



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

**Tuesday, November 1, 2022**

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**MINUTES**

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The regular board meeting of the Tennessee Board of Medical Examiners (“the Board”) was called to order at 8:33 a.m. in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Dr. Melanie Blake, Board President.

Board members present: Melanie Blake, MD, President  
Robert Ellis, Consumer Member, Secretary  
Deborah Christiansen, MD  
Jennifer Claxton, Consumer Member  
Randall Pearson, MD  
Samantha McLerran, MD  
Keith Anderson, MD  
James Diaz-Barriga, Consumer Member  
John McGraw, MD

Board member(s) absent: Stephen Loyd, MD, Vice President  
John Hale, MD  
Phyllis Miller, MD

Staff present: Francine Baca-Chavez, JD, Office of General Counsel  
Stacy Tarr, BME Executive Director  
Rene Saunders, Medical Consultant  
Candyce Wilson, Administrative Director  
Brandi Allocco, Administrative Director  
Samantha Green, Board Administrator  
Chikita Newsome, Board Administrator

**I. CONSIDERATION OF APPLICATIONS**

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

**Wallace Emmett Woolfrey, AMDX** – appeared before the Board without legal representation. Mr. Woolfrey has been out of clinical practice since 2006. Mr. Woolfrey has been working in large teaching institutions with a constant flow of patients and has been a surgery tech for the last three (3) years. Mr. Woolfrey has been unable to secure a preceptor but would like to do so. Dr. Rene Saunders mentioned in the past, auditing courses have been a pathway back to practice. The Board expressed concern with the amount of time Mr. Woolfrey has been out of practice. Dr. Randall Pearson motioned to table the

application for up to six (6) months to allow Dr. Woolfrey to complete a preceptorship consisting of half of the clinical clock hours and classroom hours that are required for a new licensee. Dr. Samantha McLerran seconded the motion. The motion passed.

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

**Daniel Stein, MD** – appeared before the Board without legal representation. Dr. Stein appeared to request an extension of time to obtain a preceptor. Dr. Stein previously appeared before the Board on May 24, 2022, and the Board tabled the application for a period of up to six months to allow Dr. Stein to re-establish board certification with the American Board of Internal Medicine (hereinafter “ABIM”) and identify a preceptor for purposes of a three (3) month preceptorship. At the present meeting, Dr. Stein informed the Board he had successfully regained board certification but has had difficulty securing a preceptor. Dr. Deborah Christiansen motioned to table the application for up to an additional six (6) months to allow Dr. Stein to secure a preceptorship. Dr. Pearson seconded. The motion passed. Administrative Staff asked for clarification if Dr. Stein had to reappear and if the preceptorship needed to be completed within six (6) months. After discussion, Dr. Christiansen made a motion to retract the vote. Dr. Melanie Blake seconded. The motion passed. Dr. Christian motioned to table the application for up to six (6) months to secure a preceptor and complete a three (3) month preceptorship. Dr. Anderson seconded. Further discussion revealed the issuance of a limited license was not part of the motion and vote at the May meeting. Dr. Christiansen withdrew her motion. Dr. Christiansen made a motion to table the application for an additional six (6) months to obtain and complete a three (3) month preceptorship. A preceptor must submit the plan and a CV to the Board’s Medical Consultant for approval. The preceptor must be board certified; the plan must include direct and indirect supervision and no supervision of mid-levels. Upon approval of the preceptorship, a limited license will be issued. At the conclusion of the preceptorship, the preceptor must submit a letter of successful completion to the Board’s Medical Consultant. Dr. Stein does not need to reappear in front of the Board. Dr. Pearson seconded. The motion passed.

**Hathaway Harvey, MD** – appeared before the Board without legal representation. Dr. Blake recused. Dr. Harvey is an applicant for a reinstatement who has been out of clinical practice since 2016. Dr. Harvey reported to the Board he is employed as a first surgical assistant. During the discussion, concern was raised that Dr. Harvey had been practicing without a license. The definition of the practice of medicine was read. Dr. Harvey was asked if he felt like he had been practicing medicine to which he responded affirmatively. The Board offered Dr. Harvey the opportunity to withdraw his application which he declined to do. Dr. Christiansen motioned to table the application up to the next Board meeting to allow Dr. Harvey to seek legal counsel and determine how he would like to proceed with his application. Dr. McLerran seconded. The motion passed.

**Franklin Drummond, MD** – appeared before the Board without legal representation. Dr. Drummond is an applicant for reinstatement who has been out of clinical practice since 2018 and has possibly been practicing administrative medicine in Tennessee without a license. Dr. Drummond reported he is employed with HCA Healthcare and has been in the role of a subject matter expert. Dr. Drummond stated he does not practice medicine in this role. The practice of administrative medicine was read. The job description Dr. Drummond provided with the application was reviewed. Ms. Francine Baca-Chavez advised the Board if the evidence proving a violation of the Board’s Medical Practice Act occurred, a license could be issued with discipline. The Board felt the evidence was arguable. Dr. Christiansen made a motion to grant an administrative license. Ms. Jennifer Claxton seconded. The motion passed.

**William Kern, MD** – appeared before the Board without legal representation. Dr. Kern is an applicant for initial licensure who has been out of clinical practice since 2019. Dr. Kern reported he was the Director of hematopathology at the University of Oklahoma for twenty-three (23) years. Dr. Kern shared

that since retirement he has completed one hundred thirty-five (135) hours of category one continuing medical education hours, read medical journals, and given lectures at the University of Oklahoma College of Medicine. Dr. Kern reported he has a job offer for a part-time position at Molecular Pathology Laboratory Networks, Inc. and he would be working with two (2) other experienced hematopathologist. Dr. McLerran made a motion to table the application for a period of up to six (6) months to allow Dr. Kern to complete a no less than four (4) week preceptorship. The preceptor must be board certified and submit a CV and preceptorship plan to the Board's medical consultant for approval. The plan should consist of direct and indirect supervision, no supervision of mid-levels, and a report submitted to the Board's medical consultant at the completion of the plan. Upon approval of the plan, Dr. Kern will be granted a limited license for up to six (6) months. Dr. Anderson seconded. The motion passed.

**Rameen Hashemiyoan, MD** – appeared before the Board without legal representation. Dr. Hashemiyoan is an applicant for initial licensure who has prior board action, voluntarily surrendered DEA registration, had clinical privileges summarily suspended, and participated in a Physician Health Program (hereinafter “PHP”). Dr. Hashemiyoan reported while on a Locum Tenens assignment in Vermont in February 2020 he was involved in a verbal altercation with a patient. Dr. Hashemiyoan stated he had been working for seven (7) straight days in a busy ICU and the patient had been aggressive and unruly. The altercation led to board action and the suspension of hospital privileges. Dr. Hashemiyoan reported he found a job in Alabama and during the licensure process began monitoring with the Alabama PHP. Dr. Michael Baron with the Tennessee Medical Foundation (hereinafter “TMF”) spoke on Dr. Hashemiyoan's behalf. Dr. Baron stated he spoke with the Medical Director of the Alabama PHP who shared that Dr. Hashemiyoan signed a two (2) year monitoring contract which is a behavioral contract with a work site monitor. The work site monitor provides quarterly reports and Dr. Hashemiyoan is compliant. Dr. Baron did not feel that any additional time need to be added to the monitoring contract or that TMF needed to be involved. Dr. Baron said he felt this was an isolated incident from an overworked individual. Dr. Christiansen motioned to grant a full and unrestricted license. Dr. Anderson seconded. The motion passed.

**Joshua Rodgers, MD** – appeared before the Board without legal representation. Dr. Rodgers is an applicant for initial licensure who is currently participating in a PHP. Dr. Rodgers shared he sought help for alcohol use during residency from his program director and was referred to the TMF. Dr. Baron spoke on Dr. Rodgers's behalf and shared that in October 2020, Dr. Rodgers signed a five (5) year monitoring agreement with the TMF and he is compliant with the terms of his contract. Dr. Christiansen motioned to grant a full and unrestricted license contingent upon signing a TMF contract. Mr. Robert Ellis seconded. The motion passed.

**Harold Mason, MD** – appeared before the Board without legal representation. Dr. Mason appeared at the May 24, 2022, meeting and is reappearing for further consideration of his initial application. At the May 24, 2022, meeting the Board tabled Dr. Mason's application for a period of up to six (6) months so Dr. Mason could work with the TMF to obtain a fitness for duty and release the results to the Board. The report from the evaluation stated in part that Dr. Mason provided only limited information for this evaluation and this, combined with his guardedness, evasiveness, and defensiveness during interviews, combine to make determination of Dr. Mason's fitness to practice inconclusive. After discussion, the Board referred back to its May 24, 2022, decision and stated Dr. Mason should fully comply with the previous decision of the Board. The Board stated that Dr. Mason's had until November 24, 2022, to comply or the application will close. No motion was needed as the decision from May 24, 2022, is still in effect. The discussion was concluded.

**II. PRESENTATION FROM AFFILIATED MONITORS**

Denise Moran with Affiliated Monitors, Inc (hereinafter “AMI”) presented to the Board. Ms. Moran shared the services AMI provides, in addition to the excessive prescribing courses, is clinical decision-making work. This course helps to get providers back into good documentation and good clinical decision making. Ms. Moran was asked about the criteria for her monitors. She responded the primary goal is monitors must be ABMS certified with no disciplinary action. She reminded the Board to reach out to AMI with any concerns or suggestions.

**III. CONDUCT NEW BUSINESS**

**Discuss, consider and take action as needed regarding CME Waiver Request Joseph Motto, MD**  
Dr. Blake recused. Dr. Motto is requesting a CME waiver due to sight impairment. The Board discussed other options to obtain CMEs such as audio. Concern was expressed regarding Dr. Motto practicing medicine. Dr. McLerran made a motion to deny the waiver request and caution Dr. Motto that practicing medicine when mentally or physically unable to do so is a violation of the rules. Dr. Christiansen seconded. The motion passed.

**IV. OFFICE OF HEALTH LICENSURE AND REGULATION**

Keyyona Love presented the Board’s fiscal year 2022 report. She reported no concerns. Dr. Blake asked what is included in Professional Services and Dues. Ms. Love stated she would look into it and provide a list of what is included. Mr. Ellis noted a reduction in Grants and Subsidies and asked what is included in this category. Ms. Love stated this includes contracts.

**V. CONDUCT NEW BUSINESS (CONTINUED)**

**Discuss, consider and take action if needed regarding requests for Advisory Ruling** – Ms. Baca-Chavez presented the advisory requests. Both advisory requests are identical. The requests are asking for an exemption to the remote site visit requirement based on the fact the medical services provided are being done by virtual visits. The requesters have indicated in person supervision is not feasible. Dr. Christiansen made a motion to accept the drafted advisory opinion response with the inclusion of the language that the rules must be followed follow and two (2) of the site visits must be in person. Mr. Ellis seconded. The motion passed.

**Discuss, consider and take action if needed regarding Public Chapter 949** – Ms. Baca-Chavez shared the new Public Chapter that went into effect in April 2022. This law made revisions to the nursing statute and the physician assistant statute regarding collaboration. The new statutes allow for arrangements to be made for the personal review of the advanced practice nurse or the physician assistant charts by a collaborating physician to be done by HIPPA-compliant electronic means or in person. The electronic review is capped at ten (10). Two (2) visits are required to be in person. Ms. Baca-Chavez stated she would present amendments to the rule language to reflect the statutory change at the January meeting.

**VI. CONSIDER AND APPROVE CONSENT AGENDA**

Dr. McLerran motioned to accept the consent agenda. Mr. Diaz-Barriga seconded. The motion passed. The Consent Agenda contained the following:

1. Approval of September 19, 2022, Summary Suspension minutes
2. Approval of September 26, 2022, Development Committee Meeting minutes
3. Approval of September 27-28, 2022, Board of Medical Examiners Meeting minutes
4. Ratification of new licenses, reinstatement, and renewals of Medical Doctors, MD X-Ray Operators, Genetic Counselors, Surgical Assistants, and Clinical Perfusionists
5. Review of the Office of General Counsel Report
6. Review the report from the Office of Investigations
7. Review and approve unlicensed practice Agreed Citations – Kevin Finch, CP (license #239).

## **VII. UPDATES FROM TASKFORCES & COMMITTEE MEETINGS**

### **a. Re-Entry Taskforce Update (Dr. McLerran and Dr. Anderson)**

Dr. McLerran shared with the Board the revised reentry diagram. The suggestion was made to include extensive CMEs, to include language that all applicants are considered on a case-by-case basis, and remove “the based on the results of the preceptorship one or more of the following may be required.” The discussion was had that a bulleted list may be better than a flow chart and effort should be made by the task force to contact individuals to see if there is a pool of preceptors. Dr. McLerran mentioned Tennessee Medical Association and the Medical Colleges in Tennessee. The Reentry Taskforce will meet again in January and report to the Board.

### **b. Development Committee Meeting Update (Dr. Loyd, Dr. Blake, Mr. Ellis, and Dr. Christiansen)**

The Committee did not meet on October 31, 2022. The Committee will take up the October 31<sup>st</sup> agenda in January.

The Board recessed for lunch.

Dr. McGraw joined the meeting after lunch.

## **VIII. CONDUCT NEW BUSINESS (CONTINUED)**

**Discuss, consider and take action if needed regarding the request for funding for Gateway Project by Dr. Peter Phillips, CSMD Director** – Peter Phillips, DPh, TDOH CSMD Director, presented to the Board the new Gateway servicer extension and the enhanced prescriber report. The Gateway service integrates the CSMD web portal with electronic medical records to allow providers to view the CSMD patient data within the clinical workflow of their electronic medical records. Dr. Phillips requested funding for sponsoring the Gateway Project. Dr. Phillips shared that the percentage allocated across prescribing Boards is based on the number of licensees. Dr. Christiansen motioned to fund the Gateway Project. Dr. McGraw seconded. After discussion, Dr. Christiansen amended her motion to fund the Gateway Project for six (6) months. Dr. McGraw seconded. The motion passed.

**IX. DISCIPLINARY ORDERS**

**Consent Order(s)**

**Clay Stalcup, MD** – did not appear before the Board. Ms. Elta Breen represented the State. Ms. Breen reported the violation is serving as the medical director for an unregistered medical spa. The State asked for a reprimand on the license and assessment of five (5) “Type C” civil penalties for a total of two hundred and fifty (\$250.00) dollars. The action will be reported to the National Practitioner Databank (hereinafter “NPDB”). Dr. Christiansen motioned to approve. Mr. Ellis seconded. The motion passed.

**Agreed Order(s)**

**Samuel Hunter, MD** – did not appear before the Board nor did his legal representative, Renee L. Stewart, appear on his behalf. Ms. Francine Baca-Chavez presented the case on behalf of Ms. Paetria Morgan who represented the State. In at least seven (7) instances the respondent failed to certify in patient charts that he reviewed the controlled substance prescription written by his mid-level supervisee. In at least six (6) instances, Respondent failed to timely certify in patient charts that he reviewed the controlled substance prescription written by his mid-level supervisee. One (1) certification was one month late. Two (2) certifications were three months late. One (1) certification was five months late, and one (1) certification was eight months late. Respondent failed to jointly develop, maintain, and update protocols for four (4) advanced practice registered nurses and three (3) physician assistants. The Grounds for discipline are unprofessional, dishonorable, or unethical conduct. The Respondent must enroll in and successfully complete within one year of the entry of the Order, the three-day medical course entitled, “Prescribing Controlled Drugs: Critical Issues and Common Pitfalls” offered by Vanderbilt University Medical Center or an equivalent course approved in advance in writing by the Board’s Consultant. Respondent must pay twenty (20) “Type B” civil penalties, in the amount of one hundred dollars (\$100.00) each representing a penalty for failing to have the required protocols with seven (7) supervisees and one (1) penalty for each of the thirteen (13) instances where Respondent failed to timely certify review of the controlled substance prescribed by mid-level supervisees, for a total civil penalty assessment of two thousand dollars (\$2000.00). The Respondent must pay the actual and reasonable costs of prosecuting this case to the extent allowed by law. Said cost shall not exceed five thousand dollars (\$5000.00). This is a formal disciplinary action a will be reported to the NPDB. Dr. McLerran motioned to approve. Mr. Ellis seconded. The motion passed.

**X. PUBLIC COMMENT** – No public comment.

**The Board recessed at 1:42 pm CT.**



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

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

**Wednesday, November 2, 2022**

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The regular board meeting of the Tennessee Board of Medical Examiners was called to order at 8: 34 a.m. in the Iris and Poplar Room Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243.

Board members present: Robert Ellis, Consumer Member, Secretary  
Jennifer Claxton, Consumer Member  
Randall Pearson, MD  
Samantha McLerran, MD  
Deborah Christiansen, MD

Staff present: Francine Baca-Chavez, JD, Office of General Counsel  
Jessica Turner, JD, Office of General Counsel  
Gerard Dolan, JD, Office of General Counsel  
Stacy Tarr, Executive Director  
Brandi Allocco, Administrative Director  
Samantha Green, Board Administrator

**XI. DISCIPLINARY ORDERS (CONTINUED)**

**Consent Order(s)**

**Terrance Craion, MD** – did not appear before the Board nor did his legal representative, Mr. Luvell Glanton, appear on his behalf. Mr. Gerald Dolan represented the State. Respondent was licensed in 2016 and has a practice focused on family medicine. Respondent practices with a practice group in Nashville. The investigation involved twenty-six (26) patient records that were found to have multiple deficiencies in prescribing practices and medical record keeping. Respondent prescribed opioids for chronic non-malignant pain by telemedicine outside of the time allowed by the Governor’s Executive Order. Respondent admitted to the investigator he did not check the CSMD for the telemedicine patients and that he did not complete the required CMEs. Respondent’s license is reprimanded. Respondent must pay five (5) “Type A” civil penalties for a total of two thousand five hundred dollars (\$2,500.00). Respondent must not prescribe opioids for a period of six (6) months. Respondent must complete the course “Intensive Course in Medical Documentation” and the course titled “Prescribing Controlled Drugs: Critical Issues and Common Pitfalls.” Respondent must pay the cost of the investigation not to exceed two thousand five hundred dollars (\$2,500.00). Respondent understands this is formal disciplinary action and will be reported to the NPDB. Dr. Christiansen motioned to approve. Dr. Pearson seconded. The motion passed.

**Maria Mainolfi-Palarata, MD** – did not appear before the Board nor did a legal representative appear on her behalf. Ms. Jessica Turner represented the State. The Respondent was reprimanded in Maryland for filing a false Delegation Agreement Termination. Respondent agrees to reprimand in Tennessee based on the out of state discipline. Respondent agrees to two (2) “Type C” civil penalties for a total of two hundred dollars (\$200.00) and agrees to pay the cost of the investigation up to five thousand dollars (\$5000.00). Respondent understands this is formal discipline and will be reported to the NPDB. Dr. Christiansen motioned to approve. Dr. McLerran seconded. The motion passed.

**Clyde Waters, MD** – did not appear before the Board nor did his legal representative, Stephen Barham, appear on his behalf. Ms. Jessica Turner represented the State. Respondent is an OB/GYN who resigned his clinical privileges at Erlanger Health Systems in 2022. Respondent does not have any clinical privileges elsewhere. In 2018, after a series of eSafe complaints were received involving patient care, Respondent was asked to voluntarily submit to a neurocognitive assessment. After completing the assessment, Respondent was cleared to practice, however, he was diagnosed with an unspecified neurocognitive disorder. From August 2021-October 2021, three (3) additional eSafe complaints were received which reported concerns that Respondent could not remember medications, sometimes asking nurses for recommendations, his decision-making was becoming difficult, and he needed reminders of his scheduled surgeries. Hospital staff and nurses who were working with Respondent reported increasing concerns for those patients under Respondent’s care. As a result of the complaints, Respondent voluntarily limited his OB/GYN practice to the office and refrained from performing any deliveries and/or surgeries. Additionally, Respondent submitted to a second neurocognitive assessment. Respondent submitted to a second neurocognitive assessment on October 29, 2021. The neuropsychological test results indicated that a diagnosis of cognitive disorder is warranted. On November 11, 2021, the Erlanger Medical Executive Committee met to discuss the recommendations of the second assessment. Respondent was not reinstated and ultimately agreed to resign his Erlanger privileges. During the first half of 2022, Respondent participated in a cognitive therapy program at Siskin Hospital for physical rehabilitation. His results were not sufficient so as to receive a recommendation of reinstatement. While Respondent was suspended from performing surgeries or deliveries, he still actively engaged in private practice Tuesday through Friday for approximately eight (8) hours a day until his license was suspended by the State in May 2022. Since his suspension, he has not practiced and has decided to retire and instead seeks to voluntarily surrender his license. Respondent acknowledges this will have the same effect as Revocation. In order to apply for a medical license in the future Respondent must undergo a comprehensive fitness to practice evaluation and neuropsychological evaluation; obtain the advocacy of the TMF; submit documentation demonstrating compliance with recommendations of the evaluation and appear in person before the Board for an interview. Respondent has agreed to pay the cost of the investigation up to five thousand dollars (\$5,000.00). Respondent understands this is formal discipline and will be reported to the NPDB. Dr. Christiansen motioned to approve. Dr. Pearson seconded. The motion passed.

#### **Agreed Order(s)**

**Christine Kasser, MD** – Did not appear nor did a legal representative appear on her behalf. Mr. Gerald Dolan represented the State. Respondent has been licensed since 1988 and practices in Memphis. T.C.A. 68-1-128 requires the Department to compile annual lists of the top fifty (5) opioid prescribers, the top twenty (20) buprenorphine prescribers, and the top ten (10) opioid prescribers in rural counties. Providers on the list are sent a letter requiring an explanation and justification for high prescribing to which they have fifteen (15) days to respond. Respondent was on the list for 2020. The Department sent the first letter in July 2021 and several after. Respondent’s response was not received until November 2021 after a complaint had been opened. Respondent’s license is reprimanded. Respondent agreed to pay a penalty of five dollars (\$5.00) a day for each day the response was late for a total civil penalty of five hundred forty-five dollars (\$545.00). Respondent agreed to pay the cost of the investigation not to exceed four



thousand dollars (\$4000.00). Respondent understands this is formal discipline and will be reported to the NPDB. Dr. McLerran motioned to approve. Dr. Christiansen seconded. The motion passed.

**There was no Public Comment.  
This concludes the Board of Medical Examiners meeting**

### **Hearing for Declaratory Order – Iris Room**

**Upasna Bahure, MD v. State of Tennessee Board of Medical Examiners  
Iris Room**

**Administrative Law Judge: Honorable Michael Begley**

**Panelists: Samantha McLerran, MD, Deborah Christiansen, MD, and Randall Pearson, MD**

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

**Counsel for Respondent: Respondent was unrepresented**

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

Petitioner, Upasna Bahure, MD (hereinafter “Petitioner”), attended Mahatma Gandhi Mission’s Medical College in Aurangabad, Maharashtra India, and obtained a medical degree in September of 2009. Petitioner is an international medical school graduate who has not submitted evidence of the satisfactory completion of three-year US ACGME accredited residency and is not currently certified by an American Board of Medical Specialties, (hereinafter “ABMS”) member board or eligible for certification through the ABMS. Following graduation of medical school, Petitioner completed a gender surgery residency in Aurangabad, Maharashtra India from approximately May 2010 through April 2013. Petitioner also completed an HPB and transplant surgery fellowship in Mumbai, Maharashtra, India for approximately March 2015 through April 2016. Petitioner passed the USMLE steps I-III on the first attempt. Petitioner recently completed a two-year abdominal transplant surgery fellowship at Methodist University Hospital in Memphis, Tennessee from August 2020 through July 2022. The program is accredited by the American Society of Transplant Surgeons (hereinafter “ASTA”) under the Transplant Accreditation and Certification Council. In total during her training, Petitioner has performed ninety-three (93) kidney transplants, three (3) pancreas transplants, sixty (6) liver transplants, and seventeen (17) organ retrievals. What is unique to her training is her experience with living donor transplantation. Since completion of the abdominal transplant surgery fellowship at Methodist University Hospital, Petitioner is eligible to become certified as an abdominal transplant surgeon through the ASTS. Currently, the ASTA is not considered an ABMS specialty board. Petitioner does not currently hold any state medical licenses. Petitioner currently holds an unrestricted medical license in India. Petitioner has had no disciplinary action taken on this license. There is a significant need for a physician with Petitioner’s qualifications in Tennessee most specifically at Methodist University Hospital to provide access to living donor surgeries. The Petitioner has satisfied by a preponderance of the evidence that the training received meets or exceeds the requirements. The petition for Declaratory Order, for this Petitioner, was approved.