate Professor of the Division of Plastic and Reconstructive Surgery at First Affiliated Hospital of Sun Yat-sen University.

After postgraduate surgical training, Dr. Liu completed a one-year plastic surgery fellowship from 2012 to 2013 at Shanghai Ninth People's Hospital, in China. IN 2016 to 2017, Dr. Liu successfully completed a one-year craniofacial surgery fellowship at the University of Tennessee Health Science Center. From 2017 to 2018, Dr. Liu successfully completed a one-year burn surgery fellowship at the University of Tennessee Health Science Center, which he will successfully complete in June of 2019.

There is a critical need for such specialty training in Memphis and Dr. Liu has been offered a position as Assistant Professor in the Department of Plastic Surgery at the University of Tennessee, to fulfill this need. Dr. Liu has not completed a three-year ACGME-accredited residency in the United States. The combination of the three specialized fellowships is a unique combination of surgical techniques and skills needed to provide surgical support to trauma centers in Memphis and its service area.

The Board reviewed the proposed final order provided by Mr. Bradshaw. Dr. Handorf motioned to accept all six (6) Findings of Fact. Mr. Ellis seconded the motion and it passed. Dr. Johnson stated a new paragraph should be added to the Conclusions of Law. Dr. Handorf motioned to accept the Conclusions of Law with the addition of the new paragraph. Mr. Ellis seconded the motion and it passed.

Dr. Johnson requested to amend the Policy Statement to list out the entire mission of the Board. Mr. Ellis motioned to make that addition and accept the Policy Statement. Dr. Handorf seconded the motion and it passed. Mr. Ellis motioned to grant licensure effective today. Dr. Handorf seconded the motion. The motion passed with a unanimous vote.

**Petition for Declaratory Order**

**P. Laxminarayan Bhandari, MD v. State of Tennessee Board of Medical Examiners**

**Iris Room**

**Administrative Law Judge: Elizabeth Cambron**

**Panelists: W. Reeves Johnson, MD; Charles Handorf, MD; Robert Ellis, Consumer Member**

**Counsel for State: Mary Katherine Bratton, Chief Deputy General Counsel**

**Counsel for Petitioner: James Bradshaw III, Esq.**

Petitioner, Dr. P. Laxminarayan Bhandari, appeared before the full Board in March 2019 with an application for licensure and to request a petition for declaratory order. Mr. James Bradshaw and Ms. Mary Katherine Bratton presented their cases.

Dr. Bhandari attended medical school at Kasturba Medical College Mangalore in India. He then completed a three (3) year general surgery residency from 2008 to 2011 at University of Calicut in India. Upon completion of his training in India, he trained for (3) months in a facial plastic surgery fellowship in the Netherlands from March 2015 to June 2015. He was the senior Resident in Plastic Surgery at Calicut Medical College, in India, from September 2014 to December 2015. After postgraduate surgical training, from January 2016 to June 2018, Dr. Bhandari completed a two-and-a-half year fellowship in hand and microsurgery at the Christine K. Kleinert Institute in Kentucky. In July 2018, he began a one (1) year fellowship in pediatric craniofacial surgery from July 2018 to June 2019 at the University of Tennessee Health Science Center. Dr. Bhandari has an active, unrestricted medical license in Kentucky. There is a critical need for such specialty training, especially Plastic Hand Surgery, in Memphis and Dr. Bhandari has employment opportunities in Memphis that will fulfill this need. Dr. Bhandari has not completed a three (3) year ACGME-accredited residency in the United States. The combination of specialized fellowships is a unique combination of surgical techniques and skills needed to provide surgical support to trauma centers in Memphis and its service area.

The Board reviewed the proposed final order provided by Mr. Bradshaw. The Board amended the proposed order and motioned to accept, with revisions, the Findings of Fact, Conclusions of Law and the Policy Statement. The Board motioned to grant licensure effective today and it passed unanimously.

*Poplar Room Panel: Dr. Blake, Dr. Hale, Ms. Cole*

**Petition for Declaratory Order**

**Sidi Y. Noor, MD v. State of Tennessee Board of Medical Examiners**

**Poplar Room**

**Administrative Law Judge: Steve Darnell**

**Panelists: Melanie Blake, MD; John Hale, MD; Julianne Cole, Consumer Member**

**Counsel for State: Andrea Huddleston, Deputy General Counsel**

**Counsel for Petitioner: Mark T. Freeman, Esq.**

Petitioner's previous medical license was revoked, with leave to re-apply after one (1) year, based on the stipulated fact that Dr. Noor had inappropriately prescribed controlled substances to approximately seventy-five (75) patients for pain management, without performing appropriate examinations, obtaining appropriate histories or diagnostics and otherwise failing to establish a good diagnosis, all of which constituted unprofessional, dishonorable and unethical conduct; gross malpractice or a pattern of

continued or repeated malpractice, ignorance, negligence or incompetence; and other violations of relevant statutes and rules within the Board's regulatory authority. In 2011, Petitioner applied for a new medical license. On May 24, 2011, the Board denied his application as Petitioner failed to cite any remedial steps he had taken to establish that he could practice safely. Petitioner again filed an application for a new medical license in August 2012. The Petitioner accepted a new license with several restrictions in January 2013. In June 2013, Petitioner requested relief of those restrictions. The Board heard this matter in a contested case on January 29, 2014. The petition was denied and the Petitioner did not seek judicial review. In March 2015, through new counsel, Petitioner again filed a Petition for Declaratory Order, seeking lifting of all restrictions on his medical license. The Board denied his petition in May 2015 without sending the matter to a contested case. In November 2016, Petitioner filed a petition for order of compliance seeking to lift all restrictions on his license. The Board denied the petition in January 2017. In April 2017, through another new counsel, Petitioner filed another Petition for Declaratory Order, seeking lifting of all restrictions. The Board denied the petition at a hearing in May 2017. In July 2017, Petitioner filed for Petition for Judicial Review in the Chancery Court for Davidson County. In December 2018, the matter was remanded by the Chancery Court for the convening of a contested case hearing "to determine whether Dr. Noor's license restrictions should be lifted, remain permanently, or remain for a certain length of time as the Board sees fit. The restrictions on Petitioner's medical license do not contain an expiration date nor does the Letter of Conditional Licensure address a process for removal of the restrictions. It is the position of the Department that the restrictions on Petitioner's medical license are permanent. In any event, Petitioner has failed to meet his burden with sufficient proof to establish that cause for removal of the restrictions exists.

The Board reviewed the proposed order and made revisions as desired. After discussion and making amendments the Board motioned to accept the revised Findings of Fact, the Conclusions of Law and the Policy Statement. The Board further motioned to deny the Petitioners request for relief. All motions passed.

The Petition for Declaratory Order and the relief therein requested is denied. However, the restrictions on his medical license are clarified and amended as follows: (a) Petitioner is permanently prohibited from owning or practicing in a pain management clinic; (b) Within sixty (60) days, Petitioner shall obtain practice monitoring through Affiliated Monitors, Inc. or other similar clinical practice monitoring agency approved by the Board's Medical Consultant and shall provide proof of same to the Board. Petitioner must obtain practice monitoring to audit 20% of his charts involving controlled substances and to provide quarterly reports for a period of five (5) years to the Board's Medical Consultant. The monitoring report must address Petitioner's recordkeeping and clinical decision-making. Charts to be reviewed will be selected by the monitoring agency and/or the Board's Medical Consultant. The restrictions in the Letter of Conditional Licensure dated November 2012 shall remain in place until proof of having entered into such monitoring agreement has been provided to the Board. Subject to compliance with these terms, Petitioner may practice in either a group or solo setting. Failure to comply with these restrictions and/or recommendations of the monitoring agency will be considered a violation of Board order and will be brought immediately before the Board for consideration of further disciplinary action, including permanent revocation; (c) Petitioner is permanently prohibited from seeking DEA registration for Schedule II controlled substances but, upon compliance with entering into practice monitoring as required by this Order, Petitioner may seek registration for Schedule III, IV and V controlled substances.

This concludes the Board of Medical Examiners day 2 meeting.