Tennessee Board of Medical Examiners  
Regular Board Meeting  

Tuesday, September 17, 2019  
Wednesday, September 18, 2019  

MINUTES

The regular board meeting of the Tennessee Board of Medical Examiners was called to order at 8:35 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  
John Hale, MD  
Robert Ellis, Consumer Member  
Phyllis Miller, MD  
Deborah Christiansen, MD  
Stephen D. Loyd, MD  
Samantha McLerran, MD  
Jennifer Claxton, Consumer Member

Board member(s) absent: Julianne Cole, Consumer Member

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

I. INTRODUCTION OF DR. SAMANTHA McLERRAN, NEW BOARD MEMBER

RULEMAKING HEARING, 8:30 A.M. CST

Ms. Mary Katherine Bratton described the procedural steps that have been taken in preparation for the rulemaking hearing and established that all formalities were met. The same roll call taken early is accurate meaning the following members were present for voting: Dr. Reeves Johnson, Dr. Melanie Blake
Dr. Charles Handorf, Dr. Neal Beckford, Dr. John Hale, Mr. Robert Ellis, Dr. Phyllis Miller, Dr. Deborah Christiansen, Dr. Stephen Loyd and Dr. Samantha McLerran. Ms. Jennifer Claxton joined the meeting later and was not present for the rulemaking hearing.

This rulemaking hearing proposes new rules and rule amendments to Board rules 0880-02-.08, 0880-02-.09, 0880-02-.10, 0880-02-.19 and 0880-05-.08.

Rule 0880-02-.08 Examination is amended by deleting subparagraph (2)(c) in its entirety and substituting instead the following language, so that as amended, the new subparagraph shall read:

(c) If an applicant fails any step of the USMLE or FLEX examinations more than six (6) times, then the Board shall require proof of board-certification by an ABMS-recognized specialty board and proof of meeting requirements for Maintenance of Certification prior to application before consideration for licensure.

Rule 0880-02-.09 Licensure Renewal and Reinstatement is amended by deleting subparagraphs (2)(c) and (2)(d) in its entirety and substituting instead the following language, so that as amended, the new subparagraphs shall read:

(c) submit, along with the application, payment of the past due renewal fee; and the late fee provided in rule 0880-02-.02; and

(d) submit, along with the application, documentation of successful completion of twenty (20) hours of continuing medical education in compliance with rule 0880-02-.19 for each period of twelve (12) months or less preceding the reinstatement request, up to eighty (80) hours. An applicant for reinstatement who has been out of clinical practice for more than two years may be required to complete re-entry requirements to be determined by the board based on the applicant’s period of clinical inactivity, record of CME, and other relevant factors.

Rule 0880-02-.10 Licensure, Retirement/Inactivation and Reactivation is amended by deleting subparagraph (3)(b) in its entirety and substituting instead the following language, so that as amended, the new subparagraph shall read:

(b) Submit, along with the application, documentation of successful completion of twenty (20) hours of continuing medical education in compliance with rule 0880-02-.19 for each period of twelve (12) months or less preceding the reactivation request, up to forty (40) hours. An applicant for reinstatement who has been out of clinical practice for more than two years may be required to complete re-entry requirements to be determined by the board based on the applicant’s period of clinical inactivity, record of CME, and other relevant factors.

Rule 0880-02-.19 Continuing Medical Education is amended by deleting subparagraphs (1)(a), (1)(d), (3)(a), (3)(c), (4)(a) and (4)(b) in their entirety and substituting instead the following language, so that as amended, the new subparagraphs shall read:

(1) (a) All licensees must complete forty (40) hours of continuing medical education courses during the twenty-four (24) months that precede licensure renewal.

(1) (d) Waiver – The Board may waive the requirements of these rules in cases where illness, disability, or other undue hardship beyond the control of the licensee prevents a licensee from complying. Requests for waivers must be sent in writing to the Board prior to the end of the renewal period during which the continuing medical education is due prior to application for renewal.
(3) (a) Hours must be awarded by an organization accredited as a sponsor of continuing medical education by the Accreditation Council for Continuing Medical Education (ACCME); and

(b) Hours must be designated or certified by the awarding organization as meeting the criteria for Category 1 continuing medical education credit of the American Medical Association’s Physician’s Recognition Program; or be designated by the AAFP as meeting the criteria of the AAFP’s prescribed credits for continuing medical education or be designated by the AOA as meeting the criteria of the AOA’s prescribed credits for continuing medical education; or

(c) If a licensee provides disciplinary case review at the request of the Department, and submits a written report of his or her conclusions regarding such disciplinary case review, the reviewing licensee shall receive one (1) hour of continuing medical education credit for each hour spent reviewing the materials and preparing the report. A maximum of ten (10) hours credit shall be awarded for reviewing disciplinary case materials during the twenty-four (24) months that precede licensure renewal.

(4) (a) Any licensee who fails to obtain the required continuing medical education hours or otherwise comply with the provisions of these rules may be subject to disciplinary action.

(4) (b) Continuing medical education hours obtained as a result of compliance with the terms of Board Orders in any disciplinary action or obtained pursuant to licensure or renewal restriction/conditions mandated by the Board shall not be credited toward the continuing medical education hours required to be obtained during any renewal period.

Rule 0880-05-.08 Maintaining Certification, Renewal, Retirement and Reinstatement is amended by deleting subparagraphs (3)(c) and (3)(d) in their entirety and substituting instead the following language, so that as amended the new subparagraphs shall read:

(c) To reactivate an expired certification submit, along with the Board’s Reactivation Application, documentation of successful completion of ten (10) hours of continuing education in compliance with rule 0880-5-.09 for each period of twelve (12) months or less preceding the reinstatement request, up to forty (40) hours. An applicant for reinstatement who has been out of clinical practice for more than two years may be required to complete re-entry requirements to be determined by the board based on the applicant’s period of clinical inactivity, record of CME, and other relevant factors.

The public comments sheet had zero (0) entries.

Proposed amendment, by OGC and Administrative Staff, for a grace period:

Until December 31, 2021 in response to an audit the board will accept CMEs obtained on a calendar cycle or those obtained during a renewal cycle. All licenses whose license expire after January 1, 2022 will be required to submit proof of CME for the past licensure renewal cycle rather than the calendar year cycle. Dr. Christiansen motioned to accept this amendment. Dr. Beckford seconded the motion and it passed.

Dr. Handorf motioned to approve the statement of economic impact to small businesses. Dr. Beckford seconded the motion and it passed. Dr. Hale motioned to approve the regulatory flexibility analysis. Dr. Beckford seconded the motion and it passed.

The Board voted to approve all of the proposed rules and amendments by roll call vote: Dr. Phyllis Miller – aye, Dr. Melanie Blake – aye, Dr. Reeves Johnson – aye, Dr. Charles Handorf – aye, Dr. Neal Beckford
– aye, Dr. Deborah Christiansen – aye, Dr. Samantha McLerran – aye, Dr. John Hale – aye, Mr. Robert Ellis – aye and Dr. Stephen Loyd – aye.

0880-02-.25 In the process of making the application, there were some additions that made it into the redline version of the rules but it did not make it to the secretary of state’s office. Due to the discrepancy, Ms. Bratton asked the Board to vote on the rules as redlined before them today. The rule reads as follows:

(1)(b) Has successfully completed a surgical assistant training program during the applicants service as a member of any branch of the armed forces of the United States by submitting a transcript or diploma directly from the program and an affidavit as required in the Board’s registration application materials; or

(1)(b)(3) Has practiced as a surgical assistant within the six (6) months prior to July 1, 2017, provided the applicant registers with the board by December 31, 2019. Satisfactory evidence requires an affidavit from a physician or physicians for whom or with whom the applicant practiced, included the time period of that practice.

(1)(d) All applicants shall disclose the circumstances surrounding any conviction of any criminal law, except minor traffic violations. The applicant shall also cause to be submitted to the Boards administrative office directly from the vendor identified in the Boards registration application materials, the result of a criminal background check.

(8)(b) Violations – Any licensee who fails to obtain the required continuing education hours or otherwise comply with the provisions of these rules may be subject to disciplinary action.

(8)(c) Waiver – The Board may waive the requirements of these rules in cases where illness, disability, or other undue hardship beyond the control of the licensee prevents a licensee from complying. Requests for waivers must be sent in writing to the Board prior to the end of the renewal period during which the continuing education is due.

There were no public comments on the proposed rule changes stated above.

The Board voted to approve the amendments to Rule 0880-02-.25 by roll call vote: Dr. Phyllis Miller – aye, Dr. Melanie Blake – aye, Dr. Reeves Johnson – aye, Dr. Charles Handorf – aye, Dr. Neal Beckford – aye, Dr. Deborah Christiansen – aye, Dr. Samantha McLerran – aye, Dr. John Hale – aye, Mr. Robert Ellis – aye and Dr. Stephen Loyd – aye.

The rule amendments passed and the rulemaking hearing concluded.

II. REQUEST TO WAIVE CME AUDIT NONCOMPLIANCE – JOHN BOMAR, JR., MD

Dr. John Bomar was audited in July 2019 for his continuing medical education audit period of January 1, 2017 through December 31, 2018. The Board reviewed 40.5 continuing medical education hours completed in December 2016 and 41 hours completed in August 2019. The Board also reviewed a possible 5 hours from January to March 2017 and a possible 3 hours from October 2017. Ms. Kimberly Silvus, legal representation for Dr. Bomar, provided the Board with a written explanation regarding Dr. Bomar’s misunderstanding of the audit period and his attempts to remedy the matter.

Dr. Bomar was not present nor was his legal representative. Dr. Beckford motioned to deny his request for a waiver. Dr. Hale seconded the motion and it passed.
III. CONSIDERATION OF APPLICATIONS

Medical X-Ray Operator Applicant Interview(s):

Sean Fisher, MDXL – appeared before the Board without legal representation. Mr. Fisher completed his educational program in October 2015, took his examination and passed in August 2016. The clinical experience statement was signed in January 2019 suggesting the applicant has been practicing without a license for some period of time. Additionally, he has several criminal convictions establishing a pattern of criminal behavior and disregard for the law. Mr. Fisher avered he was not practicing as an x-ray technician but he has been practicing as a medical assistant. The physician’s statement of clinical experience form, completed by Dr. Ellen, is lacking a brief statement regarding his professional competence. The form does indicate he has met 80 hours of clinical training in extremities.

The Board questioned the applicant regarding his criminal history pattern. Mr. Fisher states he has completed the twelve step program.

Dr. Loyd spoke against licensing Mr. Fisher without consideration of an evaluation by TMF. Dr. Johnson, Dr. Handorf and other members agreed.

Dr. Christiansen motioned to table the application for up to four (4) months to allow time for the applicant to implore Dr. Ellen to contact the medical consultant to verify competency and for the applicant to complete an evaluation by the TMF. If competency is proven by Dr. Ellen and TMF has no recommendations then the applicant will be licensed. If the TMF evaluation has recommendations and/or clinical competency proof cannot be obtained then he shall reappear before the Board. Dr. Hale seconded the motion. The motion passed with Ms. Jennifer Claxton abstaining due to her joining the meeting in the middle of the applicant interview.

Ms. Jennifer Claxton joined the meeting at 9:35am CT.

Medical Doctor Applicant Interview(s):

Talal Aboud, MD – appeared before the Board without legal representation. Dr. Aboud is an international medical graduate who attended an unapproved medical school, has not completed a 3-year U.S. residency program in one discipline and is not ABMS Board Certified. He has completed one year of internal medicine training and he started began his neurology training in years 2017 through 2019. He is set to complete his neurology training in 2020 and when he finishes he will have successfully completed three years postgraduate training in one discipline. At this time, Dr. Aboud is not eligible for licensure unless he is ABMS board certified. The Board referred to their demonstrated competency for international medical school graduates policy. When he completes his third year of residency in neurology then he would be eligible for a temporary license based on that policy. The consensus of the Board was that Dr. Aboud is not presently eligible for full licensure and is not yet suitable for temporary licensure. Dr. Aboud chose to withdraw his application for licensure.

Charles Villoch, MD – appeared before the Board without legal representation. Dr. Villoch is a current participant in a Physicians Health Program (hereinafter “PHP”). He has met with Dr. Michael Baron, Tennessee Medical Foundation (hereinafter “TMF”) Medical Director and Dr. Baron has provided the Board with a letter of recommendation. Dr. Baron reports the applicant is being monitored through the Virginia PHP, so if TMF began providing monitoring it would act secondary and receive reports from the Virginia PHP. Dr. Baron stated there has not been an entry into the NPDB from FL or VA regarding his PHP involvement. Dr. Christiansen motioned to grant an unrestricted license contingent on
a TMF monitoring contract being signed to run concurrent, until 2023, with his current PHP monitoring. Dr. Beckford seconded the motion. The motion passed.

**Robert Day, MD** – appeared before the Board without legal representation. Dr. Day has medical board action from the North Carolina and Wyoming Medical Boards as well as prior restriction on his DEA certification. Dr. Day reports he started a solo practice in North Carolina in 2008. While at that practice, he contracted with an online referral company where he would be referred new patients and he would see them for pain management services. During an investigation into that company’s practices several of his charts were reviewed. During that chart review it was determined that his documentation was lacking. Dr. Day reports he was disciplined for aiding and abiding, the unlicensed practice of medicine, and that his prescribing habits were outside of regulations. Dr. Day further explained how he has changed his documentation practices and prescribing practices since his prior discipline. Dr. Handorf motioned to grant a full and unrestricted license. Dr. Beckford seconded the motion. The motion passed.

**Nabil Elhadidy, MD** - appeared before the Board without legal representation. Dr. Elhadidy has had medical license action as well as Medicare exclusion and loss of hospital privileges due to a misdemeanor criminal prosecution. Dr. Elhadidy outlined the events which occurred in regards to his Medicare exclusions. His last clinical practice was a private practice in November 2017. Dr. Elhadidy does not have potential employment plans in Tennessee. Dr. Blake motioned to deny the application. Dr. Hale seconded the motion. The consensus of the Board is there are too many unanswered questions. Dr. Elhadidy opted to withdraw his application.

**Jordi Espel, MD** - appeared before the Board with legal representation from Mr. James Bradshaw. Dr. Espel is an international medical graduate who has not completed a 3-year U.S. ACGME accredited postgraduate training program in one discipline and is not ABMS Board Certified. Mr. Bradshaw requested to table the motion and requested permission to petition the Board for a declaratory order. Dr. Christiansen motioned to table the application up to six (6) months and permit the applicant to request a petition for a declaratory order. Dr. Beckford seconded the motion and it passed. The Board and Ms. Bratton were provided with a copy of their petition and were given time to review the document. Dr. Christiansen motioned and Dr. Beckford seconded to grant permission for the application to come before the Board with a declaratory order. The motion passed.

**Anne Gillis, MD** - appeared before the Board without legal representation. Dr. Gillis is a Canadian Medical School graduate who has completed no U.S. residency training and only one (1) year of Canadian residency training. She is not ABMS Board eligible and therefore is ineligible for temporary or full licensure pursuant to T.C.A. 63-6-207(1)(c)(ii). She has been practicing in KY since 1996 and has practiced in OH for some years. She expressed a desire to move closer to family and that is why she is seeking licensure in TN. The Board expressed she does not qualify for licensure in Tennessee. Dr. Gillis opted to withdraw her application for licensure.

**Omer Pamuk, MD** - appeared before the Board without legal representation. Dr. Pamuk is an international medical graduate who has not completed a 3-year U.S. residency training program in one discipline and is not currently ABMS Board Certified. He completed training in Turkey and is licensed in NY. The Board expressed he does not qualify for licensure in Tennessee. He opted to withdraw his application for licensure.

**Paul Allen, MD** - appeared before the Board without legal representation. Dr. Allen has practiced clinically only sporadically since June 2013 and only in a volunteer capacity. He desires a full and unrestricted medical license. He reports his last clinical practice was in 2016. The Board reviewed their re-entry policy to discuss options for the applicant to remediate. Based on his length of time out of clinical practice he would need to complete a PLAS assessment or the SPEX exam. Dr. Handorf tabled
the application for one (1) year to permit the applicant time to demonstrate re-entry competence by using the re-entry pathway for the time frame of being out of practice from 2 – 5 years. Dr. Allen will reappear before the Board once he has completed one of the options within the re-entry policy so the Board may review the results and make a determination on licensure. The motion passed.

**Mark Mumford, MD** – appeared before the Board without legal representation. Dr. Mumford has been out of clinical practice since July 2014. Dr. Mumford is not interested in following the re-entry pathway. Dr. Mumford is willing to accept an administrative license. Dr. Beckford motioned to grant an administrative license and Dr. Handorf seconded the motion. The motion passed.

**Susan Stallings, MD** – appeared before the Board without legal representation. Dr. Stallings has been out of clinical practice since 2003 and allowed her license to expire in 2016. Dr. Stallings reports a series of health concerns and family matters which resulted in her time out of clinical practice. The Board discussed the need for her to follow the re-entry process. She would fall under the greater than ten (10) years out of clinical practice which means she would be required to complete a formal PLAS assessment. Dr. Christiansen motioned to table the application up to one (1) year to allow time for her to complete re-entry requirements. Dr. Beckford seconded the motion and it passed.

**Peter Vasquez, MD** – appeared before the Board without legal representation. He is an administrative license holder who would like to upgrade to a full license. He intends to practice family and administrative medicine. He holds several state medical licenses which are active or inactive. He has no history of malpractice, board action or criminal history. Dr. Vasquez appeared before the Board due to an indication in his file that he has been out of clinical practice since 2001.

Dr. Vasquez reports his last clinical practice encounter was last week. He reports to be engaged in clinical practice with 15-20 patients per week since January 2019 in Arizona and California. He reports only having two periods of being out of practice from 1) December 2014 to November 2016 and 2) July 2017 to December 2018. Dr. Blake motioned to grant a full and unrestricted license. Dr. Handorf seconded the motion. The motion passed.

**Jona Bandyopadhyay, MD** – appeared before the Board without legal representation. Dr. Bandyopadhyay has been out of clinical practice since September 2016. She desires a full and unrestricted medical license. Dr. Christiansen motioned to table the application up to one (1) year in order for the applicant to complete the re-entry pathway or for her to select an administrative license type instead. Dr. Blake seconded the motion. The SPEX, PLAS or Board Certification exam is necessary if she is to follow the re-entry pathway to seek full and unrestricted medical licensure. It was stated that if she wishes to take the administrative license and later wishes to seek unrestricted licensure she must apply again. The motion passed.

**Dileep Raman, MD** – was not present and his application was not heard before the Board.

IV. **Public Comment** – Dr. Johnson announced there is a sign-up sheet located by the entrance to the meeting room and anyone is welcome to sign their name if they wish to make a public comment. Ms. Angela Lawrence confirmed, at this time, there are no names on the public comment sheet.

V. **Updates from Taskforces & Committees**
   a. **Development Committee (Dr. Blake, Dr. Johnson, Dr. Beckford and Ms. Claxton)** –
      i. They did not meet in July 2019 and did not meet in September 2019 due to the BME retreat. The Committee wishes to meet Tuesday, November 12, 2019 following the BME Day 1 meeting.
b. **Office Based Surgery** (scheduled to meet Sept. 17, 2019 at 5 – 7pm CT) – an update will be provided during the Boards day 2 meeting.

c. **Advanced Practice Professionals Taskforce** (Dr. Blake, Dr. Handorf, Greg Cain, Leslie Akins) – scheduled to meet October 11, 2019 to review the supervision rules and policy.

d. **Amphetamine Taskforce** (Dr. Christiansen and Dr. Michael Baron) (scheduled to meet September 18, 2019 at 7:30am CT) – an update will be provided during the Boards day 2 meeting.

e. **Sexual Misconduct Taskforce** (Dr. Beckford, Dr. Miller, Ms. Cole and Dr. Michael Baron) – this is an old taskforce to be removed from the agenda; last policy revised in November 2017.

f. **CSMD (Dr. Blake and Mr. Ellis)** –
   i. Has met twice since last update, at most recent meeting they went over the rules where they set definitions for major physical traumas and severe burns.
   ii. Participating in interstate data sharing with over twenty states
   iii. The Department of Health has signed several data sharing contracts
   iv. Pharmacy System Integration Opportunity – all boards have offered their contribution and that is moving forward

   v. **Survey Results**
      1. There is one search of CSMD for everyone that has prescriptions reported for 2018
      2. Doctor and pharmacy shoppers decreased 85% between 2010 – 2018
      3. 64% of prescribers have changed their treatment plan
      4. 73% of dispensers refuse to fill a prescription as written
      5. 67% of respondents received a clinical risk notification and 70% of those felt like the information was useful
      6. 91% were more aware of patients going to multiple prescribers
      7. 60% were more aware of patients going to multiple dispensers
      8. 65% were more aware of patients receiving the highest doses of opioids
      9. The number of prescriptions for stimulants continues to increase

g. **Delegation Taskforce** (Dr. Beckford, Dr. Christiansen and Dr. Blake) – this is an old taskforce to be removed from the agenda; revised policy adopted in 2018.

VI. **Presentation by Mr. Monti Herring – Regional Overdose Prevention Specialist for Nashville Prevention Partnership (NPP) in Davidson County**

   a. Discussion on opioid abuse/misuse and its effects
   b. Discussion on combatting an overdose with narcan/naloxone
   c. NPP is a part of the Tennessee Save a Life Program –
      i. They provide free trainings on opioid misuse and the use of naloxone to individuals, groups, organizations, agencies
      ii. They give out a kit which includes: 1. Nitro gloves, 2. A form to submit to receive a free replacement kit if the kit is used, 3. Two 4mg doses of Narcan Nasal Spray
   d. Discussed how most agencies/businesses choose to not receive this free training for their staff simply because they have not experienced an overdose at their agency so they do not see a need for the training.

VII. **Conduct New Business**

   a. Vote to send Executive Director to November Annual Compact meeting – Dr. Christiansen motioned to approve her attendance and Dr. Handorf seconded the motion. The motion passed.
b. Discuss and consider agenda items for the FSMB Presentation in November – 1) uniform application 2) physician burnout and 3) safe haven non-reporting

VIII. Update from Tennessee Medical Foundation Medical Director, Dr. Michael Baron –
   a. Dr. Baron provided an update to the Board during the BME retreat held on Monday, September 16, 2019.
   b. Discussion about removing the stigma behind mental health issues.
   c. State licensure, hospital credentialing or privileges elsewhere have applications with questions that ask significant but intrusive questions pertaining to medical history and mental health history. Historically, most of the intrusive questions are geared towards mental health rather than physical health.
   d. There is a stigma created about why are they asking these questions and what short term and long term affects are there if I answer affirmatively. This stigma prevents physicians from seeking help because they are concerned about having to answer affirmatively to such questions in the future.
   e. In June 2020, Mississippi will be removing their questions pertaining to a history of mental illness impairment. Also, more than forty state medical boards are addressing this issue.
   f. Dr. Baron asked the Board if they felt a concern to look at our application process and consider removing questions that promote the stigma of mental illness.
   g. He suggests removing the questions that indicate a history of impairment but keep the questions that ask if there is impairment now. Also, as a means to promote a safe haven, if a physician has advocacy from their current PHP then they would not have to disclose their involvement when submitting their application.
   h. The North Carolina Board and West Virginia Board removed such questions from their application and have seen a dramatic increase in PHP participation. The Kentucky Board has a statutory mandate that all voluntary PHP participation be reported to the Board and they have seen a dramatic decrease in PHP involvement.

Dr. Johnson proposed the Board form a taskforce to develop a proposal before the Board which may suggest amendments to the current applications, address the issues and concerns, and hopefully protect the public by promoting the opportunity for more physicians to seek help.

The taskforce will consist of Drs. Johnson, Loyd, Beckford, Baron and Saunders, Ms. Bratton and Ms. Lawrence.

IX. Discuss, Consider and Approve Consent Agenda

Dr. Christiansen motioned to accept the consent agenda. Dr. Blake seconded the motion and it passed. The Consent Agenda contained the following:

1. Approval of July 30-31, 2019 Board meeting minutes
2. Approval of Acupuncture Out of Practice Policy
3. Approval of Revised Polysomnography Failure to Obtain Continuing Education Policy
4. Ratification of new licenses, reinstatement and renewals of Medical Doctors, MD X-Ray Operators, Genetic Counselors, Acupuncture and Polysomnography.
7. Review of the Office of General Counsel Report
Consent Order(s)

Darrell G. Arnett, MD – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Jennifer Putnam represented the State. Dr. Loyd recused. Respondent was licensed on October 9, 1984 and that license expires on September 30, 2020. On or around March 26, 2019, Respondent was working as a physician employee of Nashville Pain Clinic in Columbia, Tennessee. On this day the receptionist placed a patient in an exam room to be seen by the Respondent. After 20 – 25 minutes, the receptionist noticed that Respondent had not entered the exam room. The receptionist went to Respondent’s office to remind him of the patient waiting in the exam room. The receptionist opened the door to the Respondent’s office where she witnessed the Respondent engaging in an inappropriate physical act with a female patient. On or about April 2, 2019, the receptionist reported the incident to the practice manager who addressed the issue with the Respondent the same day. Upon being questioned about the incident, Respondent went to his office, removed his personal belongings and let the office building. On or about April 3, 2019 the practice manager received a letter of resignation from the Respondent. The facts stipulated are grounds for discipline. This order shall permanently voluntarily retire Respondent’s license. Respondent shall not make application for or receive any future Tennessee medical license. Respondent must pay actual and reasonable costs of the case not to exceed three thousand dollars ($3,000.00). Dr. Blake motioned to approve the order. Ms. Claxton seconded the motion and it passed with Dr. Beckford abstained and Dr. Loyd recused.

Millard D. Collins, MD – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Jennifer Putnam represented the State. Respondent was licensed on June 9, 2003 and that license expires on January 31, 2020. Respondent is Interim Chair and Associate Professor of Family & Community Medicine at Meharry Medical College. Respondent is also the medical director of La Paz Family Medical Clinic. La Paz Family Medical Clinic is a non-emergent affordable family care clinic and is owned by La Paz Hispanic Services, LLC. La Paz Family Medical Clinic is not affiliated with Meharry Medical College. Respondent admitted to allowing a medical school graduate, D.P. work under his supervision at La Paz Family Medical Clinic from February 5, 2011 to 2013. D.P. had completed four years of medical school; three years of residency at Meharry Medical College and Step 1 and Step 2 of the medical licensure examination. D.P. had not successfully completed Step 3 of the medical licensure examination or obtained a license to practice medicine. Respondent admitted to allowing D.P. to treat patients; provide treatment plans and write prescriptions under his supervision. The facts stipulated are grounds for discipline. This order shall reprimand Respondent’s license. Respondent must pay two (2) Type C Civil Penalties for a total of one thousand dollars ($1,000.00). Respondent must pay all actual and reasonable costs of this case not to exceed three thousand dollars ($3,000.00). Dr. Hale motioned to approve the order. Dr. Beckford seconded the motion and it passed.

Suresh K. Acharya, MD – did not appear before the Board nor did a legal representative appear on his behalf. Mr. Peyton Smith represented the State. Respondent was licensed on September 9, 1998 and that license expires on February 28, 2021. Respondent has served as the supervising physician for Patsy Burks, APRN from approximately August 2013 until December 2017. Respondent admitted that he had not been on-site every thirty (30) days as required from August 2013 to December 2017. Respondent represented he failed to do so because of difficulties scheduling and coordinating on-site visits with Ms. Burks. Respondent admitted to reviewing fewer than 20% of charts from Ms. Burks’ practice at times from August 2013 until December 2017. Respondent represents that he relied on Ms. Burks to provide the appropriate number of charts for him to review. Respondent failed to review and sign 100% of charts containing prescriptions of controlled substances from August 2013 until December 2017. Respondent represents that he relied on Ms. Burks to provide all of the charts in which she prescribed controlled substances for him to review. The facts stipulated are grounds for discipline. This order shall reprimand Respondent’s license. Respondent must pay five (5) Type B Civil Penalties for a total of two thousand
dollars ($2,000.00). Respondent must pay all actual and reasonable costs of the case not to exceed three thousand dollars ($3,000.00). Dr. Hale motioned to approve this order. Dr. Christiansen seconded the motion and it passed.

Moving forward, Dr. Johnson requests that the agreed citations are included in the Boards Consent Agenda.

Continuing Education Agreed Citations
Dr. Christiansen motioned to accept the following continuing education agreed citations. Mr. Ellis seconded the motion and it passed. – David L. McIntosh, AMDX license #8912, David Tharp, LAc license #84, Marek Kacki, MD license #24672 and Miroslow Mikicki, LAc license #25.

Unlicensed Practice Agreed Citations
Dr. Christiansen motioned to accept the following unlicensed practice agreed citations. Dr. Beckford seconded the motion and it passed. – Christopher Lee Staley (polysomnography), Loretta Parnell file# 381 (acupuncture detoxification specialist), Molly Lynn Kapur (x-ray operator) license # 8722 and Susan Gail Campbell (x-ray operator) license # 8899.

Discussion on FSMB Presentation for November 2019
Dr. Johnson requested Board members to identify any topics they would like addressed by the FSMB to be given to Ms. Lawrence. Some topics already being requested for the FMSB to cover are 1) Doc Info, 2) Re-entry and 3) Connection with the Compact.
Updates from Taskforces & Committees

i. **Office Based Surgery by Dr. Neal Beckford** (met September 17th at 5pm CT) – the Committee discussed the application process and the timing and review by healthcare facilities personnel. The Committee was asked to consider the lack of communication between the time the license is granted and the survey cycle schedule, payment to healthcare facilities for surveys, clarification of the renewal process and updating language of the rules with the renewal process. The Committee spoke primarily around an applicant that built an office with a dedicated level III surgery suite that without best efforts his building was not up to code. The Committee discussed what the Board can do to make the process easier. Language was created that codifies that the healthcare facilities board would be involved in the review of plans from day 1 as opposed to the applicant being told to go ahead and build the facility and then to have it reviewed. This will allow for assurances to the applicant by having the plans reviewed ahead of time.

ii. **Amphetamine Taskforce by Dr. Deborah Christiansen** (met September 18, 2019 at 7:30am CT) – the Taskforce discussed the medications that are in this class, diagnoses that are usually treated and what the minimal standard of workup would be with consideration of risk versus benefit on certain medications. Also, they led a discussion on whether it’s a rule or whether its guideline and whether or not they are getting to specific in the rules. They will meet again on the Wednesday morning of the November 13th Board meeting. The Taskforce will ratify their previous meeting minutes at their next meeting.

Consent Order(s)

**Stephen Gipson, MD** – was not present but his legal representative Ms. Kimberly Silvus was present. Mr. Andrew Coffman represented the State. Respondent was licensed on August 3, 1983 and that license expires September 30, 2019. The Department of Health reviewed fourteen (14) of Respondent’s patients’ medical records as part of its investigation of this matter. From at least January 2014 through January 2018, Respondent regularly prescribed controlled substances to some of his patients, the majority of whom were elderly. The Department alleges Respondent’s documented treatment plans for his prescribing of controlled substances were inadequate. Although Respondent disputes his charting is inadequate, he wishes to save the time and expense associated with litigating this issue. Respondent agrees there is evidence sufficient for the Board to determine Respondent failed to meet the standard of care in his documentation. The facts stipulated are grounds for discipline. This order shall reprimand the Respondent’s license. He shall complete two specific continuing medical education courses. Also, he must pay all actual and reasonable costs not to exceed one thousand dollars ($1,000.00). Dr. Christiansen motioned to accept the order and Dr. Handorf seconded the motion. The motion passed.
Kristin Dobay, MD - was not present nor was a legal representative. Ms. Jennifer Putnam represented the State. Respondent was licensed on July 14, 2009 and that license expires January 31, 2021. Ms. Putnam outlined several stipulated facts which can be found in the public consent order. The facts stipulated are grounds for discipline. This order shall voluntarily surrender Respondents license. Should Respondent submit an application for a new license, Respondent agrees to submit the results of any prior VCAP evaluations to the Board’s Medical Director for the Board to consider when reviewing the licensure application. Respondent further agrees to comply with any and all recommendations of the VCAP evaluations as a condition of new licensure. If the recommendations of the VCAP evaluations include follow-up or continuing treatment; continuing education; practice restrictions or prescribing restrictions; Respondent agrees to complete such conditions and, within thirty (30) days, obtain and maintain a monitoring agreement with the Tennessee Medical Foundation and to submit quarterly reports of the status of that monitoring agreement to the Disciplinary Coordinator for the Board. The monitoring agreement shall run at a duration recommended by TMF and allow TMF to coordinate and/or arrange any treatment recommended Respondent complete to be deemed safe to practice. Under no circumstances will a new license be issued until the Board is satisfied that the applicant is competent and safe to re-enter the practice of medicine in addition to meeting all other existing licensure requirements. Respondent shall pay all actual and reasonable costs of the case not to exceed five thousand dollars ($5,000.00). Dr. Johnson motioned to approve the order. Dr. Christiansen seconded the motion and it passed.

Melanie Dunn, MD – was not present nor was a legal representative. Ms. Jennifer Putnam represented the State. Respondent was licensed on March 28, 1994 and that license expires May 31, 2020. Respondent is Board Certified in Obstetrics and Gynecology and currently works for Tennessee Women’s Care, PC. Respondent admits to writing fifteen (15) total prescriptions for herself, husband, son, and daughter over the three-year span from 2016 to 2018. Respondent admits to administering the prescriptions as a matter of convenience. The Respondent maintained medical records for herself and daughter; however, formal medical records were not maintained for her husband and son. The facts stipulated are grounds for discipline. This order shall place Respondents license on probation for one (1) year. Respondent must complete specific continuing medical education. Respondent must pay fifteen (15) Type C civil penalties for a total of one thousand five hundred dollars ($1,500.00). All reasonable costs shall be paid by Respondent not to exceed three thousand dollars ($3,000.00). Dr. Beckford motioned to approve the order. Dr. Blake seconded the motion and it passed.

Petition(s) for Order of Compliance

Murad G. Salaita, MD – appeared before the Board with legal representation from Ms. Kimberly Silvus. Ms. Mary Katherine Bratton represented the State. Petitioner’s license was placed on probation for five (5) years pursuant to a consent order. The Petitioner has satisfactorily complied with the requirements of the previous order. This order shall lift Petitioners license off of probation and place his license in an unencumbered status. Dr. Handorf motioned to approve the petition. Dr. Beckford seconded the motion and it passed.

Andrew R. Jones, MD – was present before the Board and his legal representative, Mr. James Catanzaro was not present. Ms. Mary Katherine Bratton represented the State. Dr. Blake and Dr. Miller recused. The Petitioner has satisfactorily complied with the requirements of the previous order. This order shall lift Petitioners license off of probation and place his license in an unencumbered status. Dr. Christiansen motioned to accept the order of compliance. Dr. Beckford seconded the motion and it passed with two (2) recusals.

The meeting adjourned at 9:43am CT.

This concludes the Board of Medical Examiners day 2 meeting.