Table of Contents

Certification Signed by the Board President 1
Certification Signed by the Board Secretary 2
Receipts and Disbursements 3

Medical Doctors (MDs)
Map: Active MDs by County of Practice, With 10-Year Retirement Data 4
MD Practice Demographics 5
MDs Licensed Between July 1, 2016 and June 30, 2018 6
Licensure Denials Between July 1, 2016 and June 30, 2018 36
Active MDs by County of Practice and Specialty as of June 30, 2018 37
Active Out-of-State MDs by State and by Primary Specialty as of June 30, 2018 60
Complaints Received 7/1/16 – 6/30/18 That Resulted in Board Action 80
Complaints Received On/After 7/1/16 That Were Open/Pending As Of 6/30/18 88
Complaints Received 7/1/16 – 6/30/18 That Were Closed Without Board Action 94
Complaints Closed With Board Action 7/1/16 – 6/30/18 108
Complaints Closed Without Board Action 7/1/16 – 6/30/18 118

Podiatric Physicians (DPMs)
Map: DPMs by County of Practice, With 10-Year Retirement Data 138
DPM Practice Demographics 139
DPMs Licensed Between July 1, 2016 and June 30, 2018 140
Active DPMs by County of Practice and Primary Specialty as of June 30, 2018 141
Active Out-of-State DPMs by State and Primary Specialty as of June 30, 2018 143
Complaints Received 7/1/16 – 6/30/18 That Resulted in Board Action 144
Complaints Received On/After 7/1/16 That Were Open/Pending As Of 6/30/18 145
Complaints Closed With Board Action 7/1/16 – 6/30/18 146
Complaints Closed Without Board Action 7/1/16 – 6/30/18 147
Physician Assistants (PAs)

Map: PAs by Primary County of Practice, With 10-Year Retirement Data 148
PA Practice Demographics 149
PA Licensed Between July 1, 2016 and June 30, 2018 150
Complaints Received 7/1/16 – 6/30/18 That Resulted in Board Action 155
Complaints Received On/After 7/1/16 That Were Open/Pending As Of 6/30/18 156
Complaints Received 7/1/16 – 6/30/18 Closed Without Board Action 157
Complaints Closed With Board Action 7/1/16 – 6/30/18 158
Complaints Closed Without Board Action 7/1/16 – 6/30/18 159

Radiology Assistants

Radiology Assistants Licensed Between July 1, 2016 and June 30, 2018 160

Certificates Issued

Controlled Substance Dispensing Registration Certificates Issued 161
Medical Corporation Certificate of Authorization Issued 163
Professional Limited Liability Company Certificate of Authorization Issued 164

West Virginia Medical Professionals Health Program Data

West Virginia Medical Professionals Health Program Data 166

Meeting Agenda and Minutes – July 1, 2016 to June 30, 2017

Physician Assistant Committee 168
Licensure Committee 200
Legislative Committee 275
Executive/Management Committee 328
Complaint Committee 353
Personnel Committee 393
Board 397
Meeting Agenda and Minutes – July 1, 2017 to June 30, 2018

Physician Assistant Committee 630
Licensure Committee 668
Legislative Committee 731
Executive/Management Committee 891
Nominating Committee 923
Personnel Committee 926
Complaint Committee 928
Board 979
Pursuant to W. Va. Code §30-1-12(b), I do hereby certify that the following West Virginia Board of Medicine 2016 through 2018 Biennial Report to the Legislature is a true assessment of the activities of the West Virginia Board of Medicine.
Pursuant to W. Va. Code §30-1-12(b), I do hereby certify that the following West Virginia Board of Medicine 2016 through 2018 Biennial Report to the Legislature is a true assessment of the activities of the West Virginia Board of Medicine.

Catherine C. Slemp, MD, MPH
Secretary
**Receipts and Disbursements**

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<th>RECEIPTS</th>
<th>Fiscal Year 2017</th>
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<td>Licensure applications, registrations and renewals</td>
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* All fines and penalties are transferred to the state’s General Fund.
** Personal services reported for fiscal 2017 did not include benefits of $233,483.02. Benefits of $234,917.49 are included in the fiscal 2018 total.
Number of Active Medical Doctors by County of Practice
( ) = MDs Retiring Within 10 Years
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## Complaints - Medical Doctors
### Received Between July 1, 2016 and June 30, 2018 That Resulted in Board Action

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<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
<th>Date of Action</th>
<th>Disposition</th>
</tr>
</thead>
<tbody>
<tr>
<td>16-090-W</td>
<td>Deceptive representations in practice, Disciplinary action in another state/license denial, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Violation of laws, rules and orders</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
<td>01/12/2017</td>
<td>Public Reprimand</td>
</tr>
<tr>
<td>16-093-W</td>
<td>Conviction: felony, moral turpitude, relation to practice, Disciplinary action in another state/license denial, Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
<td>01/09/2017</td>
<td>Public Reprimand</td>
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<td>16-094-W</td>
<td>Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse, Unprofessional, unethical conduct</td>
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<td>02/22/2017</td>
<td>Voluntary Surrender of License</td>
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<td>02/02/2017</td>
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<td>06/09/2017</td>
<td>Voluntary Surrender of License</td>
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<tr>
<td>17-008-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>07/08/2017</td>
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<td>06/27/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
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<td>Complaint Number</td>
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<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<td>05/02/2017</td>
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<td>17-024-W</td>
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<td>04/18/2018</td>
<td>Limitation or Restriction on License/Practice,</td>
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<tr>
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<td>in accord with medical standards, Professional incompetence, Unprofessional,</td>
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<td>Probation of License, Public Reprimand</td>
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<tr>
<td>17-026-W</td>
<td>Disciplinary action in another state/license denial, Violation of laws, rules and</td>
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<td>07/08/2018</td>
<td>06/09/2017</td>
<td>Limitation or Restriction on License/Practice</td>
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</table>
## Complaints - Medical Doctors
### Received Between July 1, 2016 and June 30, 2018 That Resulted in Board Action

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<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
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</tr>
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<tbody>
<tr>
<td>17-053-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
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<td>09/11/2017</td>
<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
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<td>17-056-W</td>
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<td>10/05/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
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<td>17-059-W</td>
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<td>17-062-W</td>
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<tr>
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## Complaints - Medical Doctors
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<tr>
<td>17-068-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<td>17-074-W</td>
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<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<td>17-078-W</td>
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<td>09/25/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
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<tr>
<td>17-079-W</td>
<td>Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>01/02/2018</td>
<td>Education and Training Required, Probation of License, Public Reprimand</td>
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<tr>
<td>17-101-W</td>
<td>Disciplinary action in another state/license denial, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>05/07/2018</td>
<td>Revocation of License</td>
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<tr>
<td>17-102-W</td>
<td>Unprofessional, unethical conduct</td>
<td>11/07/2017</td>
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<td>17-104-W</td>
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<td>11/07/2017</td>
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<td>09/11/2017</td>
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### Complaints - Medical Doctors
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<tbody>
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<td>17-106-W</td>
<td>Unprofessional, unethical conduct</td>
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<td>17-107-W</td>
<td>Unprofessional, unethical conduct</td>
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<td>11/01/2017</td>
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<tr>
<td>17-109-W</td>
<td>Unprofessional, unethical conduct</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>10/24/2017</td>
<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
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<tr>
<td>17-110-W</td>
<td>Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse, Unprofessional, unethical conduct</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>06/05/2018</td>
<td>Probation of License</td>
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<tr>
<td>17-112-W</td>
<td>Unprofessional, unethical conduct</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>10/07/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
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<td>17-115-W</td>
<td>Gross negligence regarding prescription forms, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Violation of laws, rules and orders</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>04/18/2018</td>
<td>Education and Training Required, Public Reprimand</td>
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<tr>
<td>Complaint Number</td>
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<tr>
<td>17-122-W</td>
<td>Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>11/25/2017</td>
<td>11/25/2018</td>
<td>08/30/2017</td>
<td>Limitation or Restriction on License/Practice</td>
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<tr>
<td>17-138-W</td>
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<td>01/09/2018</td>
<td>01/09/2019</td>
<td>01/02/2018</td>
<td>Administrative Fine/Monetary Penalty</td>
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<tr>
<td>17-147-W</td>
<td>Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse, Unprofessional, unethical conduct</td>
<td>12/13/2017</td>
<td>12/13/2018</td>
<td>10/05/2017</td>
<td>Voluntary Surrender of License</td>
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<tr>
<td>18-002-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>04/18/2018</td>
<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
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<tr>
<td>18-009-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>04/18/2018</td>
<td>Administrative Fine/Monetary Penalty</td>
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</tbody>
</table>
## Complaints - Medical Doctors

**Received Between July 1, 2016 and June 30, 2018 That Resulted in Board Action**

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<tr>
<th>Complaint Number</th>
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<tr>
<td>18-014-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>06/27/2018</td>
<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
</tr>
<tr>
<td>18-017-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>04/24/2018</td>
<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
</tr>
<tr>
<td>18-021-W</td>
<td>False or deceptive advertising, Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Unprofessional, unethical conduct -- Failure to report licensee in violation of Medical Practice Act, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>3/23/2018</td>
<td>Revocation of License</td>
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## Complaints - Medical Doctors

### Received On/After July 1, 2016 That Were Open/Pending As Of June 30, 2018

<table>
<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
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<tr>
<td>16-154-W</td>
<td>Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Professional incompetence, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva</td>
<td>05/13/2017</td>
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<tr>
<td>17-026-W</td>
<td>Disciplinary action in another state/license denial, Violation of laws, rules and orders</td>
<td>07/08/2017</td>
<td>07/08/2018</td>
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<td>17-100-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>11/7/2017</td>
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</tr>
<tr>
<td>17-156-W</td>
<td>Malpractice or failure to practice acceptably</td>
<td>11/22/2017</td>
<td>*05/22/2019</td>
</tr>
<tr>
<td>17-157-J</td>
<td>Malpractice or failure to practice acceptably</td>
<td>11/22/2017</td>
<td>*05/29/2019</td>
</tr>
<tr>
<td>17-158-S</td>
<td>Malpractice or failure to practice acceptably</td>
<td>11/22/2017</td>
<td>*05/28/2019</td>
</tr>
<tr>
<td>17-159-D</td>
<td>Malpractice or failure to practice acceptably</td>
<td>11/22/2017</td>
<td>*05/29/2019</td>
</tr>
<tr>
<td>17-160-M</td>
<td>Malpractice or failure to practice acceptably</td>
<td>11/22/2017</td>
<td>*05/22/2019</td>
</tr>
<tr>
<td>17-163-W</td>
<td>Failure to keep written records justifying treatment, Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>03/07/2018</td>
<td>03/07/2019</td>
</tr>
<tr>
<td>17-168-W</td>
<td>Malpractice or failure to practice acceptably, Professional incompetence</td>
<td>03/10/2018</td>
<td>03/10/2019</td>
</tr>
<tr>
<td>17-176-H</td>
<td>Malpractice or failure to practice acceptably</td>
<td>04/10/2018</td>
<td>04/10/2019</td>
</tr>
<tr>
<td>17-178-W</td>
<td>Malpractice or failure to practice acceptably</td>
<td>04/16/2018</td>
<td>04/16/2019</td>
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<tr>
<td>17-180-W</td>
<td>Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>05/12/2018</td>
<td>05/12/2019</td>
</tr>
<tr>
<td>17-181-W</td>
<td>Disciplinary action in another state/license denial</td>
<td>05/12/2018</td>
<td>05/12/2019</td>
</tr>
<tr>
<td>17-181-W</td>
<td>Disciplinary action in another state/license denial</td>
<td>05/12/2018</td>
<td>05/12/2019</td>
</tr>
<tr>
<td>17-187-W</td>
<td>Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Professional incompetence, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva, Violation of laws, rules and orders</td>
<td>05/12/2018</td>
<td>05/12/2019</td>
</tr>
</tbody>
</table>

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### Complaints - Medical Doctors

**Received On/After July 1, 2016 That Were Open/Pending As Of June 30, 2018**

<table>
<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>17-188-W</td>
<td>Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Professional incompetence, Unprofessional, unethical conduct, Violation of laws, rules and orders</td>
<td>05/12/2018</td>
<td>05/12/2019</td>
</tr>
<tr>
<td>17-189-W</td>
<td>Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Professional incompetence, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva, Violation of laws, rules and orders</td>
<td>05/12/2018</td>
<td>05/12/2019</td>
</tr>
<tr>
<td>17-191-W</td>
<td>Failure to keep written records justifying treatment, Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct</td>
<td>05/12/2018</td>
<td>05/12/2019</td>
</tr>
<tr>
<td>17-192-W</td>
<td>Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse, Unprofessional, unethical conduct</td>
<td>05/12/2018</td>
<td>05/12/2019</td>
</tr>
<tr>
<td>17-193-W</td>
<td>Unprofessional, unethical conduct</td>
<td>05/12/2018</td>
<td>05/12/2019</td>
</tr>
<tr>
<td>17-198-B</td>
<td>Malpractice or failure to practice acceptably</td>
<td>05/17/2018</td>
<td>05/17/2019</td>
</tr>
<tr>
<td>17-201-H</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>05/29/2018</td>
<td>05/29/2019</td>
</tr>
<tr>
<td>17-204-P</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>06/14/2018</td>
<td>06/14/2019</td>
</tr>
<tr>
<td>17-205-C</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>06/27/2018</td>
<td>06/27/2019</td>
</tr>
<tr>
<td>18-001-S</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>06/29/2018</td>
<td>06/29/2019</td>
</tr>
<tr>
<td>18-008-W</td>
<td>Malpractice or failure to practice acceptably, Professional incompetence, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
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<tr>
<td>18-016-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
</tr>
</tbody>
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### Complaints - Medical Doctors

**Received On/After July 1, 2016 That Were Open/Pending As Of June 30, 2018**

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<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-022-W</td>
<td>Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct, Violation of laws, rules and orders</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
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<tr>
<td>18-023-N</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>07/04/2018</td>
<td>07/04/2019</td>
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<tr>
<td>18-024-M</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>07/16/2018</td>
<td>07/16/2019</td>
</tr>
<tr>
<td>18-027-W</td>
<td>Exercising influence for sexual activity with patient, Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>7/25/2018</td>
<td>7/25/2019</td>
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<tr>
<td>18-029-C</td>
<td>Unprofessional, unethical conduct</td>
<td>7/31/2018</td>
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<tr>
<td>18-032-B</td>
<td>Malpractice or failure to practice acceptably</td>
<td>8/16/2018</td>
<td>8/16/2019</td>
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<tr>
<td>18-033-K</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>8/16/2018</td>
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</tr>
<tr>
<td>18-034-N</td>
<td>Malpractice or failure to practice acceptably</td>
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<td>8/21/2019</td>
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<tr>
<td>18-035-Z</td>
<td>Unprofessional, unethical conduct</td>
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<tr>
<td>18-036-C</td>
<td>Unprofessional, unethical conduct</td>
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</tr>
<tr>
<td>18-037-W</td>
<td>Malpractice or failure to practice acceptably</td>
<td>8/26/2018</td>
<td>8/26/2019</td>
</tr>
<tr>
<td>18-038-S</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>8/26/2018</td>
<td>8/26/2019</td>
</tr>
<tr>
<td>18-039-W</td>
<td>Unprofessional, unethical conduct</td>
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<tr>
<td>18-040-B</td>
<td>Unprofessional, unethical conduct</td>
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</tr>
<tr>
<td>18-041-W</td>
<td>Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva</td>
<td>9/11/2018</td>
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<tr>
<td>18-042-W</td>
<td>Malpractice or failure to practice acceptably</td>
<td>9/11/2018</td>
<td>9/11/2019</td>
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<tr>
<td>18-043-W</td>
<td>Malpractice or failure to practice acceptably, Professional incompetence, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>9/11/2018</td>
<td>9/11/2019</td>
</tr>
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<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-045-W</td>
<td>Unprofessional, unethical conduct</td>
<td>9/11/2018</td>
<td>9/11/2019</td>
</tr>
<tr>
<td>18-046-W</td>
<td>Malpractice or failure to practice acceptably</td>
<td>9/11/2018</td>
<td>9/11/2019</td>
</tr>
<tr>
<td>18-051-W</td>
<td>Unprofessional, unethical conduct</td>
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<tr>
<td>18-052-W</td>
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<tr>
<td>18-053-W</td>
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<tr>
<td>18-054-W</td>
<td>Unprofessional, unethical conduct</td>
<td>9/11/2018</td>
<td>9/11/2019</td>
</tr>
<tr>
<td>18-055-W</td>
<td>Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse</td>
<td>9/11/2018</td>
<td>9/11/2019</td>
</tr>
<tr>
<td>18-056-W</td>
<td>Unprofessional, unethical conduct</td>
<td>9/11/2018</td>
<td>9/11/2019</td>
</tr>
<tr>
<td>18-062-F</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>9/8/2018</td>
<td>9/8/2019</td>
</tr>
<tr>
<td>18-063-B</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>9/12/2018</td>
<td>9/12/2019</td>
</tr>
<tr>
<td>18-064-C</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>9/12/2018</td>
<td>9/12/2019</td>
</tr>
<tr>
<td>18-065-C</td>
<td>Malpractice or failure to practice acceptably</td>
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<tr>
<td>18-066-C</td>
<td>Malpractice or failure to practice acceptably</td>
<td>9/22/2018</td>
<td>9/22/2019</td>
</tr>
<tr>
<td>18-067-C</td>
<td>Malpractice or failure to practice acceptably</td>
<td>9/22/2018</td>
<td>9/22/2019</td>
</tr>
<tr>
<td>18-068-T</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>9/26/2018</td>
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</tr>
<tr>
<td>18-069-T</td>
<td>Malpractice or failure to practice acceptably</td>
<td>9/26/2018</td>
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<tr>
<td>18-070-R</td>
<td>Malpractice or failure to practice acceptably</td>
<td>10/2/2018</td>
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<tr>
<td>18-071-G</td>
<td>Malpractice or failure to practice acceptably</td>
<td>10/9/2018</td>
<td>10/9/2019</td>
</tr>
</tbody>
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# Complaints - Medical Doctors

## Received On/After July 1, 2016 That Were Open/Pending As Of June 30, 2018

<table>
<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-072-M</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>10/10/2018</td>
<td>10/10/2019</td>
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<tr>
<td>18-073-H</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>10/10/2018</td>
<td>10/10/2019</td>
</tr>
<tr>
<td>18-074-B</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>10/11/2018</td>
<td>10/11/2019</td>
</tr>
<tr>
<td>18-075-D</td>
<td>Malpractice or failure to practice acceptably</td>
<td>10/12/2018</td>
<td>10/12/2019</td>
</tr>
<tr>
<td>18-076-B</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>10/17/2018</td>
<td>10/17/2019</td>
</tr>
<tr>
<td>18-081-W</td>
<td>Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct, Violation of laws, rules and orders</td>
<td>11/6/2018</td>
<td>11/6/2019</td>
</tr>
<tr>
<td>18-082-W</td>
<td>Violation of laws, rules and orders</td>
<td>11/6/2018</td>
<td>11/6/2019</td>
</tr>
<tr>
<td>18-083-W</td>
<td>Prescribing other than in good faith in accord with medical standards, Violation of laws, rules and orders</td>
<td>11/6/2018</td>
<td>11/6/2019</td>
</tr>
<tr>
<td>18-084-W</td>
<td>Prescribing other than in good faith in accord with medical standards, Violation of laws, rules and orders</td>
<td>11/6/2018</td>
<td>11/6/2019</td>
</tr>
<tr>
<td>18-085-D</td>
<td>Unprofessional, unethical conduct</td>
<td>10/30/2018</td>
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</tr>
<tr>
<td>18-086-R</td>
<td>Unprofessional, unethical conduct</td>
<td>11/7/2018</td>
<td>11/7/2019</td>
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<tr>
<td>18-087-D</td>
<td>Unprofessional, unethical conduct</td>
<td>11/7/2018</td>
<td>11/7/2019</td>
</tr>
<tr>
<td>18-088-N</td>
<td>Unprofessional, unethical conduct</td>
<td>11/14/2018</td>
<td>11/14/2019</td>
</tr>
<tr>
<td>18-090-F</td>
<td>Unprofessional, unethical conduct</td>
<td>11/14/2018</td>
<td>11/14/2019</td>
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### Complaints - Medical Doctors

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<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-092-G</td>
<td>Malpractice or failure to practice acceptably</td>
<td>11/14/2018</td>
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</tr>
<tr>
<td>18-093-C</td>
<td>Malpractice or failure to practice acceptably</td>
<td>11/24/2018</td>
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<tr>
<td>18-094-C</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>11/24/2018</td>
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</tr>
<tr>
<td>18-095-J</td>
<td>Malpractice or failure to practice acceptably</td>
<td>11/29/2018</td>
<td>11/29/2019</td>
</tr>
<tr>
<td>18-096-A</td>
<td>Malpractice or failure to practice acceptably</td>
<td>12/04/2018</td>
<td>12/04/2019</td>
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<tr>
<td>18-097-R</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>12/12/2018</td>
<td>12/12/2019</td>
</tr>
<tr>
<td>18-098-Y</td>
<td>Malpractice or failure to practice acceptably</td>
<td>12/6/2018</td>
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<tr>
<td>18-099-T</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>12/13/2018</td>
<td>12/13/2019</td>
</tr>
<tr>
<td>18-100-W</td>
<td>Unprofessional, unethical conduct</td>
<td>12/21/2018</td>
<td>12/21/2019</td>
</tr>
<tr>
<td>18-101-M</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>12/21/2018</td>
<td>12/21/2019</td>
</tr>
<tr>
<td>18-102-C</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>12/21/2018</td>
<td>12/21/2019</td>
</tr>
<tr>
<td>18-103-C</td>
<td>Unprofessional, unethical conduct</td>
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<td>12/26/2019</td>
</tr>
<tr>
<td>18-104-B</td>
<td>Unprofessional, unethical conduct</td>
<td>12/28/2018</td>
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# Complaints - Medical Doctors

## Received Between July 1, 2016 and June 30, 2018 Closed Without Board Action

<table>
<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
<th>Complaint Closure Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>16-085-D</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>01/05/2017</td>
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<td>11/13/2016</td>
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<tr>
<td>16-086-V</td>
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<td>01/05/2017</td>
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<tr>
<td>16-087-E</td>
<td>Malpractice or failure to practice acceptably</td>
<td>01/07/2017</td>
<td>01/07/2018</td>
<td>11/13/2016</td>
</tr>
<tr>
<td>16-088-Z</td>
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<td>01/07/2017</td>
<td>01/07/2018</td>
<td>11/13/2016</td>
</tr>
<tr>
<td>16-091-W</td>
<td>Failure to perform statutory or legal obligation, Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
<td>11/13/2016</td>
</tr>
<tr>
<td>16-096-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
<td>09/11/2016</td>
</tr>
<tr>
<td>16-097-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
<td>11/13/2016</td>
</tr>
<tr>
<td>16-099-W</td>
<td>Disciplinary action in another state/license denial</td>
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<td>01/10/2018</td>
<td>11/13/2016</td>
</tr>
<tr>
<td>16-100-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<td>01/10/2018</td>
<td>11/13/2016</td>
</tr>
<tr>
<td>16-101-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<td>01/10/2018</td>
<td>11/13/2016</td>
</tr>
<tr>
<td>16-102-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
<td>09/11/2016</td>
</tr>
<tr>
<td>16-103-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>01/10/2017</td>
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<td>03/13/2017</td>
</tr>
<tr>
<td>16-104-W</td>
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<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<td>Disciplinary action in another state/license denial</td>
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# Complaints - Medical Doctors

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<td>16-128-W</td>
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<td>Exercising influence for sexual activity with patient, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Issuing grossly improbable statements deceiving public</td>
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<td>Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse</td>
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## Complaints - Medical Doctors
### Received Between July 1, 2016 and June 30, 2018 Closed Without Board Action

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<tr>
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<tr>
<td>17-058-W</td>
<td>Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally</td>
<td>09/12/2017</td>
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# Complaints - Medical Doctors

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<td>False reporting/failing to file required report, Unprofessional, unethical conduct</td>
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<td>17-092-J</td>
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# Complaints - Medical Doctors

**Received Between July 1, 2016 and June 30, 2018 Closed Without Board Action**

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<tr>
<td>17-196-M</td>
<td>Knowing delegation of responsibilities to one unqualified, Malpractice or failure to practice acceptably</td>
<td>05/13/2018</td>
<td>05/13/2019</td>
<td>03/19/2018</td>
</tr>
</tbody>
</table>
## Complaints - Medical Doctors

**Received Between July 1, 2016 and June 30, 2018 Closed Without Board Action**

<table>
<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
<th>Complaint Closure Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>17-199-T</td>
<td>Unprofessional, unethical conduct</td>
<td>05/21/2018</td>
<td>05/21/2019</td>
<td>03/19/2018</td>
</tr>
<tr>
<td>17-200-M</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>05/27/2018</td>
<td>05/27/2019</td>
<td>03/19/2018</td>
</tr>
<tr>
<td>17-202-N</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>06/06/2018</td>
<td>06/06/2019</td>
<td>03/19/2018</td>
</tr>
<tr>
<td>17-203-S</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>06/11/2018</td>
<td>06/11/2019</td>
<td>05/07/2018</td>
</tr>
<tr>
<td>18-005-W</td>
<td>Malpractice or failure to practice acceptably</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>05/07/2018</td>
</tr>
<tr>
<td>18-010-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>03/19/2018</td>
</tr>
<tr>
<td>18-012-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>03/19/2018</td>
</tr>
<tr>
<td>18-018-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>03/19/2018</td>
</tr>
<tr>
<td>18-019-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>03/19/2018</td>
</tr>
<tr>
<td>18-020-W</td>
<td>Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Unprofessional, unethical conduct -- Failure to report licensee in violation of Medical Practice Act, Violation of laws, rules and orders, Willful violation of confidential communication</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>03/19/2018</td>
</tr>
<tr>
<td>18-026-M</td>
<td>Malpractice or failure to practice acceptably</td>
<td>7/22/2018</td>
<td>7/22/2019</td>
<td>05/07/2018</td>
</tr>
<tr>
<td>18-028-M</td>
<td>Malpractice or failure to practice acceptably</td>
<td>7/29/2018</td>
<td>7/29/2019</td>
<td>05/07/2018</td>
</tr>
<tr>
<td>18-030-B</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>7/31/2018</td>
<td>7/31/2019</td>
<td>05/07/2018</td>
</tr>
<tr>
<td>18-031-S</td>
<td>Unprofessional, unethical conduct</td>
<td>8/6/2018</td>
<td>8/6/2019</td>
<td>05/07/2018</td>
</tr>
<tr>
<td>18-065-H</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>9/12/2018</td>
<td>9/12/2019</td>
<td>05/07/2018</td>
</tr>
</tbody>
</table>
# Complaints - Medical Doctors

**Closed With Board Action Between July 1, 2016 and June 30, 2018**

<table>
<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
<th>Date of Action</th>
<th>Disposition</th>
</tr>
</thead>
<tbody>
<tr>
<td>13-061-W</td>
<td>Unprofessional, unethical conduct, Conviction: felony, moral turpitude, relation to practice</td>
<td>11/19/2013</td>
<td>*Tolled/Waived</td>
<td>04/03/2017</td>
<td>Probation of License, Limitation or Restriction on License/Practice</td>
</tr>
<tr>
<td>14-069-W</td>
<td>Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Failure to keep written records justifying treatment, Prescribing other than in good faith in accord with medical standards</td>
<td>01/13/2015</td>
<td>*Tolled/Waived</td>
<td>01/12/2017</td>
<td>Voluntary Surrender of License</td>
</tr>
<tr>
<td>14-089-S</td>
<td>Exercising influence for sexual activity with patient, Failure to keep written records justifying treatment, Malpractice or failure to practice acceptably</td>
<td>03/15/2015</td>
<td>*Tolled/Waived</td>
<td>06/21/2017</td>
<td>Suspension of License (Currently stayed and on appeal before the WVSCA.)</td>
</tr>
<tr>
<td>15-015-W</td>
<td>Unprofessional, unethical conduct, Failure to keep written records justifying treatment, Prescribing other than in good faith in accord with medical standards</td>
<td>07/01/2015</td>
<td>*Tolled/Waived</td>
<td>01/12/2017</td>
<td>Voluntary Surrender of License</td>
</tr>
<tr>
<td>15-044-W</td>
<td>Failure to keep written records justifying treatment</td>
<td>09/08/2015</td>
<td>09/08/2016</td>
<td>07/11/2016</td>
<td>Reprimand or Censure</td>
</tr>
<tr>
<td>15-071-W</td>
<td>Unprofessional, unethical conduct</td>
<td>11/17/2015</td>
<td>*Tolled/Waived</td>
<td>05/08/2017</td>
<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
</tr>
<tr>
<td>15-096-W</td>
<td>Exercising influence for sexual activity with patient, Unprofessional, unethical conduct</td>
<td>01/12/2016</td>
<td>*Tolled/Waived</td>
<td>11/13/2017</td>
<td>Public Reprimand</td>
</tr>
<tr>
<td>15-107-S</td>
<td>Malpractice or failure to practice acceptably, Failure to keep written records justifying treatment, Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct</td>
<td>01/16/2016</td>
<td>*06/16/2017</td>
<td>02/22/2017</td>
<td>Limitation or Restriction on License/Practice</td>
</tr>
<tr>
<td>15-141-W</td>
<td>Fraud, deception relating to license examination</td>
<td>03/13/2016</td>
<td>03/13/2017</td>
<td>01/09/2017</td>
<td>Public Reprimand</td>
</tr>
</tbody>
</table>

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## Complaints - Medical Doctors
Closed With Board Action Between July 1, 2016 and June 30, 2018

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</tr>
</thead>
<tbody>
<tr>
<td>16-002-W</td>
<td>Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct</td>
<td>07/10/2016</td>
<td>07/10/2017</td>
<td>06/27/2017</td>
<td>Education and Training Required</td>
</tr>
<tr>
<td>16-008-W</td>
<td>Malpractice or failure to practice acceptably</td>
<td>07/10/2016</td>
<td>07/10/2017</td>
<td>02/28/2017</td>
<td>Limitation or Restriction on License/Practice</td>
</tr>
<tr>
<td>16-019-H</td>
<td>Unprofessional, unethical conduct</td>
<td>08/05/2016</td>
<td>*Tolled/Waived</td>
<td>11/13/2017</td>
<td>Public Reprimand</td>
</tr>
<tr>
<td>16-025-H</td>
<td>Failure to perform statutory or legal obligation, Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct, Prescribing controlled substances other than medicinally/to eva, Violation of laws, rules and orders, Willful violation of confidential communication</td>
<td>08/23/2016</td>
<td>08/23/2017</td>
<td>06/09/2017</td>
<td>Voluntary Surrender of License</td>
</tr>
<tr>
<td>16-050-S</td>
<td>Malpractice or failure to practice acceptably</td>
<td>10/01/2016</td>
<td>10/01/2017</td>
<td>12/29/2016</td>
<td>Public Reprimand</td>
</tr>
<tr>
<td>16-063-W</td>
<td>Unprofessional, unethical conduct</td>
<td>11/15/2016</td>
<td>11/15/2017</td>
<td>10/07/2016</td>
<td>Reprimand or Censure</td>
</tr>
<tr>
<td>16-065-W</td>
<td>Exercising influence for sexual activity with patient, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Issuing grossly improbable statements deceiving public, Unprofessional, unethical conduct -- Prescribing without an ongoing physician-patient relationship</td>
<td>11/15/2016</td>
<td>11/15/2017</td>
<td>02/22/2017</td>
<td>Voluntary Surrender of License</td>
</tr>
</tbody>
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### Complaints - Medical Doctors

**Closed With Board Action Between July 1, 2016 and June 30, 2018**

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</tr>
</thead>
<tbody>
<tr>
<td>16-066-W</td>
<td>Exercising influence for sexual activity with patient, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Issuing grossly improbable statements deceiving public, Unprofessional, unethical conduct -- Prescribing without an ongoing physician-patient relationship</td>
<td>11/15/2016</td>
<td>11/15/2017</td>
<td>01/09/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>16-069-W</td>
<td>Disciplinary action in another state/license denial, Licensing application, renewal: false statements, Unprofessional, unethical conduct, Violation of laws, rules and orders</td>
<td>11/15/2016</td>
<td>11/15/2017</td>
<td>10/24/2016</td>
<td>Voluntary Surrender of License</td>
</tr>
<tr>
<td>16-090-W</td>
<td>Deceptive representations in practice, Disciplinary action in another state/license denial, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Violation of laws, rules and orders</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
<td>01/12/2017</td>
<td>Public Reprimand</td>
</tr>
<tr>
<td>16-093-W</td>
<td>Conviction: felony, moral turpitude, relation to practice, Disciplinary action in another state/license denial, Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
<td>01/09/2017</td>
<td>Public Reprimand</td>
</tr>
<tr>
<td>16-094-W</td>
<td>Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse, Unprofessional, unethical conduct</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
<td>02/22/2017</td>
<td>Voluntary Surrender of License</td>
</tr>
</tbody>
</table>

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**Closed With Board Action Between July 1, 2016 and June 30, 2018**

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</tr>
</thead>
<tbody>
<tr>
<td>16-098-W</td>
<td>Disciplinary action in another state/license denial, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
<td>01/09/2017</td>
<td>Public Reprimand</td>
</tr>
<tr>
<td>16-113-W</td>
<td>Failure to perform statutory or legal obligation, Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva, Violation of laws, rules and orders, Willful violation of confidential communication</td>
<td>02/02/2017</td>
<td>02/02/2018</td>
<td>06/09/2017</td>
<td>Voluntary Surrender of License</td>
</tr>
<tr>
<td>17-008-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>07/08/2017</td>
<td>07/08/2018</td>
<td>06/27/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-009-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>07/08/2017</td>
<td>07/08/2018</td>
<td>06/09/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-010-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>07/08/2017</td>
<td>07/08/2018</td>
<td>05/02/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
</tbody>
</table>

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# Complaints - Medical Doctors

Closed With Board Action Between July 1, 2016 and June 30, 2018

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<tr>
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<th>Disposition</th>
</tr>
</thead>
<tbody>
<tr>
<td>17-011-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/08/2017</td>
<td>07/08/2018</td>
<td>04/13/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td></td>
<td>-- Failure to conform to AMA or APMA ethical standards</td>
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<td></td>
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</tr>
<tr>
<td>17-012-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/08/2017</td>
<td>07/08/2018</td>
<td>06/07/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td></td>
<td>-- Failure to conform to AMA or APMA ethical standards</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17-015-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/08/2017</td>
<td>07/08/2018</td>
<td>04/11/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td></td>
<td>-- Failure to conform to AMA or APMA ethical standards</td>
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<td></td>
<td></td>
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<tr>
<td>17-024-W</td>
<td>Malpractice or failure to practice acceptably, Prescribing other than in good faith</td>
<td>07/08/2017</td>
<td>07/08/2018</td>
<td>04/18/2018</td>
<td>Limitation or Restriction on License/Practice,</td>
</tr>
<tr>
<td></td>
<td>in accord with medical standards, Professional incompetence, Unprofessional,</td>
<td></td>
<td></td>
<td></td>
<td>Probation of License, Public Reprimand</td>
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<td></td>
<td>unethical conduct, Unprofessional, unethical conduct</td>
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<td></td>
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<tr>
<td></td>
<td>-- Prescribing controlled substances other than medicinally/to eva, Violation of</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>laws, rules and orders</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>17-053-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>09/11/2017</td>
<td>Administrative Fine/Monetary Penalty &amp; Another</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>Action</td>
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<tr>
<td>17-056-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>10/05/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
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<tr>
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<td></td>
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</tr>
<tr>
<td>17-057-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>09/11/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
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<td></td>
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## Complaints - Medical Doctors
### Closed With Board Action Between July 1, 2016 and June 30, 2018

<table>
<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
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</tr>
</thead>
<tbody>
<tr>
<td>17-059-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>09/11/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
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<td>17-060-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<td>09/11/2017</td>
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<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
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<td>10/05/2017</td>
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<tr>
<td>17-063-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>09/25/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-066-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
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<tr>
<td>17-067-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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</tr>
<tr>
<td>17-068-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
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</tr>
<tr>
<td>17-070-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
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<td>Administrative Fine/Monetary Penalty</td>
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Complaints - Medical Doctors
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</tr>
<tr>
<td>17-074-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>09/25/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-075-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>11/13/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-076-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>06/07/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-077-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>06/06/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-078-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>09/25/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-079-W</td>
<td>Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>01/02/2018</td>
<td>Education and Training Required, Probation of License, Public Reprimand</td>
</tr>
</tbody>
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## Complaints - Medical Doctors
### Closed With Board Action Between July 1, 2016 and June 30, 2018

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<tr>
<th>Complaint Number</th>
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<th>Disposition</th>
</tr>
</thead>
<tbody>
<tr>
<td>17-101-W</td>
<td>Disciplinary action in another state/license denial, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>05/07/2018</td>
<td>Revocation of License</td>
</tr>
<tr>
<td>17-102-W</td>
<td>Unprofessional, unethical conduct</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>09/25/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-104-W</td>
<td>Unprofessional, unethical conduct</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>09/11/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-106-W</td>
<td>Unprofessional, unethical conduct</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>10/07/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-107-W</td>
<td>Unprofessional, unethical conduct</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>11/01/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-109-W</td>
<td>Unprofessional, unethical conduct</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>10/24/2017</td>
<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
</tr>
<tr>
<td>17-110-W</td>
<td>Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse, Unprofessional, unethical conduct</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>06/05/2018</td>
<td>Probation of License</td>
</tr>
<tr>
<td>17-112-W</td>
<td>Unprofessional, unethical conduct</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>10/07/2017</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-115-W</td>
<td>Gross negligence regarding prescription forms, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Violation of laws, rules and orders</td>
<td>11/07/2017</td>
<td>11/07/2018</td>
<td>04/18/2018</td>
<td>Education and Training Required, Public Reprimand</td>
</tr>
</tbody>
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## Complaints - Medical Doctors
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</thead>
<tbody>
<tr>
<td>17-122-W</td>
<td>Inability to practice safely due to/deterioration, through ageing, impairment, drug or alcohol abuse, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>11/25/2017</td>
<td>11/25/2018</td>
<td>08/30/2017</td>
<td>Limitation or Restriction on License/Practice</td>
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<tr>
<td>17-123-W</td>
<td>Exercising influence for sexual activity with patient, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Unprofessional, unethical conduct -- Prescribing without an ongoing physician-patient relationship</td>
<td>11/25/2017</td>
<td>11/25/2018</td>
<td>05/07/2018</td>
<td>Public Reprimand, Suspension of License</td>
</tr>
<tr>
<td>17-138-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>01/09/2018</td>
<td>01/09/2019</td>
<td>01/02/2018</td>
<td>Administrative Fine/Monetary Penalty</td>
</tr>
<tr>
<td>17-147-W</td>
<td>Inability to practice safely due to/deterioration, through ageing, impairment, drug or alcohol abuse, Unprofessional, unethical conduct</td>
<td>12/13/2017</td>
<td>12/13/2018</td>
<td>10/05/2017</td>
<td>Voluntary Surrender of License</td>
</tr>
<tr>
<td>17-171-W</td>
<td>Exercising influence for sexual activity with patient, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Violation of laws, rules and orders</td>
<td>03/28/2018</td>
<td>03/28/2019</td>
<td>04/24/2018</td>
<td>Public Reprimand, Suspension of License</td>
</tr>
<tr>
<td>18-002-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>04/18/2018</td>
<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
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Complaints - Medical Doctors  
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<tr>
<td>18-009-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>04/18/2018</td>
<td>Administrative Fine/Monetary Penalty</td>
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<tr>
<td>18-014-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>06/27/2018</td>
<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
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<tr>
<td>18-017-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>04/24/2018</td>
<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
</tr>
<tr>
<td>18-021-W</td>
<td>False or deceptive advertising, Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Unprofessional, unethical conduct -- Failure to report licensee in violation of Medical Practice Act, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>3/23/2018</td>
<td>Revocation of License</td>
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</tbody>
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## Complaints - Medical Doctors

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<tbody>
<tr>
<td>15-028-V</td>
<td>Unprofessional, unethical conduct</td>
<td>08/13/2015</td>
<td>*02/13/2017</td>
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<td>15-031-C</td>
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<td>09/02/2015</td>
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<td>15-036-W</td>
<td>Unprofessional, unethical conduct, Malpractice or failure to practice acceptably,</td>
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<td>Prescribing other than in good faith in accord with medical standards, Violation of</td>
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<tr>
<td></td>
<td>laws, rules and orders</td>
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<td>15-040-W</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>09/08/2015</td>
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<td>09/11/2016</td>
</tr>
<tr>
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<td>Prescribing other than in good faith in accord with medical standards</td>
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<tr>
<td>15-043-W</td>
<td>Unprofessional, unethical conduct, Disciplinary action in another state/license</td>
<td>09/08/2015</td>
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<tr>
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<tr>
<td>15-068-W</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>11/17/2015</td>
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<td>07/10/2016</td>
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<tr>
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<td>Prescribing other than in good faith in accord with medical standards, Violation of</td>
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<tr>
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<td>laws, rules and orders</td>
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<tr>
<td>15-091-G</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>12/26/2015</td>
<td>12/26/2016</td>
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<tr>
<td>15-092-P</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>12/29/2015</td>
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<tr>
<td>15-095-W</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>01/11/2016</td>
<td>01/11/2017</td>
<td>07/10/2016</td>
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<tr>
<td>15-105-W</td>
<td>Unprofessional, unethical conduct, Prescribing other than in good faith in accord</td>
<td>01/12/2016</td>
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<td>09/11/2016</td>
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<td>with medical standards, Malpractice or failure to practice acceptably, Violation</td>
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<td>of laws, rules and orders</td>
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</tr>
<tr>
<td>15-120-G</td>
<td>Unprofessional, unethical conduct</td>
<td>03/03/2016</td>
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<td>07/10/2016</td>
</tr>
<tr>
<td>15-152-F</td>
<td>Malpractice or failure to practice acceptably</td>
<td>03/16/2016</td>
<td>03/16/2017</td>
<td>03/13/2017</td>
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<tr>
<td>15-153-G</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>03/21/2016</td>
<td>03/21/2017</td>
<td>07/10/2016</td>
</tr>
<tr>
<td>15-154-S</td>
<td>Unprofessional, unethical conduct</td>
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<tr>
<td>15-168-S</td>
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<td>05/16/2016</td>
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<tr>
<td>15-176-D</td>
<td>Unprofessional, unethical conduct</td>
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<td>07/10/2016</td>
</tr>
<tr>
<td>16-001-W</td>
<td>Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse, Failure to keep written records justifying treatment</td>
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<td>01/08/2017</td>
</tr>
<tr>
<td>16-003-W</td>
<td>Knowing delegation of responsibilities to one unqualified, Malpractice or failure to practice acceptably, Professional incompetence, Unprofessional, unethical conduct -- Failing to comply with supervisory or collaborative agreement, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Violation of laws, rules and orders</td>
<td>07/10/2016</td>
<td>07/10/2017</td>
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</tr>
<tr>
<td>16-004-W</td>
<td>Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Prescribing other than in good faith in accord with medical standards, Malpractice or failure to practice acceptably, Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse</td>
<td>07/10/2016</td>
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<tr>
<td>16-006-W</td>
<td>Disciplinary action in another state/license denial, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse</td>
<td>07/10/2016</td>
<td>07/10/2017</td>
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# Complaints - Medical Doctors

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<tr>
<td>16-007-W</td>
<td>Prescribing other than in good faith in accord with medical standards</td>
<td>07/10/2016</td>
<td>07/10/2017</td>
<td>03/13/2017</td>
</tr>
<tr>
<td>16-012-S</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>06/30/2016</td>
<td>06/30/2017</td>
<td>07/10/2016</td>
</tr>
<tr>
<td>16-014-P</td>
<td>Malpractice or failure to practice acceptably</td>
<td>07/04/2016</td>
<td>07/04/2017</td>
<td>07/10/2016</td>
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<tr>
<td>16-016-B</td>
<td>Unprofessional, unethical conduct, Malpractice or failure to practice acceptably</td>
<td>07/07/2016</td>
<td>07/07/2017</td>
<td>09/11/2016</td>
</tr>
<tr>
<td>16-020-C</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>08/10/2016</td>
<td>08/10/2017</td>
<td>07/10/2016</td>
</tr>
<tr>
<td>16-023-F</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
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<td>16-024-P</td>
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<td>16-028-U</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>09/02/2016</td>
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<td>07/10/2016</td>
</tr>
<tr>
<td>16-029-W</td>
<td>Unprofessional, unethical conduct, Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct -- Prescribing without an ongoing physician-patient relationship</td>
<td>09/13/2016</td>
<td>09/13/2017</td>
<td>09/11/2016</td>
</tr>
<tr>
<td>16-031-W</td>
<td>Malpractice or failure to practice acceptably</td>
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<td>07/10/2016</td>
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<td>16-032-W</td>
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<td>09/13/2016</td>
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<tr>
<td>16-035-W</td>
<td>Disciplinary action in another state/license denial, Unprofessional, unethical conduct</td>
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<td>07/10/2016</td>
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<td>16-037-W</td>
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<td>09/13/2016</td>
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<td>16-044-T</td>
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<td>16-045-C</td>
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<td>16-047-B</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
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<td>16-048-R</td>
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<tr>
<td>16-049-F</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>09/30/2016</td>
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<tr>
<td>16-051-A</td>
<td>Malpractice or failure to practice acceptably</td>
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<tr>
<td>16-052-A</td>
<td>Knowing delegation of responsibilities to one unqualified, Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
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<td>16-055-N</td>
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<tr>
<td>16-059-N</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct -- Failing to comply with supervisory or collaborative agreement</td>
<td>10/28/2016</td>
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<tr>
<td>16-060-W</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Violation of laws, rules and orders</td>
<td>11/15/2016</td>
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<tr>
<td>16-061-W</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Violation of laws, rules and orders</td>
<td>11/15/2016</td>
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<tr>
<td>16-062-W</td>
<td>Disciplinary action in another state/license denial</td>
<td>11/15/2016</td>
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</tr>
</thead>
<tbody>
<tr>
<td>16-064-W</td>
<td>Deceptive representations in practice, Disciplinary action in another state/license denial, False reporting/failing to file required report, Kickbacks, rebates, split fees for patient referral, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Issuing grossly improbable statements deceiving public</td>
<td>11/15/2016 11/15/2017</td>
<td>07/10/2016</td>
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<tr>
<td>16-067-W</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct -- Issuing grossly improbable statements deceiving public</td>
<td>11/15/2016 11/15/2017</td>
<td>11/13/2016</td>
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<tr>
<td>16-068-W</td>
<td>Disciplinary action in another state/license denial, Licensing application, renewal: false statements, Unprofessional, unethical conduct, Violation of laws, rules and orders</td>
<td>11/15/2016 11/15/2017</td>
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<tr>
<td>16-075-P</td>
<td>Soliciting patients through fraud, undue influence, Unprofessional, unethical conduct</td>
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<tr>
<td>16-076-C</td>
<td>Malpractice or failure to practice acceptably</td>
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<td>16-078-M</td>
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<td>16-081-B</td>
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<td>12/16/2016 12/16/2017</td>
<td>11/13/2016</td>
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<tr>
<td>16-083-A</td>
<td>Deceptive representations in practice, Exercising influence for sexual activity with patient, Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>12/21/2016</td>
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<td>09/11/2016</td>
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<tr>
<td>16-084-R</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>12/27/2016</td>
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</tr>
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<td>16-085-D</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
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<tr>
<td>16-086-V</td>
<td>Unprofessional, unethical conduct</td>
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<td>11/13/2016</td>
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<tr>
<td>16-087-E</td>
<td>Malpractice or failure to practice acceptably</td>
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<td>16-088-Z</td>
<td>Malpractice or failure to practice acceptably</td>
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<tr>
<td>16-091-W</td>
<td>Failure to perform statutory or legal obligation, Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
<td>11/13/2016</td>
</tr>
<tr>
<td>16-096-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
<td>09/11/2016</td>
</tr>
<tr>
<td>16-097-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<td>01/10/2018</td>
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<tr>
<td>16-099-W</td>
<td>Disciplinary action in another state/license denial</td>
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<td>16-100-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<td>16-101-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<tr>
<td>16-103-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<tr>
<td>16-104-W</td>
<td>Malpractice or failure to practice acceptably</td>
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<tr>
<td>16-105-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
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</tr>
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<tbody>
<tr>
<td>16-106-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>01/10/2017</td>
<td>01/10/2018</td>
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<tr>
<td>16-108-W</td>
<td>Disciplinary action in another state/license denial</td>
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<tr>
<td>16-109-J</td>
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<tr>
<td>16-110-B</td>
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<td>01/08/2017</td>
</tr>
<tr>
<td>16-111-R</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>01/13/2017</td>
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<tr>
<td>16-112-S</td>
<td>Unprofessional, unethical conduct</td>
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<tr>
<td>16-114-B</td>
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<tr>
<td>16-116-F</td>
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<td>16-118-M</td>
<td>Unprofessional, unethical conduct</td>
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<tr>
<td>16-119-R</td>
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<tr>
<td>16-122-W</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>02/26/2017</td>
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<tr>
<td>16-123-W</td>
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<td>02/26/2017</td>
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<td>16-127-R</td>
<td>Malpractice or failure to practice acceptably</td>
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<tr>
<td>16-128-W</td>
<td>Deceptive representations in practice, Disciplinary action in another state/license denial, False reporting/failing to file required report, Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct</td>
<td>03/11/2017</td>
<td>03/11/2018</td>
<td>06/02/2017</td>
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<tr>
<td>16-129-W</td>
<td>Failure to perform statutory or legal obligation, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Willful violation of confidential communication</td>
<td>03/11/2017</td>
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<td>11/13/2017</td>
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<tr>
<td>16-130-W</td>
<td>Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally</td>
<td>03/11/2017</td>
<td>03/11/2018</td>
<td>07/10/2017</td>
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<tr>
<td>16-131-W</td>
<td>Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally</td>
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<tr>
<td>16-133-W</td>
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<tr>
<td>16-134-W</td>
<td>Deceptive representations in practice, Unprofessional, unethical conduct</td>
<td>03/11/2017</td>
<td>03/11/2018</td>
<td>06/02/2017</td>
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<td>16-135-K</td>
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<tr>
<td>16-138-S</td>
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<td>16-142-M</td>
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<tr>
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<tr>
<td>16-145-H</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
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<td>03/13/2017</td>
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<tr>
<td>16-146-W</td>
<td>Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Violation of laws, rules and orders</td>
<td>05/13/2017</td>
<td>05/13/2018</td>
<td>07/10/2017</td>
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<tr>
<td>16-148-W</td>
<td>Exercising influence for sexual activity with patient, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Issuing grossly improbable statements deceiving public</td>
<td>05/13/2017</td>
<td>05/13/2018</td>
<td>07/31/2017</td>
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<tr>
<td>16-149-W</td>
<td>Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Issuing grossly improbable statements deceiving public</td>
<td>05/13/2017</td>
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<td>03/13/2017</td>
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<tr>
<td>16-150-W</td>
<td>Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse</td>
<td>05/13/2017</td>
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<td>07/10/2017</td>
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<tr>
<td>16-151-W</td>
<td>Failure to perform statutory or legal obligation, Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Professional incompetence, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva</td>
<td>05/13/2017</td>
<td>05/13/2018</td>
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<tr>
<td>16-152-W</td>
<td>Failure to perform statutory or legal obligation, Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Professional incompetence, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally</td>
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<tr>
<td>16-153-W</td>
<td>Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva, Violation of laws, rules and orders</td>
<td>05/13/2017</td>
<td>05/13/2018</td>
<td>10/02/2017</td>
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<tr>
<td>16-155-W</td>
<td>Malpractice or failure to practice acceptably, Professional incompetence</td>
<td>05/13/2017</td>
<td>05/13/2018</td>
<td>03/13/2017</td>
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<tr>
<td>16-156-W</td>
<td>Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Professional incompetence, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally</td>
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<td>05/13/2018</td>
<td>05/08/2017</td>
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<tr>
<td>16-158-W</td>
<td>Failure to perform statutory or legal obligation, Unprofessional, unethical conduct</td>
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<td>05/13/2018</td>
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<tr>
<td>16-159-W</td>
<td>Unprofessional, unethical conduct</td>
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<tr>
<td>16-160-W</td>
<td>Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Professional incompetence, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva, Violation of laws, rules and orders</td>
<td>05/13/2017</td>
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<td>10/02/2017</td>
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<tr>
<td>16-161-J</td>
<td>Malpractice or failure to practice acceptably</td>
<td>05/04/2017</td>
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<td>16-162-D</td>
<td>Malpractice or failure to practice acceptably</td>
<td>05/15/2017</td>
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### Complaints - Medical Doctors

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</tr>
</thead>
<tbody>
<tr>
<td>16-164-W</td>
<td>Malpractice or failure to practice acceptably, Professional incompetence, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva, Violation of laws, rules and orders</td>
<td>05/30/2017</td>
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<td>03/13/2017</td>
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<tr>
<td>16-165-R</td>
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<td>16-169-T</td>
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<tr>
<td>16-170-M</td>
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<tr>
<td>17-003-W</td>
<td>Conviction: felony, moral turpitude, relation to practice, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Violation of laws, rules and orders</td>
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<tr>
<td>17-013-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
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<tr>
<td>17-014-W</td>
<td>Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>07/08/2017</td>
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<tr>
<td>17-016-W</td>
<td>Kickbacks, rebates, split fees for patient referral, Pre-signing blank prescription forms, Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally</td>
<td>07/08/2017</td>
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<tr>
<td>17-018-W</td>
<td>Failure to perform statutory or legal obligation, Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Professional incompetence, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally</td>
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<td>17-020-W</td>
<td>Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Professional incompetence, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva, Violation of laws, rules and orders</td>
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<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<tr>
<td>17-027-W</td>
<td>Disciplinary action in another state/license denial, Failure to perform statutory or legal obligation, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>07/08/2017</td>
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<td>Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Professional incompetence, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally/to eva, Violation of laws, rules and orders</td>
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<td>17-042-H</td>
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<td>17-044-B</td>
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<td>17-045-O</td>
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<tr>
<td>17-046-M</td>
<td>Unprofessional, unethical conduct</td>
<td>08/24/2017</td>
<td>08/24/2018</td>
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<tr>
<td>17-047-H</td>
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<td>08/27/2017</td>
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<td>07/10/2017</td>
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<tr>
<td>17-058-W</td>
<td>Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally</td>
<td>09/12/2017</td>
<td>09/12/2018</td>
<td>11/13/2017</td>
</tr>
<tr>
<td>17-061-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>09/12/2017</td>
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<td>11/13/2017</td>
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<tr>
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<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<td>17-083-W</td>
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<tr>
<td>17-084-W</td>
<td>Prescribing other than in good faith in accord with medical standards, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally</td>
<td>09/12/2017</td>
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<tr>
<td>17-085-W</td>
<td>Failure to perform statutory or legal obligation, Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>09/12/2017</td>
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<td>11/13/2017</td>
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<td>17-086-P</td>
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<tr>
<td>17-087-P</td>
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<td>17-089-C</td>
<td>False reporting/failing to file required report, Unprofessional, unethical conduct</td>
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<td>11/18/2018</td>
<td>09/12/2017</td>
</tr>
<tr>
<td>17-128-J</td>
<td>Malpractice or failure to practice acceptably</td>
<td>11/18/2017</td>
<td>11/18/2018</td>
<td>09/12/2017</td>
</tr>
<tr>
<td>17-129-H</td>
<td>Malpractice or failure to practice acceptably</td>
<td>11/30/2017</td>
<td>11/30/2018</td>
<td>09/12/2017</td>
</tr>
<tr>
<td>17-130-A</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>11/18/2017</td>
<td>11/18/2018</td>
<td>09/12/2017</td>
</tr>
<tr>
<td>17-131-S</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>12/07/2017</td>
<td>12/07/2018</td>
<td>11/13/2017</td>
</tr>
<tr>
<td>17-132-B</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>12/08/2017</td>
<td>12/08/2018</td>
<td>09/12/2017</td>
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<tr>
<td>17-133-P</td>
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<td>12/23/2017</td>
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<td>17-134-C</td>
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<td>12/23/2017</td>
<td>12/23/2018</td>
<td>09/12/2017</td>
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</table>

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# Complaints - Medical Doctors

## Closed Without Board Action Between July 1, 2016 and June 30, 2018

<table>
<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
<th>Complaint Closure Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>17-135-W</td>
<td>Failure to perform statutory or legal obligation, Malpractice or failure to practice acceptably, Prescribing other than in good faith in accord with medical standards, Professional incompetence, Unprofessional, unethical conduct -- Prescribing controlled substances other than medicinally</td>
<td>01/09/2018</td>
<td>01/09/2019</td>
<td>05/07/2018</td>
</tr>
<tr>
<td>17-136-W</td>
<td>Disciplinary action in another state/license denial, Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>01/09/2018</td>
<td>01/09/2019</td>
<td>09/11/2017</td>
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<tr>
<td>17-139-W</td>
<td>Malpractice or failure to practice acceptably</td>
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<td>01/09/2019</td>
<td>11/13/2017</td>
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<tr>
<td>17-141-W</td>
<td>Deceptive representations in practice, Failure to perform statutory or legal obligation, Unprofessional, unethical conduct</td>
<td>01/09/2018</td>
<td>01/09/2019</td>
<td>03/19/2018</td>
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<tr>
<td>17-142-Y</td>
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<td>01/03/2018</td>
<td>01/03/2019</td>
<td>11/13/2017</td>
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<tr>
<td>17-143-W</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>01/05/2018</td>
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<td>11/13/2017</td>
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<tr>
<td>17-144-M</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>01/10/2018</td>
<td>01/10/2019</td>
<td>11/13/2017</td>
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<tr>
<td>17-146-W</td>
<td>Licensing application, renewal: false statements, Malpractice or failure to practice acceptably, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>02/03/2018</td>
<td>02/03/2019</td>
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<td>17-148-D</td>
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</table>

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### Complaints - Medical Doctors
**Closed Without Board Action Between July 1, 2016 and June 30, 2018**

<table>
<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
<th>Complaint Closure Date</th>
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<td>02/16/2019</td>
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<td>17-162-M</td>
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<tr>
<td>17-165-W</td>
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<td>03/10/2019</td>
<td>01/08/2018</td>
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<tr>
<td>17-166-W</td>
<td>Disciplinary action in another state/license denial, Unprofessional, unethical</td>
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<td>conduct, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA</td>
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<td>11/13/2017</td>
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<td>01/08/2018</td>
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<td>03/09/2019</td>
<td>01/08/2018</td>
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<td>17-175-W</td>
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<tr>
<td>17-177-H</td>
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</table>

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# Complaints - Medical Doctors

## Closed Without Board Action Between July 1, 2016 and June 30, 2018

<table>
<thead>
<tr>
<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
<th>Complaint Closure Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>17-185-W</td>
<td>Malpractice or failure to practice acceptably, Professional incompetence, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>05/12/2018</td>
<td>05/12/2019</td>
<td>03/19/2018</td>
</tr>
<tr>
<td>17-186-W</td>
<td>Malpractice or failure to practice acceptably, Professional incompetence, Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards</td>
<td>05/12/2018</td>
<td>05/12/2019</td>
<td>03/19/2018</td>
</tr>
<tr>
<td>17-190-W</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
<td>05/12/2018</td>
<td>05/12/2019</td>
<td>03/19/2018</td>
</tr>
<tr>
<td>17-194-F</td>
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<td>05/07/2018</td>
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<tr>
<td>17-196-M</td>
<td>Knowing delegation of responsibilities to one unqualified, Malpractice or failure to practice acceptably</td>
<td>05/13/2018</td>
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<td>03/19/2018</td>
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<td>17-199-T</td>
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<td>05/21/2018</td>
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<td>17-202-N</td>
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<td>06/06/2018</td>
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<td>03/19/2018</td>
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<tr>
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<tr>
<td>18-018-W</td>
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<td>07/07/2018</td>
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<td>03/19/2018</td>
</tr>
</tbody>
</table>

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Complaints - Medical Doctors
Closed Without Board Action Between July 1, 2016 and June 30, 2018

<table>
<thead>
<tr>
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</tr>
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<tbody>
<tr>
<td>18-019-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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<td>03/19/2018</td>
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<tr>
<td>18-020-W</td>
<td>Unprofessional, unethical conduct -- Failure to conform to AMA or APMA ethical standards, Unprofessional, unethical conduct -- Failure to report licensee in violation of Medical Practice Act, Violation of laws, rules and orders, Willful violation of confidential communication</td>
<td>07/07/2018</td>
<td>07/07/2019</td>
<td>03/19/2018</td>
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<tr>
<td>18-026-M</td>
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</table>

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Number of Active Podiatric Physicians by County of Practice

( ) = DPMs Retiring Within 10 Years

No podiatric physicians

One or more
## Podiatric Physicians Licensed Between July 1, 2016 and June 30, 2018

<table>
<thead>
<tr>
<th>License Number</th>
<th>First Name</th>
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<td>Abbasi</td>
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<tr>
<td>10453</td>
<td>Amber</td>
<td>Marie</td>
<td>Allen</td>
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<td>10451</td>
<td>Kathryn</td>
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<td>Jason</td>
<td>Giaimo</td>
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<td>M.</td>
<td>Vess</td>
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## Complaints - Podiatric Physicians
### Received Between July 1, 2016 and June 30, 2018 That Resulted in Board Action

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<th>Complaint Number</th>
<th>Nature of Complaint</th>
<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
<th>Consent Order Date</th>
<th>Disposition</th>
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<td>Malpractice or failure to practice acceptably, Practice beyond permitted scope of practice, Prescribing other than in good faith in accord with medical standards, Violation of laws, rules and orders</td>
<td>01/11/2017</td>
<td>01/11/2018</td>
<td>07/10/2017</td>
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<td>18-07-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>07/07/2018</td>
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<td>06/21/2018</td>
<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
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# Complaints - Podiatric Physicians

## Received On/After July 1, 2016 That Were Open/Pending As Of June 30, 2018

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An asterisk denotes that the Board obtained an extension of time to issue a final ruling pursuant to West Virginia Code 30-1-5(c) and/or a waiver and tolling of the time frame. If a specific date is not provided, the waiver was indefinite.
Complaints - Podiatric Physicians  
Closed With Board Action Between July 1, 2016 and June 30, 2018

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## Complaints - Podiatric Physicians
Closed Without Board Action Between July 1, 2016 and June 30, 2018

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Number of Active Physician Assistants by County of Practice
( ) = PAs Retiring Within 10 Years

- Listed by Primary Practice Setting
- Total PAs = 974
- 130 PAs were Without Practice Agreements as of 6/30/18
- Some PAs may Practice in Multiple Counties

Legend:
- 0
- 1-25
- 26-50
- 51-75
- 76-100
- Greater than 100
Retirement Data

Gender:
- Male: 34%
- Female: 66%

Age:

Percentage of Time Spent Performing Administrative Duties:
- 0-25%, 26-50%, 51-75%, 76-100%

Percentage of Time Spent Providing Direct Service:
- 0-25%, 26-50%, 51 to 75%, 76 to 100%
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### Complaints - Physician Assistants
**Received Between July 1, 2016 and June 30, 2018 That Resulted in Board Action**

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<th>Six Month Status Letter Due</th>
<th>Final Ruling Due</th>
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<td>Unprofessional, unethical conduct, Unprofessional, unethical conduct -- Failing to comply with supervisory or collaborative agreement</td>
<td>01/10/2017</td>
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<td>01/09/2017</td>
<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
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<td>17-140-W</td>
<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
<td>01/09/2018</td>
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<td>Licensing application, renewal: false statements, Unprofessional, unethical conduct</td>
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## Complaints - Physician Assistants
### Received On/After July 1, 2016 That Were Open/Pending As Of June 30, 2018

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<td>Exercising influence for sexual activity with patient, Inability to practice safely due to/deterioration, through aging, impairment, drug or alcohol abuse, Unprofessional, unethical conduct</td>
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Complaints - Physician Assistants
Received Between July 1, 2016 and June 30, 2018 Closed Without Board Action

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<td>07/09/2017</td>
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<tr>
<td>17-151-M</td>
<td>Malpractice or failure to practice acceptably, Unprofessional, unethical conduct</td>
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## Complaints - Physician Assistants
### Closed With Board Action Between July 1, 2016 and June 30, 2018

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<th>Consent Order Date</th>
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<td>Administrative Fine/Monetary Penalty &amp; Another Action</td>
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## Controlled Substance Dispensing Registration Certificates
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<td>Yeaman</td>
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| Medical Corporation Certificates of Authorization  
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<th>Issued Between July 1, 2016 and June 30, 2018</th>
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<tr>
<td>Advanced Pain Medicine, PC</td>
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<td>American Neuromonitoring Associates, PC</td>
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<td>Blue Ridge Urogynecology, Inc.</td>
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<td>Cedar Dialysis Consulting, Inc.</td>
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<td>Dominic T. DiCiro, MD, PC</td>
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<td>East River Anesthesiology, Inc.</td>
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<td>Kae Kelly Surgical, Inc.</td>
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<td>Leprechaun Healthcare Services, Inc.</td>
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<td>Med-Surg Physician Group, Inc.</td>
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<td>Millbrook Medical Practice, PC</td>
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<td>Mountain State Vascular, Inc.</td>
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<td>Mountaineer Cardiovascular Care, Inc.</td>
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<td>Muhammed A. Khan, MD, Inc.</td>
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<td>Nones Dia Cardiac Systems, Inc.</td>
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<td>On Site Physician Medical Services of New Jersey, PC</td>
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<td>Online Care Group, PC</td>
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<td>Online Care Network II, PC</td>
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<td>Panhandle Cardiology and Vascular Medicine, PC</td>
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<td>Piayon Kobbah, MD, PC</td>
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<td>Pittsburgh Pulmonary Medicine, PC</td>
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<td>Regional Cardiac Arrhythmia, Inc.</td>
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<td>River Cities Holdings, Inc.</td>
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<td>Shaikh Medical, Inc.</td>
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<td>Virta Medical, P.C.</td>
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<td>Wadih Kabbara, MD, Inc.</td>
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<td>Zouhair Kabbara, MD, Inc.</td>
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<td>Absolute Care Clinic, PLLC</td>
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<td>Alliance Behavioral Care, PLLC</td>
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<td>Alpha Omega Medical, PLLC</td>
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<td>Chad Anderson, MD, PLLC</td>
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<td>DialCare Group West Virginia, PLLC</td>
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<td>Elite Surgical, PLLC</td>
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<td>Future Medical, PLLC</td>
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<td>Giaimo Mobile Podiatry of WV, PLLC</td>
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<td>Hamada Mahmoud, MD, PLLC</td>
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<td>HeartNexus Physician Services, PLLC</td>
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<td>Ideal Option, PLLC</td>
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<td>Javed Cardiac Center, PLLC</td>
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<td>Kirk Moses MD, PLLC</td>
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<td>MBH Physician Group - WV, PLLC</td>
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<td>Medicolegal Consultation, PLLC</td>
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<td>MediTelecare of West Virginia, PLLC</td>
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<td>MID Physician Network (WV), PLLC</td>
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<td>Midwest Neuromonitoring Associates, PLLC</td>
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<td>Prestige Worldwide Imaging and Intervention, PLLC</td>
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<td>Scott Gilchrist, MD, PLLC</td>
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<td>Skyline Wound Care, PLLC</td>
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<td>South Branch Hospitalist and Internal Medicine Group, PLLC</td>
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<td>Susan L. Cavender, MD, PLLC</td>
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<td>The Kyle Group, PLLC</td>
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<td>The Pain Center of Virginia, PLLC</td>
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<td>Tri-State Physiatry, PLLC</td>
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<td>USA Vein Clinics of West Virginia, PLLC</td>
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<td>West Virginia Cornea and Cataract Center of Excellence, PLLC</td>
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<td>William A. Merva, MD, PLLC</td>
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Fiscal 2017
Committee Meeting Agendas
and Minutes
Physician Assistant Committee
Meeting Agendas and Minutes
Call to Order

Approval of Minutes

1. Approval of May 14, 2016, Physician Assistant Committee Meeting Minutes.

Consent Order Update

2. Jacqueline Renae Shipman-Cespedes, P.A.-C.

Appearance

3. Joanne Marie Torres, P.A.-C.

New Licensure Applicants

5. Jeffrey Howard Belabin, P.A.-C.
6. Denise Lyn Beltowski, P.A.-C.
7. Thaddeus Haun Amadayo Dell’Orso, P.A.-C.
8. Ashley Nicole Fhersole, P.A.-C.
10. Karen Renea Flannagan, P.A.-C.
11. Krisi Hay Gindlesperger, P.A.-C.
12. Michael Dana Grimes, P.A.-C.
13. Peter Samir Hanna, P.A.-C.
14. Julie Mae King, P.A.-C.
15. Chelsea Renee Mackall, P.A.-C.
16. Anne Patricia Mittal, P.A.-C.
17. Derek Marcel Pivac, P.A.-C.
18. Christina Marie Saggio, P.A.-C.

Discussion

A. Emily Rebecca Amend, P.A.-C.
B. Practice Agreement Status Report

Adjournment
New Licensure Applicants

1. Emily Elizabeth Anderkin, P.A.-C.
2. Kelly Beth Belt, P.A.-C.
3. Marisa Lynn Blatt, P.A.-C.
4. Jamie Russell Mehall, P.A.-C.
5. Hang Yu Shen Watson, P.A.-C.

Discussion

A. Revision of Legislative Rule 11CSR1B

Update

- Licensure applicant #8 Ashley Nicole Ebersole on the regular agenda recently got married and her new name is Ashley Ebersole Mellert.
A meeting of the West Virginia Board of Medicine Physician Assistant Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 9th day of July 2016 at 9:00 a.m.

The following Committee members were present:

Kenneth Dean Wright, P.A.-C., Chair
Rusty L. Cain, D.P.M.
Carlos C. Jimenez, M.D.
Mustafa Rahim, M.D.
Ashish P. Sheth, M.D.

The following Committee member was absent:

Michael L. Ferrebee, M.D.

The following Staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Amy C. Callihan

With a quorum present, Mr. Wright called the meeting to order. A motion was made by Dr. Cain and seconded by Dr. Sheth, to approve the minutes of the May 14, 2016, meeting of the Physician Assistant Committee. The motion carried.

The Committee reviewed an update from Board staff regarding the status of a pending licensure Consent Order offer. At the Board meeting on May 14, 2016, the Physician Assistant Committee recommended, and the Board approved, that Jacqueline Renae Shipman-Cespedes, P.A.-C. be approved for licensure contingent upon her acceptance of a Consent Order with the following terms: (1) that any proposed practice agreement submitted by Ms. Shipman-Cespedes
must be reviewed by the Physician Assistant Committee; (2) that Ms. Shipman-Cespedes shall be required to practice under the direct supervision for a minimum of six months; and (3) that Ms. Shipman-Cespedes’ supervising physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when the direct supervision requirement should be lifted. Ms. Shipman-Cespedes agreed to these terms, and entered into a Consent Order with the Board on June 3, 2016.

A motion was made by Dr. Rahim to recommend the following applicants be approved for Physician Assistant Licensure:

Emily Elizabeth Anderkin, P.A.-C.
Natasha Rae Andrews, P.A.-C.
Jeffrey Howard Belabin, P.A.-C.
Kelly Beth Belt, P.A.-C.
Denise Lyn Beltowski, P.A.-C.
Marisa Lynn Blatt, P.A.-C.
Thaddeus Haun Amadayo Dell’Orso, P.A.-C.
Beth Virginia Edwards, P.A.-C.
Karen Renea Flannagan, P.A.-C.
Krisi Hay Gindlesperger, P.A.-C.
Michael Dana Grimes, P.A.-C.
Peter Samir Hanna, P.A.-C.
Julie Mae King, P.A.-C.
Chelsea Renee Mackall, P.A.-C.
Jamie Russell Mehall, P.A.-C.
Ashley Ebersole Mellert, P.A.-C.
Anne Patricia Mittal, P.A.-C.
Derek Marcel Pivac, P.A.-C.
Christina Marie Saggio, P.A.-C.
HangYu Shen Watson, P.A.-C.

Dr. Sheth seconded the motion, and the motion carried.

Joanne Marie Torres, P.A.-C. appeared before the Physician Assistant Committee in support of her application for Physician Assistant Licensure. After an in depth discussion with Ms. Torres,
Dr. Jimenez moved that the Committee recommend that the Board approve Ms. Torres’ application. Dr. Rahim seconded the motion, and the motion carried.

The Committee reviewed a matter of a licensee who potentially elected to not notify the Board of a termination of a practice agreement and possibly practiced without authorization. Dr. Cain made a motion to refer this matter to the Complaint Committee. Dr. Rahim seconded the motion, and the motion carried.

The Committee reviewed a revision to Legislative Rule 11CSR1B. No action was taken.

Ms. Callihan provided the Committee with an update indicating that thirty-three (33) practice agreements and twenty (20) alternate supervising physicians have been authorized since the May 14, 2016 meeting.

There being no further business, the Physician Assistant Committee was adjourned by consensus.

Kenneth Dean Wright, P.A.-C.
Chair of the Physician Assistant Committee
Call to Order

Approval of Minutes

1. Approval of July 9, 2016, Physician Assistant Committee Meeting Minutes.

New Licensure Applicants

2. Ryan Benjamin Aston, P.A.-C.
3. Linda Rita Boggs, P.A.-C.
4. Andrea Nicole Campbell, P.A.-C.
5. Anthony Wayne Casto, P.A.-C.
6. Kimberly Elaine Connor, P.A.-C.
7. Allison Virginia Durkin, P.A-C.
8. Chad A. Ford, P.A.-C.
9. Michael Hilton Kuzman, P.A.-C.
10. Meredith Caroline Liddle, P.A.-C.
11. Charles Darrell McKinney, P.A.-C.
12. Benjamin John Meighen, P.A.-C.
13. Polly Ann Porter, P.A.-C.
15. Mary Anne Stunja, P.A.-C.
16. Mara Wright Sutphin, P.A.-C.
17. Martha Marie Williams, P.A.-C.
18. Margaret Jane Alden, P.A.-C. – Add-on
19. Lauren Marie Bosner, P.A.-C. – Add-on

Discussion

A. James Michael Lackey, P.A.-C.
B. Practice Agreement Status Report
C. Carol Marie Williams, P.A.-C. – Add-on
D. Requiring logs for advanced practice authorization – Add-on

Adjournment
New Licensure Applicants

1. Margaret Jane Alden, P.A.-C.
2. Lauren Marie Bosner, P.A.-C.

Discussion

A. Carol Marie Williams, P.A.-C.
B. Logs for Advanced Procedures
A meeting of the West Virginia Board of Medicine Physician Assistant Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 10th day of September 2016 at 9:00 a.m.

The following Committee members were present:

Kenneth Dean Wright, P.A.-C., Chair
Rusty L. Cain, D.P.M.
Carlos C. Jimenez, M.D.
Mustafa Rahim, M.D.
Ashish P. Sheth, M.D.

The following Staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Sheree J. Thompson

With a quorum present, Mr. Wright called the meeting to order. A motion was made by Dr. Rahim, and seconded by Dr. Cain, to approve the minutes of the July 9, 2016, meeting of the Physician Assistant Committee. The motion carried.

The Physician Assistant Committee reviewed the following compliant applications for physician assistant licensure:

Margaret Jane Alden, P.A.-C.
Ryan Benjamin Aston, P.A.-C.
Linda Rita Boggs, P.A.-C.
Lauren Marie Bosner, P.A.-C.

Dr. Jimenez joined the meeting after the first four applications were reviewed.

Andrea Nicole Campbell, P.A.-C.
Anthony Wayne Casto, P.A.-C.
Allison Virginia Durkin, P.A.-C.
Dr. Rahim moved that the Committee recommend each such applicant for Physician Assistant Licensure by the Board. Dr. Cain seconded the motion, and the motion carried.

The Physician Assistant Committee considered the application of Mara Wright Sutphin, P.A.-C. Mr. Wright declared a conflict with respect to this application, and absented himself from the meeting room for the entirety of the Committee’s discussion of this applicant. Dr. Cain moved that the Committee recommend that Ms. Sutphin be approved for Physician Assistant licensure by the Board. Dr. Sheth seconded the motion, and the motion carried. Thereafter, Mr. Wright returned to the meeting room, and rejoined the meeting.

The Physician Assistant Committee reviewed the licensure application and proposed practice agreement of Kimberly Elaine Connor, P.A.-C. After an in depth discussion, Dr. Jimenez moved that the Committee recommend Ms. Connor be approved for Physician Assistant licensure by the Board through Consent Order which includes the following terms: (1) that any practice agreement submitted must be reviewed by the Physician Assistant Committee prior to authorization; (2) that Ms. Connor practice under direct supervision for a minimum of six months; and (3) that Ms. Connor’s supervising physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when direct supervision should be lifted. Additionally, if Ms. Connor accepts the terms of the Consent Order, and modifies her proposed practice agreement to include a direct supervision component, Board staff can authorize the proposed practice agreement with Jeremy John Edgmon, M.D. Dr. Rahim seconded the motion, and the motion carried.
The Physician Assistant Committee reviewed the application and proposed practice agreement of Carol Marie Williams, P.A.-C. After a thorough discussion, Dr. Jimenez moved that that Ms. Williams appear before the Committee at its November 2016 meeting. Dr. Rahim seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed a proposed practice agreement of James Michael Lackey, P.A.-C., as required by his current Consent Order with the Board. Following a full discussion, Dr. Jimenez moved to approve the proposed practice agreement between Mr. Lackey and Husam M. Nazer, M.D., contingent upon clarification of the proposed practice location(s) and verification that direct supervision will occur. Dr. Rahim seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed a matter of involving potential professional misconduct of a licensee. Dr. Cain made a motion to refer this matter to the Complaint Committee. Dr. Rahim seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the current practice of submitting logs for approval of advanced duties and the possibility of modifying requirements for numbers of procedures performed. The discussion was tabled pending receipt of additional information from the NCCPA, CMS and the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA).

Ms. Thompson provided the Committee with an update indicating that sixty-seven (67) practice agreements were authorized and forty-seven (47) alternate supervising physicians were designated since the July 12, 2016 meeting.

There being no further business, the Physician Assistant Committee was ADJOURNED adjourned by consensus.

Kenneth Dean Wright, P.A.-C.
Chair of the Physician Assistant Committee
PHYSICIAN ASSISTANT COMMITTEE MEETING AGENDA
SATURDAY, NOVEMBER 12, 2016

Call to Order

Approval of Minutes

Approval of September 10, 2016, Physician Assistant Committee Meeting Minutes.

Consent Order Update

Kimberly Elaine Connor, P.A.-C.

Appearance

Carol Marie Williams, P.A.-C.

New Licensure Applicants

1. Lance Bryson, P.A.-C.
2. Kaitlyn Elizabeth Cook, P.A.-C.
3. Ravi Chandra Devabhakthuni, P.A.-C.
4. Gregory Alan Flury, P.A.-C.
5. Rebecca Louise Hafer, P.A.-C.
6. Kirsten Humphrey, P.A.-C.
7. Kathleen Ann Lovin, P.A.-C.
8. Landyn Alizabeth Lucas, P.A.-C.
9. Matthew James Maynard, P.A.-C.
10. Amanda Marie Paugh, P.A.-C.
11. Frances Nicole Pauley, P.A.-C.
12. Kelly Ann Robinson, P.A.-C.
13. Lynne Alice Shaver, P.A.-C.
14. Julieta Sison, P.A.-C.
15. Kelsey R. Workman, P.A.-C.
16. Richard Allen Harrison, P.A.-C. – Add-on
17. Kaleb Paul Rush, P.A.-C. – Add-on
18. Wendi Sue Shillingburg, P.A.-C. – Add-on
19. Jennifer Nicole Taylor, P.A.-C. – Add-on

Discussion

A. Violeta Gonzalez, P.A.-C.
B. Jack Thomas Doty, III, P.A.-C.
C. Supervision at School-Based Health Centers; Practice Agreement review
D. Logs for Advanced Procedures
E. Practice Agreement Status Report

Adjournment
WEST VIRGINIA BOARD OF MEDICINE

Physician Assistant Committee Meeting Minutes

November 12, 2016

A meeting of the West Virginia Board of Medicine Physician Assistant Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 12th day of November 2016 at 9:00 a.m.

The following Committee members were present:

Kenneth Dean Wright, P.A.-C., Chair
Rusty L. Cain, D.P.M.
Carlos C. Jimenez, M.D.
Mustafa Rahim, M.D.

The following Committee member was absent:

Ashish P. Sheth, M.D.

The following Board member was present:

Harry E. Duncan, Jr., M.D.

The following Staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Sheree J. Thompson

With a quorum present, Mr. Wright called the meeting to order. Mr. Wright welcomed new Board member Harry E. Duncan, Jr., M.D. Dr. Duncan was invited to observe the meeting. A motion was made by Dr. Rahim, and seconded by Dr. Cain, to approve the minutes of the September 10, 2016, meeting of the Physician Assistant Committee. The motion carried.

Mr. Knittle informed the Committee of recent staff changes. Appreciation was expressed for Amy Callihan Young, who had faithfully served the Board and Physician Assistant Committee the past three years as the Physician Assistant Coordinator. Ms. Young was in asset in her tenure, especially with the transition to the newly legislated
Physician Assistant Practice Act and updated Rule 11 CSR1B. She is wished well in her future endeavors. The Physician Assistant Committee welcomed Ryan P. Moore as the new Physician Assistant Licensure Analyst. Mr. Moore will continue the processing of physician assistant licensure applications, practice agreements and licensure renewal. The Supervisor of Licensure, Sheree J. Thompson, will now staff the Physician Assistant Committee meetings.

At the Board meeting on September 12, 2016, the Physician Assistant Committee recommended, and the Board approved, that Kimberly Elaine Connor, P.A.-C. be approved for licensure contingent upon her acceptance of a Consent Order with the following terms: (1) that any proposed practice agreement submitted by Ms. Connor must be reviewed by the Physician Assistant Committee; (2) that Ms. Connor practice under direct supervision for a minimum of six months; and (3) that Ms. Connor’s supervising physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when the direct supervision requirement should be lifted. Ms. Connor agreed to these terms, and entered into a Consent Order with the Board on September 27, 2016.

Carol Marie Williams, P.A.-C. appeared before the Physician Assistant Committee in support of her application for Physician Assistant Licensure. After an in depth discussion with Ms. Williams, Dr. Jimenez moved that the Committee recommend that the Board approve Ms. Williams for Physician Assistant licensure and authorize her practice agreement with core duties only. If Ms. Williams continues to seek advanced duties she will submit the appropriate logs (with a signed verification) of procedures completed on bona fide patients under personal supervision of the supervising physician to the Physician Assistant Committee for review prior to authorization. In addition, she must submit a signed and notarized statement that she has read the Physician Assistant Practice act and Rule 11 CSR1B. Dr. Rahim seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the following compliant applications for physician assistant licensure:
Lance Bryson, P.A.-C.
Kaitlyn Elizabeth Cook, P.A.-C.
Ravi Chandra Devabhakthuni, P.A.-C.
Gregory Alan Flury, P.A.-C.
Rebecca Louise Hafer, P.A.-C.
Richard Allen Harrison, P.A.-C.
Kirsten Humphrey, P.A.-C.
Kathleen Ann Lovin, P.A.-C.
Landyn Alizabeth Lucas, P.A.-C.
Matthew James Maynard, P.A.-C.
Amanda Marie Paugh, P.A.-C.
Frances Nicole Pauley, P.A.-C.
Kelly Ann Robinson, P.A.-C.
Kaleb Paul Rush, P.A.-C.
Lynne Alice Shaver, P.A.-C.
Julieta Sison, P.A.-C.
Wendi Sue Shillingburg, P.A.-C.
Jennifer Nicole Taylor, P.A.-C.
Kelsey R. Workman, P.A.-C.

Dr. Cain moved that the Committee recommend each such applicant for Physician Assistant Licensure by the Board. Dr. Rahim seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the quarterly status reports submitted pursuant to the Consent Order of Jack Thomas Doty, III, P.A.-C., which Mr. Doty entered with the Board on April 27, 2016. Mr. Doty was restricted to direct supervision for a minimum period of six months. His supervising physician has recommended that the restriction be lifted. The Physician Assistant Committee was in agreement that Mr. Doty be released from his Consent Order.

The Physician Assistant Committee reviewed the current process of Board staff for verifying supervision at school-based health centers, which consists of requiring practice settings of physician assistants that are supervised to be reported to the Board as a work location for the supervising physician, and took no action to modify or change the process.
The Physician Assistant Committee reviewed the current practice of submitting logs for approval of advanced duties. Dr. Rahim moved that the Board contact the physician assistant programs at the colleges that the majority of the current physician assistant licensees attended regarding logs being made available for advanced duties for its program’s graduates during their education. A letter will be drafted for the Committee Chair’s review prior to release to the programs. Dr. Cain seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed a matter of involving potential professional misconduct of a licensee. Dr. Cain made a motion to refer this matter to the Complaint Committee. Dr. Rahim seconded the motion, and the motion carried.

Ms. Thompson provided the Committee with an update indicating that fifty-five (55) practice agreements were authorized and forty-one (41) alternate supervising physicians were designated since the September 10, 2016 meeting.

Mr. Knittle acknowledged that Dr. Jimenez has completed his second appointed term for the Board which makes this his last meeting as well. On behalf of the Committee, Chairman Wright thanked Dr. Jimenez for his years of service to the Board and especially the Physician Assistant Committee. Mr. Wright also acknowledged Mr. Knittle for his eleven years of dedicated service to the Board that will be coming to a close with his retirement at the end of 2016. Ms. Alley and Ms. Thompson shared their appreciation for Mr. Knittle’s leadership on behalf of the Board staff, by whom he will be greatly missed. Both are wished well in their future endeavors.

There being no further business, the Physician Assistant Committee was ADJOURNMENT adjourned by consensus.

Kenneth Dean Wright, P.A.-C.
Chair of the Physician Assistant Committee
Call to Order

Introduction of New Board Members

Approval of Minutes

Approval of November 12, 2016, Physician Assistant Committee Meeting Minutes.

New Licensure Applicants

1. Isaac H. Edmonds, P.A.-C.
2. Aaron Scott Holly, P.A.-C.
3. Nicholas William Sliitt, P.A.-C.
4. Anne Claire Mix, P.A.-C. – Add-on

Discussion

A. Jacqueline Renae Shipman-Cespedes, PA-C
B. 11-1B-9.5 Opinion
C. Logs for Advanced Procedures Update
D. 2017 PA Renewal
E. Practice Agreement Status Report

Adjournment
WEST VIRGINIA BOARD OF MEDICINE

Physician Assistant Committee Meeting Minutes

January 7, 2017

A meeting of the West Virginia Board of Medicine Physician Assistant Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 7th day of January 2017 at 9:00 a.m.

The following Committee members were present:

Kenneth Dean Wright, P.A.-C., Chair
Rusty L. Cain, D.P.M.
Ashish P. Sheth, M.D.

The following Committee member was absent:

Mustafa Rahim, M.D.

The following Board members were present as guests:

Harry E. Duncan, Jr., M.D.
Carrie Lakin, D.P.M.
David A. Mullins, M.D.
Wes Steele, M.D.

The following Staff members were present:

Jamie S. Alley, Esq.
Sheree J. Thompson

The following guest was present:

Mark A. Spangler, M.A.

With a quorum present, Mr. Wright called the meeting to order. Mr. Wright welcomed newly appointed Board members, Drs. Lakin, Mullins and Steele, who were invited to observe the meeting. A motion was made by Dr. Cain, and seconded by Dr. Sheth, to approve the minutes of the November 12, 2016, meeting of the Physician Assistant Committee. The motion carried.
The Physician Assistant Committee reviewed the following compliant applications for physician assistant licensure:

Isaac H. Edmonds, P.A.-C.
Aaron Scott Holly, P.A.-C.
Nicholas William Splitt, P.A.-C.
Anne Claire Mix, P.A.-C.

Dr. Cain moved that the Committee recommend each such applicant for Physician Assistant licensure by the Board. Dr. Sheth seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the quarterly status reports submitted pursuant to the Consent Order of Jacqueline Renae Shipman-Cespedes, P.A.-C., which Ms. Shipman-Cespedes entered with the Board on June 3, 2016. As a condition of licensure, Ms. Shipman-Cespedes was restricted to direct supervision for a minimum period of six months. Her supervising physician has recommended that the restriction be lifted. Dr. Cain moved that the Physician Assistant Committee recommend to the Board that Ms. Shipman-Cespedes be released from her Consent Order through Board Order. Dr. Sheth seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed a letter from St. Mary’s Medical Center seeking a written opinion regarding co-signing requirements as described in the letter submitted. The Committee determined that Board staff will draft a letter of explanation to St. Mary’s on behalf of the Physician Assistant Committee for its approval by the Committee Chair prior to response.

At its November 2016 meeting the Physician Assistant Committee directed staff to prepare and send letters to Physician Assistant Programs from whom most of the currently licensed physician assistants are graduates, recommending that physician assistant students keep logs of advanced procedures completed during clinical training as these logs may assist licensees when requesting advanced duties upon beginning practice. The Committee was
provided copies of the letters. The Committee asked staff to explore whether it would be useful to publish this suggestion through national associations and/or a newsletter article.

Board staff updated the Committee on the progress for preparing the Physician Assistant licensure renewal for the 2017 renewal cycle. There are currently 950 licensed physician assistants. Modifications to the renewal application resource are still in progress. The application itself has been updated for this renewal cycle. Renewal is scheduled for February 8 through March 31, 2017. Renewal information was provided to licensees in the December 2016 Board newsletter, and is available on the Board’s website.

Ms. Thompson provided the Committee with an update indicating that fifty-five (55) practice agreements were authorized and fourteen (14) alternate supervising physicians were designated since the November 12, 2016 meeting.

Chairman Wright welcomed guest Mark Spangler, who will begin his position as Executive Director for the Board on January 23, 2017. Mr. Wright shared with the Committee that the WV Association of Physician Assistants plans to make recommendations for modification to the Physician Assistant Practice Act at the upcoming 2017 Legislative Session. The recommendations include global signature authority, language change from supervisor to collaborative to more accurately describe the physician to physician assistant relationship, and no longer requiring maintenance of NCCPA certification as a requirement for licensure.

There being no further business, the Physician Assistant Committee was ADJOURNMENT adjourned by consensus.

Kenneth Dean Wright, P.A.-C.
Chair of the Physician Assistant Committee
PHYSICIAN ASSISTANT COMMITTEE MEETING AGENDA
SATURDAY, MARCH 11, 2017

Call to Order

Introduction of New Committee Members

Approval of Minutes

Approval of January 7, 2017, Physician Assistant Committee Meeting Minutes.

Consent Order Update

Jack Thomas Doty, III, P.A.-C.

Jacqueline Renae Shipman-Cespedes, P.A.-C.

New Licensure Applicants

1. Candice Marie Cameron, P.A.-C.
2. Zachary Kent Douglas, P.A.-C.
3. Jessica Faye Dunkley, P.A.-C.
5. Megan Leigh Lingenfelter, P.A.-C.
6. Michael Darrell McMillion, P.A.-C.
7. Stephen Lee McQueen, P.A.-C.
8. Suzanne Leslie Mundy, P.A.-C.
10. Lisa Dawn Paitsel, P.A.-C.
11. Kylie Perkins Risendal, P.A.-C.
12. Kristopher Leroy Smith, P.A.-C.
13. Elaine Marie Smith, P.A.-C.
14. Tina Louise Spence, P.A.-C.
15. Laua Elizabeth Bonner, P.A.-C. – Add-on
16. Jacob Martin Short, P.A.-C. – Add-on

Reinstatement

Patrick Alan Hager, P.A.-C. - Add-on

Discussion

A. James Michael Lackey, P.A.-C.
B. Melissa Marie Glauser, P.A.-C.
C. Andrea Mary Jones, P.A-C.
D. Verification of Education Form
E. Physician Assistant Legislative Update
F. 2017 PA Renewal
G. Practice Agreement Status Report
H. Inquiry of Physician Assistants practicing telemedicine

Adjournment
WEST VIRGINIA BOARD OF MEDICINE

Physician Assistant Committee Meeting Minutes

March 11, 2017

A meeting of the West Virginia Board of Medicine Physician Assistant Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 11th day of March, 2017 at 9:00 a.m.

The following Committee members were present:

Kenneth Dean Wright, P.A.-C., Chair
Harry E. Duncan, Jr., M.D.
Carrie Lakin, D.P.M.
Ashish P. Sheth, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Sheree J. Thompson

With a quorum present, Mr. Wright called the meeting to order. Mr. Wright welcomed newly appointed Committee members, Drs. Duncan and Lakin, and Mr. Spangler who has assumed his position as Executive Director for the Board on January 23, 2017. A motion was made by Dr. Duncan, and seconded by Dr. Sheth, to approve the minutes of the January 7, 2017, meeting of the Physician Assistant Committee. The motion carried.

Jack Thomas Doty, III, P.A.-C. entered into a Consent Order with the Board on April 27, 2016, which restricted his practice as a physician assistant to direct supervision for a minimum period of six months. At its November 2016 meeting, the Physician Assistant Committee reviewed the two required quarterly reports and the recommendation to lift the restriction of direct supervision submitted by Mr. Doty’s supervising physician. In concurrence with the supervising physician’s report, the Committee recommended Mr. Doty be released from his Consent Order. Board staff updated the Physician Assistant Committee that Mr. Doty had been notified via certified letter on November 14, 2016, that the Board terminated his Consent Order effective immediately.
Jacqueline Renae Shipman-Cespedes, P.A.-C. entered into a Consent Order with the Board on June 3, 2016, which restricted her practice as a physician assistant to direct supervision for a minimum period of six months. At its January 2017 meeting, the Physician Assistant Committee reviewed the two required quarterly reports and the recommendation to lift the restriction of direct supervision submitted by Ms. Shipman-Cespedes’ supervising physician. In concurrence with the supervising physician’s report, the Committee recommended Ms. Shipman-Cespedes be released from her Consent Order. Board staff updated the Physician Assistant Committee that an Order terminating Ms. Shipman-Cespedes’ Consent Order was entered on January 12, 2017.

The Physician Assistant Committee reviewed the following compliant applications for physician assistant licensure:

Candice Marie Cameron, P.A.-C.
Zachary Kent Douglas, P.A.-C.
Jodi R. Gottardi, P.A.-C.
Megan Leigh Lingenfelter, P.A.-C.
Michael Darrell McMillion, P.A.-C.
Stephen Lee McQueen, P.A.-C.
Suzanne Leslie Mundy, P.A.-C.
Kevin Michael Oberg, P.A.-C.
Lisa Dawn Paitsel, P.A.-C.
Kylie Perkins Risendal, P.A.-C.
Kristopher Leroy Smith, P.A.-C.
Elaine Marie Smith, P.A.-C.
Tina Louise Spence, P.A.-C.
Laura Elizabeth Bonner, P.A.-C.

Dr. Duncan moved that the Committee recommend each such applicant for Physician Assistant licensure by the Board. Dr. Sheth seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the licensure application of Kimberly Jessica Faye Dunkley, P.A.-C. After an in depth discussion, Dr. Lakin moved that the Committee recommend Ms. Dunkley be approved for Physician Assistant licensure by the Board through Consent Order which includes the following terms: (1) that any practice agreement submitted including advanced duties must be reviewed by the Physician
Assistant Committee prior to authorization; (2) that Ms. Dunkley practice under direct supervision for a minimum of six months; and (3) that Ms. Dunkley’s supervising physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when direct supervision should be lifted. Dr. Sheth seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the application for reactivation of licensure of Jacob Martin Short, P.A.-C. After a thorough discussion, Dr. Lakin moved that Mr. Short appear before the Committee at its May 2017 meeting. Dr. Duncan seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the reinstatement of licensure application of Patrick Alan Hager, P.A.-C. After a thorough discussion, Dr. Sheth moved that the Committee recommend that the Board approve Mr. Hager for reinstatement of physician assistant licensure. Dr. Duncan seconded the motion, and the motion carried.

James Michael Lackey, P.A.-C. entered into a Consent Order with the Board on January 4, 2016, which restricts his practice as a physician assistant to direct supervision for a minimum period of seven hundred and twenty documented work hours and requires quarterly reports from his supervising physician for a minimum of a two-year probationary period. Mr. Lackey’s supervisor submitted the required quarterly report, documentation of the seven hundred and twenty work hours completed, a recommendation to lift the direct supervision requirement, and a proposed practice agreement which would include the delegation of prescribing privileges. After review of the documentation and discussion, Dr. Lakin moved that the Committee recommend to the Board that Mr. Lackey be notified via letter that the restriction for direct supervision has been lifted. Additionally, Dr. Lakin moved to recommend that the proposed practice agreement be approved pending receipt of modifications required by the Physician Assistant Committee. Dr. Sheth seconded the motion, and the motion carried.
The Physician Assistant Committee reviewed two separate matters involving potential professional misconduct allegations regarding two licensees. After a thorough discussion of both matters, the Committee determined to take no action.

The Physician Assistant Committee reviewed the inquiries that have been made to Board staff and to the Committee Chair concerning the signatory requirement on the Verification of Education form. Board staff provided the Committee with applications for licensure with Verification of Education forms signed by varying school officials. After a thorough discussion and review of the current Board staff practice, which entails use of the current verification form and acceptance of signatory verification with accompanying official seal from the applicant’s awarding school, the Committee did not recommend any change to current practice, and took no action upon this matter.

The Physician Assistant Committee reviewed the inquiry of a licensee regarding whether she had the ability to practice telemedicine as a licensed physician assistant, and if so, would it require a change in her current authorized practice agreement. After a thorough discussion, Dr. Lakin moved that the practice of telemedicine by a physician assistant, at a minimum, would need to be delineated in the proposed practice agreement and be limited to the supervising physician’s scope of practice. Dr. Lakin further moved that all practice agreements proposing the practice of telemedicine shall be considered by the Physician Assistant Committee prior to authorization. Dr. Duncan seconded the motion, and the motion carried.

Board staff updated the Committee on the progress of the Physician Assistant licensure renewal for the 2017 renewal period, which began for the 947 currently licensed physician assistants on February 8, 2017. As of March 10, 2017, 455 applications have been processed and 50 additional applications have been submitted. The new requirement of uploading evidence of registration with the Controlled Substance Monitoring Program has had an impact on delaying the processing as about one-fourth of the renewal applicants have not sent the document correctly on the first attempt. Renewal continues through March 31, 2017.
Board staff provided an update and the Physician Assistant Committee discussed proposed legislation of three bills pending during the 2017 legislative session which seek to modify the Physician Assistants Practice Act. Some of the changes proposed in the bills include global signature authority for physician assistants, prescription parity for physician assistants and advanced practice nurse practitioners, language change from supervisor to collaborative to more accurately describe the physician to physician assistant relationship, no longer requiring maintenance of NCCPA certification as a requirement for licensure renewal, and adding an additional physician assistant to the Board.

Ms. Thompson provided the Committee with an update indicating that eighty (80) practice agreements were authorized since the January 2017 meeting.

There being no further business, the Physician Assistant Committee was ADJOURNMENT adjourned by consensus.

Kenneth Dean Wright, P.A.-C.
Chair of the Physician Assistant Committee
PHYSICIAN ASSISTANT COMMITTEE MEETING AGENDA
SATURDAY, MAY 6, 2017

Call to Order

Approval of Minutes

Approval of March 11, 2017, Physician Assistant Committee Meeting Minutes.

Consent Order Update

Jessica Faye Dunkley, P.A.-C.

Appearance

Jacob Martin Short, P.A.-C.

New Licensure Applicants

1. Erin Kristin Bateman, P.A.-C.
2. Christopher Patrick Kelly, P.A.-C.
3. Brandon L. Miller, P.A.-C.
4. Abigail Hubble Salser, P.A.-C.
5. Megan Marissa Sanko, P.A.-C.
6. Danielle Caitlin Soya, P.A.-C.

Reinstatements

Christopher Engley Carter, P.A.-C.
Maureen E. Lacaria, P.A.-C.

Discussion

A. Kimberly O'Connor, P.A.-C.
B. Hillary Linn Hewitt, P.A.-C.
C. Anita Francis Petite, P.A.-C.
D. 2017 Physician Assistant Renewal Report
E. Physician Assistant Legislative Update
F. Practice Agreement Status Report

Adjournment
8. Ashley Lynn DeLashmutt, P.A.-C.
10. Noreen Louise Nortier, P.A.-C.
11. Norman Lee Walker, P.A.-C.
WEST VIRGINIA BOARD OF MEDICINE

Physician Assistant Committee Meeting Minutes
May 6, 2017

A meeting of the West Virginia Board of Medicine Physician Assistant Committee was held at 101 Dec Drive, Charleston, West Virginia, on the 6th day of May, 2017 at 9:00 a.m.

The following Committee members were present:

Kenneth Dean Wright, P.A.-C., Chair
Harry E. Duncan, Jr., M.D.
Carrie Lakin, D.P.M.
Ashish P. Sheth, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Sheree J. Thompson

With a quorum present, Mr. Wright called the meeting to order. A motion was made by Dr. Duncan, and seconded by Dr. Lakin, to approve the minutes of the March 11, 2017, meeting of the Physician Assistant Committee. The motion carried.

At its March 2017 meeting, the Physician Assistant Committee recommended, and the Board approved, that Jessica Faye Dunkley, P.A.-C. be approved for licensure contingent upon her acceptance of a Consent Order with the following terms: (1) that any practice agreement submitted including advanced duties must be reviewed by the Physician Assistant Committee prior to authorization; (2) that Ms. Dunkley practice under direct supervision for a minimum of six months; and (3) that Ms. Dunkley’s supervising physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when direct supervision should be lifted. Ms. Dunkley agreed to these terms, and entered into a Consent Order with the Board on April 4, 2017.
Jacob Martin Short, P.A.-C. appeared before the Physician Assistant Committee in support of his application for reactivation of his Physician Assistant Licensure. After an in depth discussion with Mr. Short, Dr. Duncan moved that the Committee recommend that the Board approve Mr. Short for Physician Assistant licensure and acknowledge that any practice agreement submitted which includes a request for advanced duties would require review by the Physician Assistant Committee prior to authorization. Dr. Lakin seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the following compliant applications for physician assistant licensure:

- Erin Kristin Bateman, P.A.-C.
- Jonathan Mitchell Guy, P.A.-C.
- Christopher Patrick Kelly, P.A.-C.
- Brandon L. Miller, P.A.-C.
- Abigail Hubble Salser, P.A.-C.
- Megan Marissa Sanko, P.A.-C.
- Danielle Caitlin Soya, P.A.-C.

Dr. Duncan moved that the Committee recommend each such applicant for Physician Assistant licensure by the Board. Dr. Sheth seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the reinstatement of licensure application of Christopher Engley Carter, P.A.-C. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board approve Mr. Carter for reinstatement of physician assistant licensure. Dr. Sheth seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the reinstatement of licensure application of Maureen Maseda Lacaria, P.A.-C. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board approve Ms. Lacaria for reinstatement of physician assistant licensure pending receipt of evidence of her legal name for licensure. Dr. Sheth seconded the motion, and the motion carried.
The Physician Assistant Committee reviewed the quarterly status reports submitted pursuant to the September 27, 2016 Consent Order of Kimberly Elaine Connor, P.A.-C. Ms. Connor was restricted to direct supervision for a minimum period of six months. Her supervising physician has recommended that the restriction be lifted. Dr. Lakin moved that the Physician Assistant Committee recommend to the Board issue an Order releasing Ms. Connor from her Consent Order. Dr. Sheth seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed separate matters involving potential professional misconduct allegations regarding two licensees. After a thorough discussion of both matters, the Committee determined to take no action on the first matter, and to refer the second matter to the Complaint Committee.

Board staff updated the Committee on the results of the Physician Assistant licensure renewal for the 2017 renewal period, which ended for the 956 previously active licensed physician assistants on Friday, March 31, 2017. A total of 835 physician assistants successfully completed the renewal process, and two physician assistants who did not submit complete applications by the deadline are applying for reinstatement. Four of the five licensed Type B physician assistants also renewed their licenses. Staff reported that as of the time and date of the Committee meeting, there are 840 actively licensed physician assistants with the WV Board of Medicine.

During the 2017 legislative session, the West Virginia Legislature considered and passed SB347. The bill was subject to gubernatorial veto on April 12, 2017, and was therefore not enacted. It is possible that the bill will be added to the upcoming special session and be enacted, at least in part. Some of the changes proposed in the bills include global signature authority for physician assistants, prescription parity for physician assistants and advanced practice nurse practitioners, language change from supervising physician to collaborating physician to highlight collaborative practice, elimination, in whole or in part of the NCCPA certification requirement for licensure/licensure renewal, and adding an additional physician assistant to the Board.
Ms. Thompson provided the Committee with an update indicating that seventy-seven (77) practice agreements were authorized since the March 2017 meeting. Additionally, 17 alternate supervisors were designated.

There being no further business, the Physician Assistant Committee was ADJOURNMENT adjourned by consensus.

Kenneth Dean Wright, P.A.-C.
Chair of the Physician Assistant Committee
Licensure Committee
Meeting Agendas and Minutes
LICENSURE COMMITTEE AGENDA

July 11, 2016

CALL TO ORDER

LICENSURE COMMITTEE REVIEW AND ACTION

Minutes of May 14, 2016 meeting

APPEARANCES

1. Southcott, William Peter Matthew 10:45 a.m
2. Morring, Jr., Don Michael 11:00 a.m.
3. Singh, Paramjit 11:15 a.m.

LUNCH BREAK

DISCUSSIONS

4. Cottrell, Amy Galigher
5. Radwan, Walid Mohamed
6. Baxt, Brian David
7. Geigel, Carlos Oscar
8. Murphy, James Anthony
9. Sutton, Jr., Frank Morrison
10. Suliman, Abdelwahab Alamin
11. Shultz, Scott Lynn
12. Larzo, Melissa Rife
13. Darr, Abid Bashir
14. Kazmi, Syed S.
15. Zaman, Hina
16. Shafer, Diane Elaine
17. Cash, Sarah Brooke – Add-on
18. Lo Dico, Mark Roncalli – Add-on
19. 11 CSR 1A
20. Naderi, Sassan – Add-on

LICENSURE COMMITTEE ACTIONS AND RECOMMENDATIONS

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Licensure Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 14th day of May, 2016, at 10:30 a.m.

The following Committee members were present:

Rusty L. Cain, D.P.M., Chair
Rev. O. Richard Bowyer
Beth Hays, M.A.
Carlos C. Jimenez, M.D.
Mustafa Rahim, M.D.
Ashish P. Sheth, M.D.

The following Committee member was absent:

Michael L. Ferrebee, M.D.

The following Staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Sheree J. Thompson

Dr. Cain called the meeting to order. A motion was made by Dr. Rahim, and seconded by Rev. Bowyer, to approve the minutes of the May 14, 2016, meeting. The motion carried.

William Peter Matthew Southcott, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Southcott, Dr. Rahim moved that the Licensure Committee recommend that the Board approve Dr. Southcott for licensure pending payment of the PICF assessment fee. Rev. Bowyer seconded the motion, and the motion carried.
At its May 2016 meeting, the Licensure Committee reviewed and discussed the application for activation of a permanent medical license of Paramjit Singh, M.D., which was previously revoked by the Board on July 18, 2003. Dr. Singh was requested to appear before the Licensure Committee at its July 2016 meeting. Dr. Singh appeared before the Licensure Committee in support of his application. While Dr. Singh was previously represented by counsel, he was unrepresented at the time of his appearance. Dr. Singh declined the opportunity to reschedule his appearance, and confirmed that he wished to proceed with the meeting without legal representation. After a thorough discussion with Dr. Singh and after his appearance concluded, Rev. Bowyer made a motion that the public session be recessed in order to enter into executive session pursuant to W. Va. Code § 6-0A-4(b)(4) to discuss an application for licensure and to receive legal advice related to the instant application. Ms. Hays seconded, and the motion carried. Thereafter, the Committee re-entered public session. Rev. Bowyer moved that the Licensure Committee recommend that the Board determine that Dr. Singh has failed to meet his burden of satisfying the Board that he is qualified for licensure and deny his application for reactivation of licensure based upon its consideration of his application as a whole, including but not limited to the following facts and information: 1) in January 2004, after his license was revoked, he plead guilty to 93 felony counts in the Court of Common Pleas of Jefferson County, Ohio; 2) as set forth in the January 2004 Change of Plea and Judgment Entry of Sentence Dr. Singh a) knowingly obtained, possessed or used a schedule II controlled substance and b) did knowingly sell or offer to sell a schedule II controlled substance and knowingly made false prescriptions and knowingly destroyed, concealed or removed medical and prescription records of his patients; 3) in January 2004 he executed a Voluntary Surrender of his Ohio medical license which authorized permanent revocation of his Ohio license, and the State Medical Board of Ohio permanently revoked Dr. Singh’s license as a result of his plea of guilty to ninety-three felony counts; and 4) during his appearance before the Licensure Committee he verified he has not engaged in the practice of medicine in any jurisdiction for a period of greater than 12 years. Rev. Bowyer further moved that the Committee recommend that the Board find Dr. Singh unqualified for licensure as a result of his violation of the following professional conduct standards set forth in the West Virginia Medical Practice Act and the Board’s legislative rules:

1) W. Va. Code §30-3-14(c)(2) and/or W. Va. Code R. §11-1A-12.1.k;
2) W. Va. Code §30-3-14(c)(17) and W. Va. Code R. §11-1A-12.1.g;
3) W. Va. Code §30-3-14(c)(13);
4) W. Va. Code §30-3-14(c)(17) and W. Va. Code R. §11-1A-12.1.e;
5) W. Va. Code §30-3-14(c) (17) and W. Va. Code R. §11-1A-12.1.j;
6) W. Va. Code §30-3-14(c) (17) and W. Va. Code R. §11-1A-12.2.d; and/or

Dr. Rahim seconded the motion, and the motion carried.

Don Michael Morring, Jr., M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Morring, Dr. Rahim moved that the Licensure Committee recommend that the Board approve Dr. Morring for licensure pending payment of the PICF assessment fee. Ms. Hays seconded the motion, and the motion carried.

At its March 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Amy Galigher Cottrell, M.D. After a thorough discussion, the Licensure Committee recommended to the Board that Dr. Cottrell’s application be approved for licensure through a Consent Order limiting her practice to telemedicine. Dr. Cottrell confirmed receipt of the proposed Consent Order and requested additional time to consider. The Licensure Committee deferred action to its July 2016 meeting. Dr. Cottrell submitted a request to withdraw her application. Rev. Bowyer moved that the Licensure Committee recommend that the Board accept her withdrawal request. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the status report of Walid Radwan, M.D., received pursuant to the Consent Order Dr. Radwan entered with the Board on October 8, 2015. No further action was taken.

At its May 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Brian David Baxt, M.D. Dr. Baxt was requested to appear before the Licensure Committee at its July 2016 meeting. Dr. Baxt requested to delay his appearance. Ms. Hays moved that Dr. Baxt appear before the Committee at its September 2016 meeting. Rev. Bowyer seconded, and the motion carried.
The Licensure Committee reviewed and discussed the application for a permanent medical license of Carlos Oscar Geigel, M.D. After a thorough discussion, Dr. Jimenez moved that Dr. Geigel appear before the Licensure Committee at its September 2016 meeting. Dr. Rahim seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of James Anthony Murphy, M.D. Dr. Murphy has completed training in his specialty of oral and maxillofacial surgery, however, as an international medical school graduate he has not met the postgraduate training requirements to be eligible for licensure. Dr. Rahim moved that Dr. Murphy be given the opportunity to withdraw his licensure application. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Frank Morrison Sutton, Jr., M.D. After a thorough discussion, Ms. Hays moved that Dr. Sutton appear before the Licensure Committee at its September 2016 meeting. Rev. Bowyer seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Abdelwahab Alamin Suliman, M.D. After a thorough discussion, Rev. Bowyer moved to recommend to the Board to accept the total hours of CME submitted by Dr. Suliman, and approve Dr. Suliman for licensure. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Scott Lynn Schultz, M.D. After a thorough discussion, Dr. Rahim moved to recommend to the Board to accept the total hours of CME submitted by Dr. Schultz, and approve Dr. Schultz for licensure. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Melissa Rife Larzo, M.D. After a thorough discussion, Rev.
Bowyer moved to recommend to the Board to approve Dr. Larzo for reactivation of licensure in the inactive status. Dr. Rahim seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Abid Bashir Darr, M.D. Dr. Darr has not met the examination requirement to be eligible for licensure as he has not passed a medical licensing examination. Ms. Hays moved that Dr. Darr be given the opportunity to withdraw his licensure application. Dr. Sheth seconded the motion, and the motion carried.

At its May 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Syed Samiullah Kazmi, M.D. After a thorough discussion, it was the determination of the Licensure Committee that Dr. Kazmi is ineligible for licensure due to the revocation of his Illinois medical license. Dr. Kazmi was given the opportunity to withdraw his application in lieu of a denial of licensure. Dr. Kazmi submitted a request to withdraw his licensure application. Dr. Rahim moved that the Licensure Committee recommend that the Board accept his withdrawal request. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Hina Zaman, M.D. After a thorough discussion, Rev. Bowyer moved that the Licensure Committee recommend to the Board that Dr. Zaman’s application be approved for licensure pending receipt of satisfactory evidence of completion of her third year of postgraduate training and payment of the PICF fee. Dr. Rahim seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Sarah Brooke Cash, M.D. After a thorough discussion, Rev. Bowyer moved that Dr. Cash appear before the Licensure Committee at its September 2016 meeting. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Mark Roncalli Lo Dico, M.D. After a thorough discussion, Ms. Hays moved
moved that Dr. Lo Dico appear before the Licensure Committee at its September 2016 meeting. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Sassan Naderi, M.D. After a thorough discussion, the Licensure Committee determined to place Dr. Naderi’s application on hold pending receipt of additional information.

The Licensure Committee reviewed proposed amendments to Legislative Rule 11CSR1A. No action was taken by the Committee.

The Licensure Committee reviewed and discussed the list of compliant applications, which includes one hundred fifty-nine (159) initial medical doctor applications and nine compliant reactivation of medical doctor applications. Rev. Bowyer moved that the Licensure Committee recommend that the Board approve the applicants for licensure and reactivation of license. Ms. Hays seconded the motion, and the motion carried. In addition, two initial medical doctor applicants are pending payment of the PCIF assessment fee and another is pending receipt of satisfactory evidence of completion of her third postgraduate training year. Ms. Hays moved that the Licensure Committee recommend to the Board to approve these three applicants for licensure pending receipt of the outstanding payments and/or documentation. Rev. Bowyer seconded the motion, and the motion carried.

The Licensure Committee determined by consensus to adjourn, there being no adjournment further business.

Rusty L. Cain, D.P.M.
Chair of the Licensure Committee
Acosta, Indrani Enid
Agor, Longinus Olewuike
Ahn, Janice Seulgy
AlAwad, Feras Abdullah
Al-Faham, Zaid K M
Ali, Suleiman
Alkhaimy, Haytham
Alkhouli, Mohamad Adnan
Alvi, Mansour Isalou
Alwan, Dareen
Arguelles, Eric
Arthurs, Erica Lynn
Barth, Rebeka
Beltagy, Abdelrahman Fouad
Bender, Jennifer Ann
Bender-Heine, Adam
Bharara, Niteesh
Bhatty, Shaun Muhammad Zaki
Bhushan, Bharath Panchalamarri
Bonda, Sri Lakshmi Kala
Brozanski, Beverly Sobchak

Cantillo, Joaquin J.
Celestine, Charlsie Khalisha
Cervantes, Jose Luis
Chan, Jonathan James Wanglun
Chandrasekhar, Kaarthik Srinivasan
Choe, Jessica Shin
Chopra, Anish
Clark, Jr., Larry Edward
Collins, Kristina Michelle
Cox, Kelly LaVar
Craig, Kristen Marie
Crockett, Tierra Nicole
Cumberledge, Jeremy David

Davidson, Duncan Ben
Davis, Devon Lynn
de Elia, Carolina Belen
Deol, Kamal Kaur
Dexter, Stephen Eugene
Dihowm, Fatma Mehemed
DiLeo, Steven Joseph
Di Poce, James Edward
Dix, Ebony Monifa
Dragon, Shane Richard
Duru, Uzoma Bruno

Edson, Steven Bryan
Ellison, Sarah Elizabeth
Ewing, Christopher Anthony - veridoc

Fairchild, Su
Field, James Conrad
Fisher, Taylor Lane
Fojas, Augusto Paras
Foreman, Theresa Marguerite
Frazier, Sarah Jane

Gangireddy, Venu Gopala Reddy
Garlapati, Srikanth
Glance, Ryan Robert
Gratton, James Arthur
Grow, Joel LeRoy
Gutierrez, Jennifer Sur

Haddad, Faris Jadan
Haile, Robel
Hajiran, Ali John
Hand, Suzanne M.
Harper, Matthew B.
Harrington-Foster, Nathan Timothy John
Hassan, Muhammad
Hatfield, Mandy Nichole
Heiraty, Payam
Higgins, Luke James
Hodapp, Matthew Charles
Hodroge, SammySamir
Humerick, Madison
Hurley, Jr., Alfred Chamberlain

Indukuri, Chaitanya
Isakov, Daniela Giulia
Jacques, Lina
Johnson, Jessica Elizabeth
Jolis, Timothy Winston
Juersivich, Adam Paul
Juskowich, Joy Jeannine

Kaiser, Loren Renee
Katner, Theodore Lawrence
Katsevman, Gennady Aleksandrovich
Kelly, David C.
Kendler, Seth Harold
Kersteter, Matthew Michael
Ketema, Tsion Alisa
Khalsa, Maninder
Kidd, Kacie Marie
King, Joseph Mark
King, Miranda Lynn
Kingsbury, II, James Michael
Krafft, Matthew Richard
Kravtsov, Vladimir Dmitrievich

Lanoix, Richard
Lee, John Ming-Yi
Lenaghan, Patrick Neal
Lenz, Jackson Scott
Leung, Alexander
Limbu, Susang Nina
LoPinto, Melissa
Lyle, Cara Ann
Lynch, Joseph Dominic
Macian, Diana Maria
Mannan, Sunjay Kumar
Marino, Jr., Philip Anthony
Mathews, Molly Robinson
Mauriello, Paul Michael
Mott, Elizabeth Kelly
Mrad, Luay
Murphy, Charles William
July 11, 2016
Page Three

APPLICANTS FOR PERMANENT LICENSURE – Physicians cont.

Valley, Robert Nelson
VanCuran, Keith William
Velasco, Rodrigo Ernesto

Walch, Charles Andrew
Williams, Shanicka N.
Worley, Jr., Clarence MacDonald

Xie, Jianwu
Yadiki, Bhanu Prakash
Ziolkowski, Timothy Jon

APPLICANTS FOR PERMANENT LICENSURE – Physicians
Approve pending receipt of PCIF Assessment Fee

Lartevi, Kumapley Kofi
Sundaraman, Michael Anand

APPLICANTS FOR PERMANENT LICENSURE – Physician
Approve pending satisfactory receipt of completion of PGY 3

Modi, Hrishabh Chinu

REACTIVATION APPLICANTS WHOSE LICENSES HAVE BEEN NOT BEEN ACTIVE FOR MORE THAN ONE YEAR - Physicians

Alaan, Kristina Cortes
Ang-Rabanes, Michael Bacani
Cain, Richard Edward
Crennan, Joan Marie
DiFilippo, William
Fieo, Richard L.
Kasturi, Vellore G.
Wilson, Jr., John David
Worrell, Scott Phillip
LICENSURE COMMITTEE AGENDA

September 10, 2016

CALL TO ORDER

LICENSURE COMMITTEE REVIEW AND ACTION

Minutes of July 9, 2016 meeting

APPEARANCES

1. Fidler, Donald Carl 10:45 a.m.
2. Cash, Sarah Brooke 11:00 a.m.
3. Sutton, Jr., Frank Morrison 11:15 a.m.
4. Lo Dico, Mark Roncalli 11:30 a.m.
5. Sanii, Kamrooz 11:45 a.m.
6. Geigel, Carlos Oscar 12:15 p.m.
7. Amissah, Immanuel Dickson 12:30 p.m.
8. Brewer, Robert Horton 1:00 p.m.

DISCUSSIONS

9. Coarsey, Stephen McNeil
10. Behsudi, Faiz
11. Behairy, Ahmed Soliman
12. Baxt, Brian David
13. Darr, Abid Basher
14. Murphy, James Anthony
15. Shiffler, Joel David
16. Naik, Savita Sunil – Add-on
17. Al-Astal, Amro – Add-on
18. Henry, Jessica Athalia – Add-on
19. Ravich, Marina Mikhailovna – Add-on
20. Corbett, Jeremy Joel – Add-on

LICENSURE COMMITTEE ACTIONS AND RECOMMENDATIONS

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Licensure Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 10th day of September, 2016, at 10:30 a.m.

The following Committee members were present:

Rusty L. Cain, D.P.M., Chair
Rev. O. Richard Bowyer
Beth Hays, M.A.
Carlos C. Jimenez, M.D.
Mustafa Rahim, M.D.
Ashish P. Sheth, M.D.

The following Staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Sheree J. Thompson

Dr. Cain called the meeting to order. A motion was made by Ms. Hays, and seconded by Rev. Bowyer, to approve the minutes of the July 9, 2016, meeting. The motion carried.

Donald Carl Fidler, M.D. appeared before the Licensure Committee in support of his application for reactivation of his permanent medical license. After a thorough discussion with Dr. Fidler, Ms. Hays moved that the Licensure Committee recommend that the Board approve Dr. Fidler for licensure. Rev. Bowyer seconded the motion, and the motion carried.

Sarah Brooke Cash, M.D. appeared before the Licensure Committee in support of her application for a permanent medical license. After a thorough discussion with Dr. Cash, Ms.
Hays moved that the Licensure Committee recommend that the Board approve Dr. Cash for licensure. Dr. Rahim seconded the motion, and the motion carried.

At its July 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Frank Morrison Sutton, Jr., M.D. Dr. Sutton was requested to appear before the Licensure Committee at its September 2016 meeting. After a thorough discussion with Dr. Sutton, Ms. Hays moved that the Licensure Committee recommend that the Board approve Dr. Sutton for licensure pending his payment of the mandatory PICF assessment fee. Rev. Bowyer seconded the motion, and the motion carried.

At its July 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Mark Roncalli LoDico, M.D. Dr. LoDico was requested to appear before the Licensure Committee at its September 2016 meeting. After a thorough discussion with Dr. LoDico, Dr. Rahim moved that the Licensure Committee recommend that the Board approve Dr. LoDico for licensure pending his payment of the mandatory PICF assessment fee. Rev. Bowyer seconded the motion, and the motion carried.

Kamrooz Sanii, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Sanii, Dr. Rahim moved that the Licensure Committee recommend that the Board approve Dr. Sanii for licensure pending his payment of the mandatory PICF assessment fee. Rev. Bowyer seconded the motion, and the motion carried.

At its July 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Carlos Oscar Geigel, M.D. Dr. Geigel was requested to appear before the Licensure Committee at its September 2016 meeting. After a thorough discussion with Dr. Geigel, Dr. Rahim moved that the Licensure Committee recommend that the Board approve Dr. Geigel for licensure pending his payment of the mandatory PICF assessment fee. Ms. Hays seconded the motion, and the motion carried.

Immanuel Dickson Amissah, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr.
Amissah, Rev. Bowyer moved that the Licensure Committee recommend that the Board approve Dr. Amissah for licensure pending his payment of the mandatory PICF assessment fee. Ms. Hays seconded the motion, and the motion carried.

Robert Horton Brewer, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. While Dr. Brewer is represented by counsel, he appeared without counsel. Dr. Brewer was given the opportunity to reschedule his appearance if he preferred to have his attorney present. He declined, and confirmed that he wished to proceed with the meeting without his attorney present. After a thorough discussion with Dr. Brewer, Ms. Hays moved that the Licensure Committee recommend that the Board approve Dr. Brewer for licensure pending his payment of the mandatory PICF assessment fee. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Stephen McNeill Carsey, M.D. After a thorough discussion, the Licensure Committee determined to place Dr. Carsey’s application on hold pending receipt of additional information.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Faiz Mohammed Behsudi, M.D. After a thorough discussion, Rev. Bowyer moved to recommend to the Board to accept the total hours of CME submitted by Dr. Behsudi, and approve Dr. Behsudi for licensure. Dr. Rahim seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Ahmed Soliman Behairy, M.D. After a thorough discussion, Rev. Bowyer moved that the Committee recommend that the Board accept his medical education as satisfactorily verified and approve Dr. Behairy for licensure pending his payment of the mandatory PICF assessment fee based on the following factors: his medical school verification has been unable to be received from Ain Shams University Faculty of Medicine in Egypt, a country currently in civil unrest; he has requested copies of the documents from several medical boards, however, he received no response or was told the information was not available; he has
ECFMG certification, six years of ACGME accredited training, Board certification with the ABIM subspecialty of Medical Oncology; active licenses in two other states and more than twenty years of practice in the United States. Ms. Hays seconded the motion, and the motion carried.

At its May 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Brian David Baxt, M.D. Dr. Baxt was requested to appear before the Licensure Committee at its July 2016 meeting. Dr. Baxt requested to delay his appearance, which was rescheduled to the September 2016 meeting. In lieu of appearing, Dr. Baxt submitted a request to withdraw his licensure application. Ms. Hays moved that the Licensure Committee recommend that the Board accept his withdrawal request. Rev. Bowyer seconded the motion, and the motion carried.

At its July 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Abid Bashir Darr, M.D. Dr. Darr has not met the examination requirement to be eligible for licensure as he has not passed a medical licensing examination. Dr. Darr was given the opportunity to withdraw his licensure application. As no correspondence was received directly from Dr. Darr, the Licensure Committee determined to place his application on hold pending additional information.

At its July 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of James Anthony Murphy, M.D. Dr. Murphy has completed training in his specialty of oral and maxillofacial surgery; however, as an international medical school graduate he has not met the postgraduate training requirements to be eligible for licensure. Dr. Murphy was given the opportunity to withdraw his application. Dr. Murphy submitted a request to withdraw his licensure application. Ms. Hays moved that the Licensure Committee recommend that the Board accept his withdrawal request. Dr. Rahim seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for activation of the permanent medical license of Joel David Shiffler, M.D. which was previously revoked by the Board on July 15, 2009. After a thorough discussion, Ms. Hays moved that Dr. Shiffler
appear before the Licensure Committee at its September 2016 meeting. Rev. Bowyer seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Savita Sunil Naik, M.D. After a thorough discussion, Ms. Hays moved that the Licensure Committee recommend to the Board that Dr. Naik's application be approved for licensure pending receipt of satisfactory evidence of completion of her third year of postgraduate training and her payment of the mandatory PICF assessment fee. Rev. Bowyer seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Amro Al-Astal, M.D. After a thorough discussion, Dr. Rahim moved that Dr. Al-Astal appear before the Licensure Committee at its September 2016 meeting. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Jessica Athalia Henry, M.D. After a thorough discussion, Dr. Rahim moved that Dr. Henry appear before the Licensure Committee at its September 2016 meeting. Rev. Bowyer seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Marina Mikhailovna Ravich, M.D. After a thorough discussion, Dr. Rahim moved to recommend to the Board to accept the total hours of CME submitted by Dr. Ravich, and approve Dr. Ravich for licensure. Dr. Jimenez seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Jeremy Joel Corbett, M.D. After a thorough discussion, Dr. Rahim moved to recommend to the Board to accept the total hours of CME submitted by Dr. Corbett, and approve Dr. Corbett for licensure. Dr. Jimenez seconded the motion, and the motion carried.
The Licensure Committee reviewed and discussed the list of compliant applications, which includes one hundred one (101) initial medical doctor applications, seven compliant reactivation of medical doctor applications and two compliant podiatrist applications. Rev. Bowyer moved that the Licensure Committee recommend that the Board approve the applicants for licensure and reactivation of licensure. Ms. Hays seconded the motion, and the motion carried. In addition, four initial medical doctor applicants are pending payment of the PICF assessment. Ms. Hays moved that the Licensure Committee recommend to the Board to approve these four applicants for licensure pending his/her payment of the mandatory PICF assessment fee. Rev. Bowyer seconded the motion, and the motion carried.

The Licensure Committee determined by consensus to adjourn, there being no further business.

Rusty L. Cain, D.P.M.
Chair of the Licensure Committee
Abraham, Anitha Thomas
Ahmed, Masih Uddin
Ali, Abbas Syed
Alqahtani, Fahad S.
Aziz, Kany Salah

Bailey, Ariel Lynn
Barba, Jose Paras
Bhatnagar, Rishi
Bissler, John Joseph
Brunker, Patricia Ann Ramaley
Bunnell, Susan Lynn
Burrus, Tamika Marquitta
Bussian, Anne Hearn

Chang, Enoch H.
Chang, Johanna Moscardon
Cheng, Elaine
Christopher, Andrew
Chung, Jeffson Chia-Hsien
Conway, Collin James
Cross, Sara Anne
Culp, Jane Ann

Deng, Min
Desai, Khirenkumar I.
Dodds Hogan, Danika Adria
Duke, Duane Stopp

Earls, James Patrick
Edwards, Rachel Elizabeth
Ezeala, Yvonne Nneka

Fox, Danita Renelsa
Friedmann, Craig Henry
Frieling, Gretchen Williams

Gan, Fang-Yun
Goh, King Soon
Gokhale, Sumita
Goldman, Natalia Rodriguez
APPLICANTS FOR PERMANENT LICENSURE – Physicians cont.

Griffin, John David
Grove, Christopher Allen

Hafez, Maria
Hammer, Maxim Daniel
Henry, Charles Stephen
Hensley, Brian Michael
Herbig, Peter Karl
Hibbard, Kevin Michael
Hughes, Lisa Beth

Iqbal, Anwar

Jadhav, Ashutosh Prahakar

Kallas, Sarah Jo Burton
Kenmuir, Cynthia Lynn
Kibirova, Albina
Klug, Rebecca Lynn
Kolodney, Michael Spencer
Kritz, Tracy Anne

Laccheo, Ikuko
Lilly, Brandon Keith
Lot, Lucy Joyce

Mancusi-Ungaro, Peter Curt
Mantine, Laura M.
McCluskey, Kevin Michael
Miller, Gary Stuart
Miller, Robin Kate
Misra, Sutanu
Mittal, Vikrant
Moiduddin, Nasser
Molyneaux, Bradley John
Morrison, Christopher Andrew
Morton-Eggleston, Emma Brown
Moszkowicz, Arie I.
APPLICANTS FOR PERMANENT LICENSURE – Physicians cont.

Navia, Ramiro Osvaldo
Niceler, Brock James
Niner, Jr., Joseph Anthony

Patel, Nick Rohit
Perry, John Wesley
Perry, Michael William
Phillips-Lee, Misha Janelle

Raybuck, Bryan D.
Rocha, Marcelo de Avilez
Rodriguez Galvis, Claudia Yasmin
Rosenstein, Maury Michael
Rosenthal, Ian Matthew
Runkana, Ashok

Schosheim, John Paul
Schultes, Glenn James
Shahbodaghi, Siavash David
Shepet, Kevin Harris
Simon, Michael Bradley
Singh, Abhijai
Smith, Hunter Alexander
Smith, Steven Ray
Soder, Angela June
Starr, Matthew Todd
Stecher, Robert Palmer
Stephens, Benjamin Hutton

Tabi, Ayuk Eric
Tainsh, Cynthia Shearn
Taylor, Christopher Thomas
Trites, Paul Nathan
Turnes, Patrick Allen

Vajapey, Geetanjali
Walz, Elizabeth Terese
Winslow, Caroline Yancey
Ysla, Francis Medina
APPLICANTS FOR PERMANENT LICENSURE – Physicians
Approve pending receipt of PCIF Assessment Fee

Menard, Mary Kathryn
Newberry, Michael
Oliveira, Celia Regina
Singh, Shailendra

REACTIVATION APPLICANTS WHOSE LICENSES HAVE BEEN NOT BEEN ACTIVE FOR MORE THAN ONE YEAR - Physicians

Byerly, Marielle Moes
Caruso, John Robert
Echterling, Susan C.
Mohan, Niraj
Mullen, Kevin Daniel
Presley, Michael William
Sullivan, Jr., Lawrence Xavier

APPLICANTS FOR PERMANENT LICENSURE – Podiatric Physicians

Khan, Asma Nasir
Petkovic, Barbara Lynn
WEST VIRGINIA BOARD OF MEDICINE
LICENSURE COMMITTEE AGENDA
November 12, 2016

CALL TO ORDER

LICENSURE COMMITTEE REVIEW AND ACTION

Minutes of September 12, 2016 meeting

APPEARANCES

1. Henry, Jessica Athalia 10:45 a.m.
2. Saaman, Mark Mena 11:00 a.m.
3. Hill, Christopher Michael 11:15 a.m.
4. Farooqi, Imran 11:30 a.m.
5. Naderi, Sassan 11:45 a.m.
6. Shiffler, Joel David 12:00 noon

DISCUSSIONS

7. Gabriel, Michael Hosny
8. Al-Astal, Amro
9. Anderson, Carmen Lisa
10. D’Brot, Juan Manuel
11. Burke, Jr., Paul Webber
12. Coarsey, Stephen McNeil
13. Darr, Abid Basher
14. ECFMG status reports

LICENSURE COMMITTEE ACTIONS AND RECOMMENDATIONS

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Licensure Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 12th day of November, 2016, at 10:30 a.m.

The following Committee members were present:

   Rusty L. Cain, D.P.M., Chair
   Rev. O. Richard Bowyer
   Harry E. Duncan, Jr., M.D.
   Carlos C. Jimenez, M.D.
   Mustafa Rahim, M.D.

The following Committee members were absent:

   Beth Hays, M.A.
   Ashish P. Sheth, M.D.

The following Staff members were present:

   Robert C. Knittle
   Jamie S. Alley, Esq.
   Sheree J. Thompson

Dr. Cain called the meeting to order. Dr. Cain welcomed new Board and Licensure Committee member Harry E. Duncan, Jr., M.D. A motion was made by Rev. Bowyer, and seconded by Dr. Rahim, to approve the minutes of the September 10, 2016, meeting. The motion carried.

Appearing and addressing the Licensure Committee pursuant to the Board’s procedure for members of the public to address the Board were: Larry D. Dial, M.D., F.A.C.P., Chairman, Department of Internal Medicine of Joan C. Edwards School of Medicine at Marshall University and Chief Medical Officer of Marshall Health; Tamela J. White, BSN, JD, MPH, of
Farrell, White & Legg PLLC; and Michael Hosny Gabriel, M.D. The Committee received public remarks from all three individuals.

At its September 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Amro Al-Astal, M.D. Dr. Al-Astal was requested to appear before the Licensure Committee at its November 2016 meeting, however, Dr. Al-Astal was unable to obtain a Visa to enter the country in that time frame. Dr. Al-Astal did submit additional information in support of his application. After a thorough discussion, Rev. Bowyer made a motion that the public session be recessed in order to enter into executive session pursuant to W. Va. Code § 6-0A-4(b)(4) to discuss an application for licensure and to receive legal advice related to the instant application. Dr. Rahim seconded, and the motion carried. Thereafter, the Committee re-entered public session. Dr. Rahim moved that the Committee conclude that the additional information submitted by Dr. al-Astal addressed issues that the Committee intended to address through the applicant’s appearance. In light of this, Dr. Rahim further moved that the Licensure Committee recommend that the Board approve Dr. Al-Astal for licensure pending his payment of the mandatory PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

Jessica Athalia Henry, M.D. appeared before the Licensure Committee in support of her application for a permanent medical license. After a thorough discussion with Dr. Henry and after her appearance concluded, Rev. Bowyer made a motion that the public session be recessed in order to enter into executive session pursuant to W. Va. Code § 6-0A-4(b)(4) to discuss an application for licensure and to receive legal advice related to the instant application. Dr. Rahim seconded, and the motion carried. Thereafter, the Committee re-entered public session. Dr. Rahim moved that the Licensure Committee recommend that the Board approve Dr. Henry for licensure pending her payment of the mandatory PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

Mark Mena Saaman, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Saaman and after his appearance concluded, Rev. Bowyer made a motion that the public session be
recessed in order to enter into executive session pursuant to W. Va. Code § 6-0A-4(b)(4) to discuss an application for licensure and to receive legal advice related to the instant application. Dr. Rahim seconded, and the motion carried. Thereafter, the Committee re-entered public session. Dr. Rahim moved that the Licensure Committee recommend that the Board approve Dr. Saaman for licensure pending his payment of the mandatory PICF assessment fee. Rev. Bowyer seconded the motion, and the motion carried.

Rev. Bowyer left the meeting after this applicant appearance, and was not present for the remainder of the meeting.

Christopher Michael Hill, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Hill and after his appearance concluded, Dr. Rahim made a motion that the public session be recessed in order to enter into executive session pursuant to W. Va. Code § 6-0A-4(b)(4) to discuss an application for licensure and to receive legal advice related to the instant application. Dr. Duncan seconded, and the motion carried. Thereafter, the Committee re-entered public session. Dr. Rahim moved that the Licensure Committee recommend that the Board approve Dr. Hill for licensure. Dr. Duncan seconded the motion, and the motion carried.

Imran Farooqi, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Farooqi, Dr. Rahim moved that the Licensure Committee recommend that the Board approve Dr. Farooqi for licensure pending his payment of the mandatory PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

At its July 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Sassan Naderi, M.D. Dr. Naderi’s application was placed on hold pending receipt of additional information from a third party source, however, the information requested will not be provided by the third party. After a thorough discussion, Dr. Rahim moved that Dr. Naderi appear before the Licensure Committee at its January 2017 meeting. Dr. Duncan seconded the motion, and the motion carried.
At its September 2016 meeting, the Licensure Committee reviewed and discussed the application for activation of the permanent medical license of Joel David Shiffler, M.D., which was previously revoked by the Board on July 15, 2009. Dr. Shiffler was requested to appear before the Licensure Committee at its November meeting. Dr. Shiffler appeared before the Licensure Committee in support of his application. Effective July 15, 2009, Dr. Shiffler’s West Virginia medical license was revoked by the Board based upon his non-compliance with the term and conditions of his February 2008 Amended Consent Order. Based upon patient complaints, and as a result of Complaint Committee investigations, Dr. Shiffler entered into a Consent Order with the Board which imposed a stayed suspension and required him to have a clinical practice and skills evaluation by CPEP for offenses including self-prescribing controlled substances, other prescribing offenses and allegations that his practice did not meet the standard of care. After CPEP evaluated Dr. Shiffler it recommended that he “retrain for a period of time in a residency or residency-like setting,” and noted that with the Board’s approval, Dr. Shiffler could retrain in a non-residency setting with “full supervision while updating his knowledge base.” An Amended Consent Order followed these recommendations. Dr. Shiffler’s license was ultimately revoked by the Board for his failure to find a preceptor and his associated violation of the terms of his Amended Consent Order. Pursuant to W. Va. Code §30-3-14(o), “[a] physician...whose license is limited or surrendered or against whom other action is taken under this subsection may, at reasonable intervals, petition for removal of any restriction or limitation on or for reinstatement of his or her license to practice medicine and surgery[.]”

Dr. Shiffler was given the opportunity to address his qualifications for relicensure, and a thorough discussion occurred. After discussion with Dr. Shiffler and after his appearance concluded, Dr. Rahim made a motion that the public session be recessed in order to enter into executive session pursuant to W. Va. Code § 6-0A-4(b)(4) to discuss an application for licensure and to receive legal advice related to the instant application. Dr. Duncan seconded, and the motion carried. Thereafter, the Committee re-entered public session. Dr. Rahim moved that the Licensure Committee recommend that the Board make a preliminary determination of probable denial based upon the following:

1. Consideration of the facts and circumstances which formed the basis of the Orders listed above.
2. The results and recommendations emanating from Dr. Shiffler's evaluation by the Center for Personalized Education for Physicians [“CPEP”] in 2007. Upon evaluating Dr. Shiffler,
CPEP’s September 6, 2007 Assessment Report recommended that Dr. Shiffler “retrain for a period of time in a residency or residency-like setting,” and noted that with the Board’s approval, Dr. Shiffler could retrain in a non-residency setting with “full supervision while updating his knowledge base.”

3. During Dr. Shiffler’s appearance before the Licensure Committee on November 12, 2016, Dr. Shiffler verified that he has not engaged in any retraining in a residency or residency-like setting since CPEP issued its Assessment Report in September 2007.

4. During Dr. Shiffler’s appearance before the Licensure Committee on November 12, 2016, he verified that he has not engaged in any retraining in a non-residency setting with full supervision since CPEP issued its Assessment Report in September 2007.

5. Dr. Shiffler has failed to ameliorate or rehabilitate his non-compliance with the terms of his Amended Consent Order and has taken no steps, which are consistent with the 2007 CPEP report, to rehabilitate his practice skills and fund of medical knowledge.

6. During Dr. Shiffler’s appearance before the Licensure Committee on November 12, 2016, he also verified that he has not engaged in the practice of medicine, in any jurisdiction, since his July 15, 2009 revocation, resulting in an absence from clinical practice for a period of greater than seven years and four months.

The Committee further recommends that the Board find that Dr. Shiffler has failed to meet his burden of satisfying the Board that he is qualified for licensure as required by W. Va. Code R. §11-1A-4.12 (2007), and that under all of the circumstances, it would not protect the public health, interest, safety and welfare to grant Dr. Shiffler a license to practice medicine in the state of West Virginia.

In addition to Dr. Shiffler’s lengthy absence from clinical practice, and his failure to follow through with the CPEP recommendations in violation of his Amended Consent Order and thereafter, the Committee recommends that the Board conclude that Dr. Shiffler is unqualified for licensure pursuant to any statutory basis set forth as the basis for discipline in Dr. Shiffler’s Amended Consent Order and pursuant to the following professional conduct standards set forth in the West Virginia Medical Practice Act and the Board’s legislative rules:

W. Va. Code §30-3-14(c) (20) relating to professional incompetence; and/or
W. Va. Code §30-3-14(c) (17) and W. Va. Code R. §11-1A-12.1.i. relating to demonstrating a lack of professional competence to practice medicine with a reasonable degree of skill or safety for patients; and/or
W. Va. Code §30-3-14(c)(17) and W. Va. Code R. §11-1A-12.1.x, relating to engaging in malpractice or failure to practice medicine with that level of care, skill and treatment which is recognized by a reasonable, prudent physician engaged in the same or similar specialty as being acceptable.

Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Michael Hosny Gabriel, M.D. After a thorough discussion, Dr. Rahim moved that Dr. Gabriel appear before the Licensure Committee at its January 2017 meeting. Dr. Jimenez seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Carmen Lisa Anderson, M.D. After a thorough discussion, Dr. Rahim moved to recommend to the Board to accept the total hours of CME submitted by Dr. Anderson, and approve Dr. Anderson for reactivation of licensure. Dr. Jimenez seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Juan Manuel D’Brot, M.D. After a thorough discussion, Dr. Rahim moved to recommend to the Board to accept the total hours of CME submitted by Dr. D’Brot, and approve Dr. D’Brot for reactivation of licensure. Dr. Jimenez seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed a matter of possible non-compliance relating to the Amended Consent Order of Paul Webber Burke, Jr., M.D. After a thorough discussion, it was the determination of the Committee that, pursuant to his Amended Consent Order, Dr. Burke should appear before the Committee at its January 2017 meeting.

At its September 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Stephen McNeil Coarsey, M.D. Dr. Coarsey’s application was placed on hold pending receipt of additional information. Additional information was provided by Dr. Coarsey at the November 2016 Committee meeting. After a thorough
discussion, Dr. Jimenez moved that the Licensure Committee recommend that the Board approve Dr. Coarsey for licensure pending his payment of the mandatory PICF assessment fee. Dr. Rahim seconded the motion, and the motion carried.

At its July 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Abid Bashir Darr, M.D. Dr. Darr has not met the examination requirement to be eligible for licensure as he has not passed a medical licensing examination. Dr. Darr was given the opportunity to withdraw his licensure application. As no correspondence was received directly from Dr. Darr by the September or November 2016 meetings, the Licensure Committee determined to take no further action upon his application at this time.

The FSMB notified the Board that it is no longer going to provide copies of ECFMG certificates in the FCVS packet prepared for licensure applicants, and instead will provide a status report. If the Board wants the applicant to submit a certificate copy it will have to receive it from the applicant. It has been Board practice to require copies of valid ECFMG certificates for evidence of fulfilling the requirements of the Educational Commission for Foreign Medical Graduates certification. After discussion, Dr. Rahim moved that either a copy of the ECFMG certificate or a status report be accepted for fulfillment of this application requirement. Dr. Jimenez seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the list of compliant applications, which includes seventy-nine (79) initial medical doctor applications, two compliant reactivation of medical doctor applications and two compliant podiatrist applications. Dr. Jimenez moved that the Licensure Committee recommend that the Board approve the applicants for licensure and reactivation of licensure. Dr. Duncan seconded the motion, and the motion carried. In addition, three initial medical doctor applicants are pending payment of the PICF assessment. Dr. Jimenez moved that the Licensure Committee recommend to the Board to approve these three applicants for licensure pending his/her payment of the mandatory PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.
On behalf of the Committee, Chairman Cain thanked Dr. Jimenez for his years of service to the Board and especially the Licensure Committee. Dr. Cain also acknowledged Mr. Knittle for his eleven years of dedicated service to the Board that will be coming to a close with his retirement at the end of 2016. Ms. Alley and Ms. Thompson shared their appreciation for Mr. Knittle’s leadership on behalf of the Board staff, by whom he will be greatly missed. Both are wished well in their future endeavors.

The Licensure Committee determined by consensus to adjourn, there being no further business.

Rusty L. Cain, D.P.M.
Chair of the Licensure Committee
APPLICANTS FOR PERMANENT LICENSURE - Physicians

November 14, 2016

Barghouthi, Nadia Thair
Barman, Rajdip
Beckum, Kathleen Martin
Bergen, Deborah Ruth
Bernal, Oscar Guillermo
Bromer, Jason Gabriel
Brown, Brian John
Bushen, Oluma Yoseph

Cassano, Charvi Ashok
Chung, Lily ShinShil
Clough, Jr., Thomas Edward

Danielson, Laura Marie
Darville, Candice Cheryl
DeZastro, Timothy Gerard

Feinberg, Judith

Ghim, Michael Youngshik
Goldszmidt, Adrian Javier

Han, Steve Woo Chul
Henkel, David Michael
Horner, Cynthia Pfeiffer
Hsu, Jack Ming
Hussain, Yessar Mufeed

Isla, Edward Charles
Israel, Joshua A.

Jackson, III, Ollie Joseph
Jagait, Harvinder Singh
Jaiswal, Shikha
Jones, Kendall Maurice
Jovin, Tudor Gheorghe

Kaler, Lawrence William
Kanjwal, Mohammad Khalil
Khchemoune, Amor
Kолоднєв, Joanna Amy
Kwakye, Kwabena Adomako
Langlieb, Alan Mark
Lewis, Paul Wesley
Lona, Adrianne
Lucas Day, Kimberly Ann

Malhotra, Vikram
Marocha, Vikram
Mayne, Jennifer Chenault
McCollum, Mark Oldham
McCubbin, Mark Daniel
McKay, Kristopher Michael
Mehlman, Karyl Norcross
Metzler, Michael David
Mohammed, Benhur Bushara
Muhlbauer, Helen Gertrude

Nelson, Lindsey Allan
Olson, Jennifer Elizabeth

Porter, Fernando Antonio
Powers, Tonya Kim
Price, Craig Charles
Pryor, II, Howard Irwin

Qazi, Aisha N.
Rommel, Bethany Marie

Saconn, Paul Anthony
Sarraj, Amrou
Schaefer, Jamie Lea
Shah, Saqib Mian
Shahrou, Yasser
Singh, Paramvir
Sinning, Kristin Melissa
Siripurapu, Prasad Rajendra
Song, Samuel Sungwon
Stamilio, David M.
Stepanian, Marshall William
Stewart, Virginia Annette
APPLICANTS FOR PERMANENT LICENSURE – Physicians cont.

Thangudu, Pavan Kumar
Turner, Ryan Coddington
Ulene, Valerie Gail

Vereb, Margaret Jeanne
Vitto, Anthony

Wechsler, Lawrence Richard
Wilson, John Travis
Wong, Alexander Wyman
Wu, Tzu-Ching

Zehner, Joseph B.
Zhong, Wen

APPLICANTS FOR PERMANENT LICENSURE – Physicians
Approve pending receipt of PICF Assessment Fee

Holly, Dale Crawford
Pincavitch, Jami Diamond
Van, Phillip Lee

REACTIVATION APPLICANTS WHOSE LICENSES HAVE BEEN NOT BEEN
ACTIVE FOR MORE THAN ONE YEAR - Physicians

Dinsmore, John Evans
Sarker, Chitta Ranjan

APPLICANTS FOR PERMANENT LICENSURE – Podiatrist

Evangelista, Allan
Gaspar, Philip Anthony
WEST VIRGINIA BOARD OF MEDICINE
LICENSURE COMMITTEE AGENDA
January 7, 2017

CALL TO ORDER

LICENSURE COMMITTEE REVIEW AND ACTION

Minutes of November 12, 2016 meeting

APPEARANCES

1. Burke, Jr., Paul Webber 10:45 a.m.
2. Naderi, Sassan 11:00 a.m.
3. Hojat, Rod Ali 11:15 a.m.
4. Gabriel, Michael Hosny 11:30 a.m.

DISCUSSIONS

5. Faraon-Pogaceanu, Claudiu Cristian
6. Salvaggio, Mark Anthony
7. Chaum, Edward
8. Camacho, Victor Miguel
9. Graham, Ian Roderick
10. Jacob, Leon Philip
11. Smith, Whitaker Michael
12. Jedlicka, Lawrence John
13. Morton-Fishman, Melissa Lea
14. Carney, Lesli Marie
15. Charron, George Maurice
16. Hill, Mark Nolan
17. DPM licensure revision request
18. Policy on review of applicant malpractice claims
19. Update on Interstate Medical Licensure Status
20. July Meeting Minute license approval correction – Add-on
21. Collaborative Pharmacy Practice Agreements – Add-on
22. Mirza, Muhammad Asad – Add-on
23. Sultan, Wamiq Sohail – Add-on
24. Srivastava, Jahnavi – Add-on
25. Masood, Tahira – Add-on

LICENSURE COMMITTEE ACTIONS AND RECOMMENDATIONS

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Licensure Committee Meeting Minutes
January 7, 2017

A meeting of the West Virginia Board of Medicine Licensure Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 7th day of January, 2017, at 10:30 a.m.

The following Committee members were present:

Rusty L. Cain, D.P.M., Chair
Rev. O. Richard Bowyer
Harry E. Duncan, Jr., M.D.
Beth Hays, M.A.
Ashish P. Sheth, M.D.

The following Committee member was absent:

Mustafa Rahim, M.D.

The following Board members were present as guests:

Carrie Lakin, D.P.M.
David A. Mullins, M.D.
Wes Steele, M.D.

The following Staff members were present:

Jamie S. Alley, Esq.
Sheree J. Thompson

The following guest was present:

Mark A. Spangler, M.A.

Dr. Cain called the meeting to order. Dr. Cain welcomed newly appointed Board Members, Drs. Lakin, Mullins and Steele, who were invited to observe the meeting. Dr. Cain also welcomed Mr. Spangler, who will begin his position as Executive Director for the Board on January 23, 2017. A motion was made by Rev. Bowyer, and seconded by Ms. Hays, to approve the minutes of the November 12, 2016, Licensure Committee meeting. The motion carried.
Paul Webber Burke, Jr., M.D., appeared before the Licensure Committee pursuant to his Amended Consent Order. No action was required of the Committee in association with this appearance. Dr. Burke’s next annual appearance before the Committee shall occur in January 2018.

Rod Ali Hojat, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Hojat, Rev. Bowyer moved that the Licensure Committee recommend that the Board approve Dr. Hojat for licensure pending his payment of the mandatory PICF assessment fee. Dr. Sheth seconded the motion, and the motion carried.

Michael Hosny Gabriel, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Gabriel, and after his appearance concluded, Rev. Bowyer made a motion that the public session be recessed in order to enter into executive session pursuant to W. Va. Code § 6-0A-4(b)(4) to discuss an application for licensure and to receive legal advice related to the instant application. Dr. Duncan seconded, and the motion carried. Thereafter, the Committee re-entered public session. Rev. Bowyer moved that Dr. Gabriel be given the opportunity to withdraw his licensure application. Dr. Duncan seconded the motion, and the motion carried.

At its July 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Sassan Naderi, M.D. Dr. Naderi’s application was placed on hold pending receipt of additional information from a third-party source, however, the information requested will not be provided by the third party. After discussion at its November 2017 meeting, the Committee requested Dr. Naderi’s appearance at its January 2017 meeting. Dr. Naderi was unable to attend the January meeting. Ms. Hays moved that Dr. Naderi appear before the Licensure Committee at its March 2017 meeting. Rev. Bowyer seconded the motion and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Claudieu Cristian Faraon-Pogaceanu, M.D. After a thorough discussion, Rev. Bowyer moved to recommend that the Board approve Dr. Faraon-Pogaceanu for
licensure pending his payment of the mandatory PICF assessment fee. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Mark Anthony Salvaggio, M.D. After a thorough discussion, Rev. Bowyer moved that Dr. Salvaggio appear before the Licensure Committee at its March 2017 meeting. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Edward Chaum, M.D. After a thorough discussion, Ms. Hays moved to recommend that the Board approve Dr. Chaum for licensure pending his payment of the mandatory PICF assessment fee. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Victor Miguel Camacho, M.D. After a thorough discussion, Rev. Bowyer moved to recommend that the Board approve Dr. Camacho for licensure pending his payment of the mandatory PICF assessment fee. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Ian Roderick Graham, M.D. After a thorough discussion, Dr. Sheth moved to recommend that the Board approve Dr. Graham for licensure pending his payment of the mandatory PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Leon Philip Jacob, M.D. After a thorough discussion, Rev. Bowyer moved to recommend that Dr. Jacob be given the opportunity to withdraw his application. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Whitaker Michael Smith, M.D. After a
thorough discussion, Rev. Bowyer moved to recommend to the Board to accept the total hours of CME submitted by Dr. Smith, and approve Dr. Smith for reactivation of licensure. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Lawrence John Jedlicka, M.D. After a thorough discussion, Rev. Bowyer moved that Dr. Jedlicka appear before the Licensure Committee at its March 2017 meeting. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Melissa Lea Morton-Fishman, M.D. After a thorough discussion, Dr. Duncan moved that Dr. Morton-Fishman appear before the Licensure Committee at its March 2017 meeting. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Lesli Marie Carney, M.D. After a thorough discussion, Rev. Bowyer moved to recommend that the Board approve Dr. Carney for licensure pending her payment of the mandatory PICF assessment fee. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of George Maurice Charron, M.D. After a thorough discussion, Rev. Bowyer moved to recommend that the Board approve Dr. Charron for licensure pending his payment of the mandatory PICF assessment fee. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Mark Nolan Hill, M.D. After a thorough discussion, Rev. Bowyer moved to recommend that the Board approve Dr. Hill for licensure pending his payment of the mandatory PICF assessment fee. Dr. Sheth seconded the motion, and the motion carried.
The Licensure Committee reviewed a request to modify the wording on podiatric wallet cards submitted by Allan Evangelista, D.P.M. After a thorough discussion it was determined that Board staff will respond on behalf of the Committee to notify Dr. Evangelista that pending amendments to the Board’s legislative rule, Series 1A, will be considered by the Legislature this term. The amendments include a change in nomenclature which will, if passed, permit modification of future documents to reference DPM licensees as podiatric physicians.

The Licensure Committee reviewed information on potential modifications to the policy on review of applicant malpractice claims. It was determined to table the discussion to its March 2017 meeting, pending additional information from staff.

Board staff provided information regarding the current status of the Interstate Medical Licensure Compact’s progress and possible “go live” date of January 20, 2017. Staff is taking steps to enable the WVBOM to participate, such as enabling the process of receiving federal criminal background checks.

A necessary correction to the July 2016 meeting minutes to acid an omission and delete a license not issued was discussed. Sara Kirsten Rasmussen, M.D. met the requirements for licensure and was issued a license on July 11, 2016. Faris Jadan Haddad, M.D. was on the list of applicants for permanent licensure approved at the July 2016 meeting and he was not issued a license. The error was limited to the minutes and was not reported incorrectly to any other parties. Rev. Bowyer made a motion to recommend to the Board to note the corrections in the minutes to include Dr. Rasmussen as a licensee effective July 11, 2016, and remove Dr. Haddad’s name as having been issued a license. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed three applications for Collaborative Pharmacy Practice Agreements. Rev. Bowyer moved that Application 2 be recommended for approval and Applications 1 and 3 be recommended for approval pending receipt of additional information. Ms. Hays seconded the motion, and the motion carried. The Licensure Committee reiterated its prior determination that future applications may be reviewed for compliance and
approved by Board Staff unless staff review of the application determines review by the Licensure Committee may be warranted.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Muhammad Asad Mirza, M.D. After a thorough discussion, Rev. Bowyer moved to recommend that the Board approve Dr. Mirza for licensure pending his payment of the mandatory PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Wamiq Sohail Sultan, M.D. After a thorough discussion, Rev. Bowyer moved to recommend that the Board approve Dr. Sultan for licensure pending his payment of the mandatory PICF assessment fee. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Jahnvi Srivastava, M.D. After a thorough discussion, Rev. Bowyer moved to recommend to the Board to accept the total hours of CME submitted by Dr. Srivastava pending receipt of satisfactory evidence that the required number of CME hours are in her specialty, and approve Dr. Srivastava for reactivation of licensure. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Tahira Masood, M.D. After a thorough discussion, Rev. Bowyer moved to recommend to the Board to accept the total hours of CME submitted by Dr. Masood, and approve Dr. Masood for reactivation of licensure. Dr. Sheth seconded the motion, and the motion carried.

At its November 2016 meeting, the Licensure Committee recommended that the Board approve for licensure several applicants pending payment of the mandatory PICF assessment fee. As of the January 2017 meeting one of the applicants had not paid the fee to allow for licensure. Dr. Duncan moved that Board staff follow up with the applicant regarding,
nonpayment of the fee via certified mail. Dr. Duncan further moved that in the future, the Committee recommends that approval of licensure pending payment of the PICF fee be limited to the interval between meetings, and if an applicant fails to follow through with payment prior to the next meeting, the application must be presented to the Committee for further action. Rev. Bowyer seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the list of compliant applications, which includes fifty-seven (57) initial medical doctor applications, one compliant reactivation of medical doctor application, one compliant podiatrist application and one medical doctor application pending payment of the mandatory PICF assessment fee. Rev. Bowyer moved that the Licensure Committee recommend that the Board approve the applicants for licensure and reactivation of licensure. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee determined by consensus to adjourn, there being no further business.

[Signature]

Mustafa Rahim, M.D.
Chair of the Licensure Committee
APPLICANTS FOR PERMANENT LICENSURE - Physicians

January 9, 2017

Abascal, Aliana Michelle
Abbas, Ghulam
Abu Sukheila, Ramy Mahmoud
Adkins, David Alan
Ahmad, Mirza Nayyar Daud

Basel, David Alan
Bhutia, Namgyal Dorjee
Bijjula, Ragneel Reddy
Boquet, Mark James
Brewer, Zachary Seth
Brodsky, Sergey
Brogden, Stephanie

Chang, Theodore Sean
Choi, Lorraine

Dietrich, Stephen Leslie
Dukes, Seth

Espinoza, Salvador

Foster, Toby Eugene

Ganesh, Shanti Portia
Garcia, Gwenalyn Gail Capistrano

Haider, Sajjad
Hemminger, Jessica Ann
Horwath, Ewald

Johnson, Sharita Nicolle

Kaps, Cristopher Jonathan
Kazienko, Brian Thomas
Kedia, Shiksha
Kelminson, Stephen Bruce
Kints, Geertruida
Kouch, Michael

Lane, Debra Ann
Leftin, Howard Irwin
Macdonald, Paul Henry
Mehta, Rajesh Kumar
Merati, Kambiz
Miller, Tim Alan

Nadarajah, Dhashaini
Naturale, Richard Timothy

Pallavi, Ranjita
Ponnusamy, Karthikeyan Ettigounder

Ramirez, Claudia Patricia
Rothschild, Bruce Max

Schubach, Gregg David
Seynnaeve, Carl A.
Sharabi, Abdelsalam
Shy, Joseph Cameron
Simpson, Megan McGinley
Singh, Supreet
Subedi, Bishnu Hari
Syed, Tanvir Uddin

Teomete, Uygar

Venbrux, Nuchanart
Vengrow, Michael

Walker, Sidney Patton

Yacoub, Shirley Bassam

Zalzal, Habib George
Zaraket, Hanna
January 9, 2017
Page Two

REACTIVATION APPLICANT WHOSE LICENSE HAS NOT BEEN ACTIVE FOR MORE THAN ONE YEAR - Physician

Juneja, Manie

APPLICANT FOR PERMANENT LICENSURE – Podiatrist

Giaimo, Scott Jason

APPLICANT FOR PERMANENT LICENSURE – Physician
Approve pending receipt of PICF Assessment Fee

Webb, Arthur Lawson

APPLICANT WITH PRIOR APPROVAL – NON PAYMENT OF PICF FEE

Coarsey, Stephen McNeil
WEST VIRGINIA BOARD OF MEDICINE
LICENSURE COMMITTEE AGENDA
March 11, 2017

CALL TO ORDER
LICENSURE COMMITTEE REVIEW AND ACTION

Minutes of January 7, 2017 meeting

APPEARANCES

1. Singh, Shailinder Jit 11:00 a.m.
2. Jedlicka, Lawrence John 11:15 a.m.
3. Salvaggio, Mark Anthony 11:30 a.m.

LUNCH BREAK

4. Morton-Fishman, Melissa Lea 12:30 p.m.
5. Naderi, Sassan 12:45 p.m.
6. Ad, Niv 1:00 p.m.
7. Tohidi, Behrooz 1:15 p.m.

DISCUSSIONS

8. Herschler, Jeremy Alan
9. George, Bassem Ragheb
10. Homsi, Yahia
11. Nielson, David Lamont
12. Iacob, Codrin Eugene
13. Murashita, Takashi
14. Fatenejad, Saeed
15. Kadam, Shilpa Arun
16. Resnick, Daniel
17. Tice, Douglas Scott
18. Gabriel, Michael Hosny
19. Jacob, Leon Philip
20. Coarsey, Stephen
21. Mirza, Muhammad Asad
22. Policy on review of applicant malpractice claims
23. Update on Interstate Medical Licensure Status

continued
DISCUSSIONS cont.

24. Update on 2017 Legislative Session
25. Cain, James Gordan
26. Bruno-de la Mata, Kimberly Ann
27. Elder, Kerren Harry
28. Smith, George Robert
29. Cooperstein, Lawrence Alan
30. Ng, Chi-kin
31. Dela’o, Connie Michell
32. Nursing Home Limited License Application

LICENSURE COMMITTEE ACTIONS AND RECOMMENDATIONS

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Licensure Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 11th day of March, 2017, at 10:30 a.m.

The following Committee members were present:

Mustafa Rahim, M.D., Chair
Harry E. Duncan, Jr., M.D.
Beth Hays, M.A.
Carrie Lakin, D.P.M.
Ashish P. Sheth, M.D.
Wes Steele, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Sheree J. Thompson

As newly appointed chair, Dr. Rahim called the meeting to order. Dr. Rahim welcomed newly appointed Committee Members, Drs. Lakin and Steele, and Mr. Spangler who has assumed his position as Executive Director for the Board on January 23, 2017. A motion was made by Ms. Hayes, and seconded by Dr. Lakin, to approve the minutes of the January 7, 2017, Licensure Committee meeting. The motion carried.

Shailinder Jit Singh, M.D. appeared before the Licensure Committee in support of his application for an extraordinary circumstances medical license. After a thorough discussion with Dr. Singh, Dr. Sheth moved that the Licensure Committee recommend to the Board that the Board approve Dr. Singh's application for licensure pursuant to WV Code § 30-3-10(e) based on the following findings:

1) The applicant has exceptional education, training and practice credentials, including:
a. Serving as a pediatric surgeon and pediatric urologist, including service as an attending physician, in England for greater than sixteen years;
b. Serving as Program Director for Pediatric Surgery at University Hospital Queen’s Medical Center in Nottingham;
c. Establishing the Bastow Clinical Investigative Unit in Pediatric Gastrointestinal Physiology at Nottingham University Hospitals, which has produced pioneering research on pelvic ultrasound and gastric emptying studies;
d. Serving as an attending pediatric surgeon and pediatric urologist at Children’s National Medical Center in Washington, D.C., where you maintain a license;
e. Fellow of Royal College of Surgeons of Ireland and the Royal College of Surgeons in England; and
f. Documented research experience in gastric emptying and pelvic ultrasound.

2) The applicant’s practice in the state would be beneficial to the public welfare by providing access to pediatric surgery and pediatric urology in West Virginia, two specialties for which there is a current and significant unmet need in this state.

3) His specialized surgical training and current research aims to diminish the occurrence of liver failure in pediatric patients with certain congenital intestinal conditions and disorders.

4) The applicant’s education and training occurred outside of the United States and are not, standing alone, substantially equivalent to the requirements of licensure in this state, the totality of his education, training and practice credentials are substantially equivalent to the requirements of licensure established in W. Va. Code §30-3-10(f).

5) The applicant received greater than twelve years of postgraduate training outside of the United States and its territories, including substantial training in pediatric surgery and pediatric urology.

6) The applicant has no discipline which would render him ineligible for an extraordinary circumstances license.

7) The applicant is eligible for a restricted license in extraordinary circumstances.

Dr. Sheth further moved that the Committee recommend that Dr. Singh be approved for an extraordinary license limited according to practice location at West Virginia University Hospitals, 1 Medical Center Drive, Morgantown, West Virginia, and that the applicant’s license shall be restricted to the practice of pediatric surgery, pediatric urology and related research activities. Dr. Steele seconded the motion, and the motion carried.
At its January 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Lawrence John Jedlicka, M.D. Dr. Jedlicka was requested to appear before the Licensure Committee at its March 2017 meeting. Dr. Jedlicka appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Jedlicka, Ms. Hays moved that the Committee recommend that the Board approve Dr. Jedlicka for licensure pending his payment of the mandatory PICF assessment fee. Dr. Lakin seconded the motion, and the motion carried.

At its January 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Mark Anthony Salvaggio, M.D. Dr. Salvaggio was requested to appear before the Licensure Committee at its March 2017 meeting. Dr. Salvaggio appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Salvaggio, Ms. Hays moved that the Committee recommend that the Board approve Dr. Salvaggio for licensure pending his payment of the mandatory PICF assessment fee. Dr. Lakin seconded the motion, and the motion carried.

At its January 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Melissa Lea Morton-Fishman, M.D. Dr. Morton-Fishman was requested to appear before the Licensure Committee at its March 2017 meeting. Dr. Morton-Fishman appeared before the Licensure Committee in support of her application for a permanent medical license. After a thorough discussion with Dr. Morton-Fishman, Dr. Lakin moved that the Committee recommend that the Board approve Dr. Morton-Fishman for licensure pending her payment of the mandatory PICF assessment fee. Dr. Sheth seconded the motion, and the motion carried.

At its July 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Sassan Naderi, M.D. Dr. Naderi’s application was placed on hold pending receipt of additional information from a third-party source, however, the information requested will not be provided by the third party. After discussion at its November 2017 meeting, the Committee requested Dr. Naderi’s appearance at its January 2017 meeting. Dr. Naderi was unable to attend the January meeting. The Committee requested his appearance at its March 2017 meeting. Dr. Naderi did not appear nor explain his absence. As Dr. Naderi’s
application has not completed within one year from receipt, it will no longer be valid prior to the
May 2017 Committee meeting. No action was taken by the Licensure Committee.

Behrooz Tohidi, M.D. appeared before the Licensure Committee in support of
his application for a permanent medical license. After a thorough discussion with Dr. Tohidi,
Ms. Hays moved that the Committee recommend that the Board approve Dr. Tohidi for licensure
pending his payment of the mandatory PICF assessment fee. Dr. Steele seconded the motion, and
the motion carried.

The Licensure Committee reviewed and discussed the application for a medical
school faculty license of Niv Ad, M.D. Dr. Ad was unable to appear at the March 2017 meeting
in support of his application. The Committee requested his appearance at its May 2017 meeting,
if Dr. Ad wishes to continue to pursue licensure, and to offer him the opportunity to withdraw his
application in lieu of appearing.

The Licensure Committee reviewed and discussed the application for a
permanent medical license of Jeremy Alan Herschler, M.D. After a thorough discussion, Ms.
Hays moved that Dr. Herschler appear before the Licensure Committee at its May 2017 meeting.
Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a
permanent medical license of Bassem Ragheb George, M.D. After a thorough discussion, Dr.
Steele moved that the Committee recommend that the Board accept his medical education as
satisfactorily verified and approve Dr. George for licensure pending his payment of the
mandatory PICF assessment fee based on the following factor: in compliance with Board policy
in regards to verifications required from countries experiencing civil unrest, two of Dr. George’s
classmates who are licensed and practicing in the United States have submitted notarized letters
attesting his attendance at Cairo University. Dr. George has been practicing as a hospitalist in
Pennsylvania since completing his residency in 2012. Ms. Hays seconded the motion, and the
motion carried.
The Licensure Committee reviewed and discussed the application for a permanent medical license of Yahia Homsi, M.D. After a thorough discussion, Ms. Hays moved that Dr. Homsi appear before the Licensure Committee at its May 2017 meeting. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent pediatric license of David Lamont Nielson, M.D. After a thorough discussion, Dr. Steele moved that the Committee recommend that the Board approve Dr. Nielson for licensure. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Codrin Eugene Iacob, M.D. After a thorough discussion, Ms. Hays moved that the Committee recommend that the Board approve Dr. Iacob for licensure pending his payment of the mandatory PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the request submitted by Takashi Murashita, M.D. to modify the practice location of his extraordinary circumstances license to include the location of Camden Clark Medical Center in Parkersburg, WV. Dr. Murashita was approved and issued his license on May 16, 2016, pursuant to West Virginia Code §30-3-10(e), and is currently restricted to the practice of general and advanced cardiothoracic surgery at West Virginia University Hospitals in Morgantown. After a thorough discussion, the Committee determined the request did not provide sufficient evidence for the need to modify the practice location of his license and declined to take action on his request. Dr. Murashita may submit additional information for the Committee’s review if he desires.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Saeed Fatenejad, M.D. After a thorough discussion, Dr. Steele moved that Dr. Fatenejad appear before the Licensure Committee at its May 2017 meeting. Dr. Sheth seconded the motion, and the motion carried.
The Licensure Committee reviewed and discussed the application for reactivation of permanent licensure of Shilpa Arun Kadam, M.D. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board accept the total hours of CME submitted by Dr. Kadam, and approve Dr. Kadam for reactivation of licensure. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of permanent licensure of Daniel Resnick, M.D. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board accept the total hours of CME submitted by Dr. Resnick, and approve Dr. Resnick for reactivation of licensure. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of permanent licensure of Douglas Scott Tice, M.D. After a thorough discussion, Dr. Lakin moved that the Committee recommend to the Board to accept the total hours of CME submitted by Dr. Tice, and approve Dr. Tice for reactivation of licensure. Dr. Duncan seconded the motion, and the motion carried.

At its November 2016 meeting, the Licensure Committee reviewed the application for permanent licensure of Michael Hosny Gabriel, M.D. Dr. Gabriel was requested to appear before the Licensure Committee at its January 2017 meeting. Dr. Gabriel appeared before the Committee in January 2017 in support of his application for a permanent medical license. After a thorough discussion with Dr. Gabriel, it was the consensus of the Licensure Committee that Dr. Gabriel be given the opportunity to withdraw his licensure application. Dr. Gabriel submitted a request to withdraw his application, which was reviewed by the Licensure Committee at its March 2017 meeting. Dr. Duncan moved that the Committee recommend that the Board accept his withdrawal request. Dr. Lakin seconded the motion, and the motion carried.

At its January 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Leon Philip Jacob, M.D. After a thorough discussion, it was the consensus of the Licensure Committee that Dr. Jacob be given the
opportunity to withdraw his application. Dr. Jacob submitted a request to withdraw his application, which was reviewed by the Licensure Committee at its March 2017 meeting. Dr. Duncan moved that the Committee recommend that the Board accept his withdrawal request. Dr. Lakin seconded the motion, and the motion carried.

At its September 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent license of Stephen McNeil Coarsey, M.D. The Licensure Committee requested additional information be provided for its review. At its November 2016 meeting, Dr. Coarsey submitted additional information and his application was recommended for approval pending payment of the mandatory PICF assessment fee. As of the January 2017 meeting Dr. Coarsey had not paid the fee to allow for licensure. The Committee recommended that Dr. Coarsey be notified via certified letter that if the fee remained unpaid his application would be brought before the Committee for action at its March 2017 meeting. Dr. Coarsey responded to the Committee that he does not want to pursue licensure at this time. Dr. Duncan moved that the Committee recommend that the Board accept withdrawal of Dr. Coarsey’s application. Dr. Lakin seconded the motion, and the motion carried.

At its January 2017 meeting the Licensure Committee reviewed and discussed the application for a permanent medical license of Muhammad Asad Mirza, M.D. The Committee recommended that the Board approve Dr. Mirza for licensure pending his payment of the mandatory PICF assessment fee. When Dr. Mirza was notified of the approval of his application and the need to pay the assessment fee he chose to submit a request to withdraw his application. Dr. Duncan moved that the Committee recommend that the Board accept withdrawal of Dr. Mirza’s application. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of James Gordon Cain, M.D. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board accept the total hours of CME submitted by Dr. Cain, and approve Dr. Cain for reactivation of licensure. Ms. Hays seconded the motion, and the motion carried.
The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Kimberly Ann Bruno-de la Mata, M.D. After a thorough discussion, Ms. Hays moved that the Committee recommend that the Board accept the total hours of CME submitted by Dr. Bruno-de la Mata, and approve Dr. Bruno-de la Mata for reactivation of licensure. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Kerren Harry Elder, M.D. After a thorough discussion, Ms. Hays moved that the Committee recommend that the Board approve Dr. Elder for licensure pending his payment of the mandatory PICF assessment fee. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of George Robert Smith, M.D. After a thorough discussion, Ms. Hays moved that the Committee recommend that the Board accept his postgraduate training as satisfactorily verified and approve Dr. Smith for licensure pending payment of the mandatory PICF assessment fee. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Lawrence Alan Cooperstein, M.D. After a thorough discussion, Dr. Sheth moved that the Committee recommend that the Board accept the total hours of CME submitted by Dr. Cooperstein, and approve Dr. Cooperstein for reactivation of licensure. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Chi-Kin Ng, M.D. After a thorough discussion, Dr. Steele moved that the Committee recommend that the Board accept his postgraduate training as satisfactorily verified and approve Dr. Ng for licensure pending payment of the mandatory PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.
The Licensure Committee reviewed and discussed the application for a permanent medical license of Connie Michell Dela'O, M.D. After a thorough discussion, Ms. Hays moved that Dr. Dela’O appear before the Licensure Committee at its May 2017 meeting. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed information on potential modifications to the policy on review of applicant malpractice claims. After a thorough discussion it was determined that no changes were required to the staff’s current practice, and no action was taken by the Committee.

Board staff provided information regarding the current status of the Interstate Medical Licensure Compact’s progress. The West Virginia Board of Medicine is now able to participate in the process of receiving federal criminal background checks, and some Compact member states continue to have issues with the FBI which has delayed implementation of the Compact.

Board staff provided information regarding the progress of health-related bills introduced and pending action during the 2017 Legislative session.

Board staff informed the Licensure Committee that there are four potential applicants for a Limited License to Practice Medicine and Surgery at Certain State Veterans Nursing Home Facilities pursuant to W. Va. Code §30-3-11band 1ICS11. This necessitates the need to develop an application pursuant to this rule. A current Uniform Application for initial medical doctor application and an initial Children’s Summer Camp application were provided for review for drafting the application. Ms. Hays moved that Board staff use the Children’s Summer Camp application as a basis for drafting a Veteran’s Nursing Home Facility License application. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the list of compliant applications, which includes ninety-one (91) initial medical doctor applications, one compliant reactivation of medical doctor application, one compliant podiatrist application. Ms. Hays
moved that the Committee recommend that the Board approve the applicants for licensure and reactivation of licensure. Dr. Duncan seconded the motion and the motion carried.

In addition to the compliant applications noted in the previous paragraph, one compliant application has been submitted except for payment of the PICF assessment fee. Ms. Hays moved that the Committee recommend that the Board approve the application pending payment of the mandatory PICF assessment fee. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee determined by consensus to adjourn, there being no further business.

Mustafa Rahim, M. D.
Chair of the Licensure Committee
APPLICANTS FOR PERMANENT LICENSURE - Physicians

March 13, 2017

Akram, Yasir
Allampati, Sanath Kumar
Anderson, Peter William
Arnone, Vincent John
Astorne, Walter Jorge

Badawi, Mohamad Hayssam
Bagchi, Arindam
Baghshomali, Sanam
Bailey, Lin Hsu
Baralt, Diana Maria
Barhorst, Brian Randall
Barnard, II, John Taylor
Borkon, Matthew Jacob

Chang, Sidney Tan
Chu, Jeffrey Ting-Yuan
Cotoi, Daniel
Crimson, Heidi Ream

DeLong, Peter Ade
Dhumak, Vipal Jayendranath
DiCiro, Dominic Theodore
DiPoce, Jason Marc
Dimachkie, Ziad
Dohar, Sheena Ann

Farjo, Peter David
Fei, Naomi H.
Fogha, Evan Padinga
Forte, Michael J.
Franklin, Mark Nicholas

Garber, Alan Craig
Goel, Harsh
Goldberg, Richard Miles
Goldhardt, II, Timothy Paul
Goldstein, Baruch Bernard
Gumber, Ramnika Iqbal Singh
Harris, Benjamin Logan
Hatfield, Nathan Randall
Hess, Clayton Burnett
Hu, Lulin
Huff, Nicholas Owen

Inkollu, Sashi Kiran
Ivy, Cathleen Ann

Justice, Charles Matthew

Kaseer, Bahaa Aldeen
Klein, Jonathan Tzvi
Koff, Matthew Douglas
Kowalska, Agnieszka
Kubiczek, Piotr Antoni

Labus, Andrea Michelle
Laird, Dennis
LoDico, Matthew Jean-Paul

Malphrus, Amy Denise
Mandadi, Subhadra
Miller, Samuel Douglas
Minc, Samantha Danielle
Mor, Nadav
Moreland, Margaret Wynne

Nadasdy, Tibor
Narayan, Dwayne Avanish
Naumova, Nadia Nikolaeva

Panbehi, Bahram
Patel, Karina
Patel, Pratikkumar Popatlal
Potolicchio, Jr., Samuel Joseph
Pulluru, Harish

APPLICANTS FOR PERMANENT LICENSURE – Physicians cont.
Raheja, Divisha
Rajagopalan, Swarma
Rassias, Athos John
Reddy, Sirisha Pasham
Renck, Gregory Richard

Santos, Arvin Lopez
Satoskar, Anjali Abhay
Sengupta, Partho Pratim
Shang, Eric Kouwei
Shao, Charles Yanping
Shives, Lisa J.
Shulman, Joshua Alexander
Singh, Richa
Snodgrass, Natalie Jean
Stern, Augustus Graham

Tanner, Jerry Wayne
Tanner, Stacy
Tarakji, Mark Elias
Testani, Jr., Mario
Thompson, III, Alvin Dewitt
Tretter, Justin Thomas

Valavoor, Shahul Hameed
Vargo, IV, John Austin

Wagner, Richard Otto
Walker, Barbara Alice
Wei, Kavita Kakkad
West, Fay Bernadette
Wynn, Tanya Renee

**REACTIVATION APPLICANTS WHOSE LICENSE HAS NOT BEEN ACTIVE FOR MORE THAN ONE YEAR - Physician**

Cummings, Kelly Frances
de la Mata, Mariano
Mercer, Christopher William
APPLICANT FOR PERMANENT LICENSURE – Podiatrist

Michael, Jennifer Erin

APPLICANT FOR PERMANENT LICENSURE – Physician

Approve pending receipt of PICF Assessment Fee

Sinha, Rahul Prasad
WEST VIRGINIA BOARD OF MEDICINE  
LICENSURE COMMITTEE AGENDA  
May 6, 2017  

CALL TO ORDER  

LICENSURE COMMITTEE REVIEW AND ACTION  

Minutes of March 11, 2017 meeting  

APPEARANCES  

1. Herschler, Jeremy Alan  11:00 a.m.  
2. Fatenejad, Saeed  11:15 a.m.  
3. Dela’o, Connie Michell  11:30 a.m.  
4. Homsi, Yahia  11:45 a.m.  
5. Ad, Niv  12:45 p.m.  

LUNCH BREAK  

DISCUSSIONS  

6. Mustafa, Bisher Oscar-Shucri  
7. Tobin, Wayne Ernest  
8. Brouillette, Jeremy W.  
9. Dutt, Anil  
10. Hayanga, Jeremiah William  
11. Ahmed-Amr, Hesham Mohamed  
12. Carr, Michele Marie  
13. Link, Gianna Joanne  
14. Mousa, Emad Youhanna  
15. Menke, Nathan Benjamin  
16. Al-Omar, Osama  
17. Applications with alleged invalid notarizations  
18. Update on Interstate Medical Licensure Status  
19. Report on 2017 Legislative Session  
20. Update on 2017 Medical Doctor and Podiatrist Renewals  
21. Sinha, Rahul Prasad – add-on  
22. Young, Susan Ilene – add-on  
23. Brown, Charles Michael – add-on  
24. Securo, Anthony Todde – add-on  

LICENSURE COMMITTEE ACTIONS AND RECOMMENDATIONS  

ADJOURNMENT
continued

WEST VIRGINIA BOARD OF MEDICINE
LICENSURE COMMITTEE AGENDA ADD-ONS

May 6, 2017

DISCUSSIONS cont.
A meeting of the West Virginia Board of Medicine Licensure Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 6th day of May, 2017, at 10:30 a.m.

The following Committee members were present:

- Mustafa Rahim, M.D., Chair
- Harry E. Duncan, Jr., M.D.
- Carrie Lakin, D.P.M.
- Ashish P. Sheth, M.D.
- Wes Steele, M.D.

The following Committee member was absent:

- Beth Hays, M.A.

The following Staff members were present:

- Mark A. Spangler, M.A.
- Jamie S. Alley, Esq.
- Sheree J. Thompson

Dr. Rahim called the meeting to order. A motion was made by Dr. Lakin, and seconded by Dr. Steele, to approve the minutes of the March 11, 2017, Licensure Committee meeting. The motion carried.

At its March 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Jeremy Alan Herschler, M.D. Dr. Herschler was requested to appear before the Licensure Committee at its May 2017 meeting. Dr. Herschler appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Herschler, Dr. Sheth moved that the Committee recommend that the Board approve Dr. Herschler for licensure pending his payment of the mandatory PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.
At its March 2017 meeting, the Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Saeed Fatenejad, M.D. Dr. Fatenejad was requested to appear before the Committee at its May 2017 meeting, however, was unable to meet with the Committee. The Committee requested his appearance at its July 2017 meeting.

At its March 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Connie Michell DeLa’O, M.D. Dr. DeLa’O was requested to appear before the Licensure Committee at its May 2017 meeting. Dr. DeLa’O appeared before the Licensure Committee in support of her application for a permanent medical license. After a thorough discussion with Dr. DeLa’O, Dr. Lakin moved that the Committee recommend that the Board approve Dr. DeLa’O for licensure pending: (1) satisfactory receipt of a copy of a letter of recommendation letter from Conemaugh Memorial Medical Center Surgery Program Director Russell Dumire, M.D. that is addressed to the Surgical Critical Care Fellowship program Vidant Medical Center of East Carolina University; and (2) payment of the mandatory PICF assessment fee. Dr. Steele seconded the motion, and the motion carried.

At its March 2017 meeting the Licensure Committee reviewed and discussed the application for a permanent medical license of Yahia Homsi, M.D. Dr. Homsi was requested to appear before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Homsi, Dr. Steele moved that the Committee recommend that the Board approve Dr. Homsi for licensure. Dr. Duncan seconded the motion, and the motion carried.

At its January 2017 meeting the Licensure Committee reviewed and discussed the application for a medical school faculty license of Niv Ad, M.D. Dr. Ad was requested to appear before the Committee and was unable to appear at the March or May 2017 meetings. The Committee requested his appearance at its July 2017 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Bisher Oscar-Chucr Mustafa, M.D. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board approve Dr. Mustafa for licensure. Dr. Steele seconded the motion, and the motion carried.
The Licensure Committee reviewed and discussed the application for a permanent medical license of Wayne Ernest Tobin, M.D. After a thorough discussion, Dr. Steele moved that Dr. Tobin appear before the Licensure Committee at its July 2017 meeting. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent pediatric physician license of Jeremy W. Brouillette, D.P.M. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board approve Dr. Brouillette for licensure. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Anil Dutt, M.D. After a thorough discussion, Dr. Lakin moved that Dr. Dutt appear before the Licensure Committee at its July 2017 meeting. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Jeremiah William Hayanga, M.D. After a thorough discussion, Dr. Steele moved that Dr. Hayanga be notified that he does not meet the current qualifications for licensure eligibility and offer him the opportunity to withdraw his application. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Hesham Mohamed Ahmed-Amr, M.D. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board accept his medical education as satisfactorily verified and approve Dr. Ahmed-Amr for licensure pending his payment of the mandatory PICF assessment fee based on the following factors: Dr. Ahmed-Amr is unable to request confirmation from two classmates who are licensed and practicing in the United States as an accepted alternative verification per Board policy for countries in civil unrest; and the two state Boards where he holds licensure are unable to provide evidence of receipt of primary source verification of completion of his medical school education from Zagazig University in Egypt in 1990. Dr. Ahmed-Amr has lifetime certification by the American Board of Radiology and has practiced at UPMC in Pittsburgh since completing his training in December 2002. Dr. Sheth seconded the motion, and the motion carried.
The Licensure Committee reviewed and discussed the application for a permanent medical license of Michele Marie Carr, M.D. After a thorough discussion, Dr. Sheth moved that the Committee recommend that the Board approve Dr. Carr for licensure pursuant to to W.VA. Code R. §11-1A-4.8(b) based upon five years of postgraduate training, including 2-year fellowship in Otolaryngology in SUNY Buffalo, NY and her ABMS member board certification by the American Board of Otolaryngology and pending her payment of the mandatory PICF assessment fee. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reinstatement of the permanent medical license of Gianna Joanne Link, M.D. After a thorough discussion, Dr. Duncan moved that Dr. Link appear before the Committee at its July 2017 meeting. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for change of status from inactive to active for the permanent license of Emad Youhanna Mousa, M.D. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board accept the evidence of CME completion submitted by Dr. Mousa as satisfactory, and approve Dr. Mousa for activation of licensure. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for change of status from inactive to active for the permanent license of Nathan Benjamin Menke, M.D. After a thorough discussion, Dr. Duncan moved that the Committee recommend that the Board accept the evidence of CME completion submitted by Dr. Menke as satisfactory, and approve Dr. Menke for activation of licensure. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed two requests submitted by Osama Al-Omar, M.D. to modify the practice location of his medical school faculty license to potentially include a) the location of CAMC in Charleston, WV; and/or b) a faculty appointment with Marshall University in Huntington, WV. Dr. Al-Omar was approved and issued his medical school faculty license on July 9, 2012, and is currently practicing at the WVU Department of Urology at West Virginia University Hospitals in Morgantown. After a thorough discussion, the Committee determined that Dr. Al-Omar be notified that a) his practice with CAMC in Charleston
would have to also include a faculty appointment at that location; and b) if requesting medical school faculty licensure based on an additional faculty appointment with Marshall University, a new application would need to be submitted for a separate license.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Ilene Susan Young, M.D. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board accept her medical education as satisfactorily verified and approve Dr. Young for licensure pending her payment of the mandatory PICF assessment fee based on the following factors: Dr. Young began her medical school education at Central America Health Sciences University in Belize and the school has not responded to FCVS for primary source verification; and her attendance at this school is included as transfer credits in her transcript from her graduating school of Windsor University which has been verified. Dr. Young has certification by the American Board of Family Medicine and is currently completing a fellowship in emergency medicine. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent license of Charles Michael Brown, M.D. After a thorough discussion, Dr. Steele moved that the Committee recommend that the Board approve Dr. Brown for licensure pending his payment of the mandatory PICF assessment fee. Dr. Lakin seconded the motion, and the motion carried.

At its March 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent license of Rahul Prasad Sinha, M.D. Dr. Sinha was recommended for approval of licensure pending his payment of the mandatory PICF assessment fee. As of the May 2017 meeting Dr. Sinha had not paid the fee to allow for licensure. Dr. Lakin moved that the Committee recommend that Dr. Sinha remain approved for licensure pending his payment of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Anthony Todde Securo, M.D. After a thorough discussion, Dr. Lakin moved that Dr. Securo appear before the Licensure Committee at its July 2017 meeting. Dr. Steele seconded the motion, and the motion carried.
The Licensure Committee reviewed and discussed a group of applications that have been submitted through a telemedicine service in South Dakota. One of the applicants using this company received a letter of warning from another State Board in 2016 for knowingly submitting an application that was not signed in the presence of the Notary Public. This applicant submitted an affidavit to the WVBOM that was also notarized in South Dakota by the service’s staff while he still resides in Pennsylvania. Good Moral Character statements submitted on the applicant’s behalf were also notarized in South Dakota although the colleagues are from other states. The company’s staff has also submitted notarized affidavits to FCVS as evidenced in the FCVS profiles. After a thorough discussion, Dr. Lakin moved that the Committee recommend the following steps be taken: the applicants with service staff notarization of their documents be required to submit appropriately notarized documents; that the Attorney General’s office in South Dakota and FCVS be notified of the telemedicine services notarization practices and that Ever Luizaga Coca, M.D. appear before the Committee at its July 2017 meeting. Dr. Steele seconded the motion, and the motion carried.

Board staff provided information regarding the current status of the Interstate Medical Licensure Compact’s progress. The West Virginia Board of Medicine is now able to participate in the process of receiving federal criminal background checks, and some Compact member states continue to have issues with the FBI which has delayed implementation of the Compact.

Information regarding the progress of health-related bills introduced and pending action during the 2017 Legislative session was provided to the Committee.

Board staff provided information regarding the 2017 licensure renewal for all podiatric physicians; medical doctors with the last names beginning with M – Z; and any associated drug dispensing registrations. These licensees and all PLLCs are due to renew by June 30, 2017, to avoid expiration of their license or authorizations. Prior to the conclusion of the May meeting there are 3563 medical doctors, 126 podiatric physicians license and 147 PLLCs. Renewal began on May 3, 2017, with paper applications being available. Staff indicated that it was working with the Board’s vendor to bring at least some renewal processes online in the near future.

The Licensure Committee reviewed and discussed the list of compliant applications, which includes sixty-four (64) initial medical doctor applications and one compliant
podiatrist application. Dr. Lakin moved that the Committee recommend that the Board approve the applicants for licensure. Dr. Duncan seconded the motion and the motion carried.

In addition to the compliant applications noted in the previous paragraph, one compliant application has been submitted by Rahul Prasad Sinha M.D. and approved for licensure at the March meeting pending payment of the PICF assessment fee by the May 2017 meeting, which did not occur. Ms. Hays moved that the Committee recommend that the Board approve Dr. Sinha for licensure pending payment of the mandatory PICF assessment fee. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee determined by consensus to adjourn, there being no further business.

Mustafa Rahim, M. D.
Chair of the Licensure Committee

ADJOURNMENT
APPLICANTS FOR PERMANENT LICENSURE - Physicians

May 8, 2017

Ahmad, Zeeshan
Ahsan, Afiah Anis
Anand, Abhishek
Azzuqa, Abeer Aref

Bailey, Jason James
Benado, David Nissim
Berkson, David Arnold
Bodenhamer, John Richardson
Boman, Lars
Brandmeir, Nicholas James

Campsey, David Michael
Cassis, Paul Norman
Catena, William Joseph
Chaffin, Samantha Leigh
Chaudhuri, Kallol
Chen, Charles Bo
Chigurupati, Naga Sambhavi
Cook, Johanna Lucy

Deskins, Christopher Russell
DeVience, Eva Xiaoyun ?
Dionne, Christopher Michael

Fagin, Colby Lynn
Farooki, Sana

Goodman, Brian Michael
Gorchynsky, Andrew Michael
Grabo, Jr., Daniel John
Gregg, Herbert Eldon
Grundmann, Nicolas Krasovec

Hahn, Bethani
Haider, Adnan
Hales, Charles Farnsworth
Huff, Caleb Richard
Hundley, Nathan Lee

Ilyas, Mahwish Yasmeen
Indramohan, PavithraMohan

APPLICANT FOR PERMANENT LICENSURE – Podiatrist

Abbasi, Amir
Jacobs, John Paul
Jahed, Kiarash

Kasenchak, James Eric
Kaul, Aaradhana
Kaura, Amit
Kennis, Jack David
Khalil, Elie
Klenzak, Scott Michael
Kummet, Thomas Dale

Leventhal, Andrew Robert
Lidstone, Erich Alexander
Lim, Tobin
Lounder, Dana Tiberio

Martin, Erica Victoria
McArthur, John Daniel
Miller, Sara Mucko
Moughrabieh, M. Anas

Okhumale, Paul Imoudu

Patel, Rita Ramesh
Przybysz, III, William Stephen

Reich, Irwin Martin

Settles, II, Jeffery Dirk
Sheshadri, Navaneetha Krishnan
Skandamis, George Constantinos
Swartz, Barbara Elizabeth

Tariq, Fatima
Tummala, Mounika

Vaughan, II, Freddie William

Wu, Xinyu
REACTIVATION APPLICANT WHOSE LICENSE HAS NOT BEEN ACTIVE FOR MORE THAN ONE YEAR - Physician

APPLICANT FOR PERMANENT LICENSURE – Physician
Approve pending receipt of PICF Assessment Fee
Legislative Committee
Meeting Agendas and Minutes
CALL TO ORDER

Approval of Minutes – May 15, 2016

Agenda Items:

• 2016 Regular Legislative Session
  o House Bill 4463 – Telemedicine

• 2016 Special Legislative Session
  o Senate Bill 1017 – authorizing miscellaneous agencies and boards to promulgate legislative rules

• Legislative Rulemaking
  o 11CSR1A – Licensing and Disciplinary Procedures: Physicians; Podiatrists
  o 11CSR1B – Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants
  o 11CSR5 – Board of Medicine Rules for Dispensing of Legend Drugs by Physicians and Podiatrists

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Legislative Committee Minutes
July 10, 2016

A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 10\textsuperscript{th} day of July, 2016, at 10:15 a.m.

The following Committee members were present:

Beth Hays, M.A., Chair
Reverend O. Richard Bowyer
Ahmed Faheem, M.D.

The following Committee member was absent:

K. Dean Wright, P.A.-C.

The following Staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Jamie C. Frame

The following Board member was present as a guest:

Rahul Gupta, M.D., M.P.H.

Ms. Hays called the meeting to order. Dr. Faheem moved that the minutes of the May 15, 2016 meeting be approved. Reverend Bowyer seconded, and the motion carried.

Mr. Knittle reported that \textbf{House Bill 4463}, permitting the practice of telemedicine, was passed during the 2016 legislative session and became effective on June 9, 2016. This law prohibits practitioners from prescribing Schedule II controlled substances to patients solely through the utilization of telemedicine technologies. In advance of today’s meeting, Committee members received written correspondence submitted by Kari B. Law, M.D., expressing concern related to the limitations that this law will have with regard to
prescribing amphetamines to minors, particularly the rural child and adolescent psychiatric population. Gary Murdock, Vice President of External Relations for West Virginia University, addressed the Committee and voiced concerns regarding the limitations that this law presents with regard to the inability to prescribe schedule II controlled substances solely utilizing telemedicine technologies. He noted that this limitation is particularly burdensome for individuals located in rural areas of the state where access to physicians is limited. Following discussion, Mr. Knittle reported that despite concerns, the telemedicine statute cannot be amended prior to the 2017 legislative session.

Mr. Knittle reported that on June 14, 2016, during a special legislative session, Senate Bill 1017, authorizing the promulgation of legislative rules by miscellaneous boards and commissions, was passed. This bill included the Board’s rule relating to a license to practice medicine and/or surgery at certain state veteran’s nursing home facilities. To date, the Board has not received any applications to practice medicine and/or surgery pursuant to this rule. The bill also directs the Board to promulgate an amended rule 11CSR1A, Licensing and Disciplinary Procedures: Physicians; Podiatrists, to include binge eating disorder to the list of criteria for which a physician or podiatrist may prescribe, order, dispense, administer, supply, sell or give any drug which is an amphetamine or sympathomimetic amine drug and a compound designated as a Schedule II controlled substance. The Board has proactively addressed this in its rulemaking earlier this summer.

Mr. Knittle reported that at its May meeting, the Board authorized staff to move forward with the promulgation of 11CSR1A, Licensing and Disciplinary Procedures; Physicians; Podiatrists. Board staff filed a Notice of Comment Period on a Proposed Rule with the Secretary of State’s office, and received two comments with regard to this rule. The first comment received was on behalf of Shire Pharmaceuticals, and expressed support of the proposed revision to 11CSR1A, particularly the addition of binge eating disorder to the list of conditions for which a physician or podiatrist may prescribe, order, dispense, administer, supply, sell or give any drug which is an amphetamine or sympathomimetic amine drug and a compound designated as a Schedule II controlled substance. The second
comment was received on behalf of the West Virginia Podiatric Medical Association, seeking to update the terminology relating to those who practice podiatry. Specifically, the comment seeks to change the term “podiatry” to “the practice of podiatric medicine and surgery” and the term “podiatrist” to “podiatric physician and surgeon” throughout the rule. Following discussion, Reverend Bowyer moved that terminology amendments proposed by the Podiatric Medical Association be incorporated. Reverend Bowyer further moved that the Committee recommend that the Board approve the above-mentioned modifications to 11CSR1A, and authorize Board staff to move forward with the agency approved filing of this rule. Dr. Faheem seconded, and the motion carried.

Mr. Knittle reported that at its May 16, 2016 meeting, the Board authorized staff to move forward with the promulgation of the amended rule 11CSR1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants. Board staff filed Notice of a Comment Period on a Proposed Rule with the Secretary of State’s Office. No comments were received regarding the proposed amendments to this rule. Reverend Bowyer moved that the Committee recommend that the Board authorize staff to move forward with the agency approved filing of this rule. Dr. Faheem seconded, and the motion carried.

Mr. Knittle reported that 11CSR5, Dispensing of Legend Drugs by Physicians and Podiatrists, has not been amended since 1989, and is antiquated in terms of language. Over the past year, Board staff has worked to rewrite the rule. Committee members were provided with a copy of the proposed revision of 11CSR5 in advance of today’s meeting. The proposed amendments to this rule are intended to: (1) modernize the language of the rule, including the labeling and packaging requirements for drugs dispensed by a licensee of the Board; (2) establish that practitioners are only required to register with the Board if they administer or dispense controlled substances; (3) clarify, modernize and synchronize the application process for practitioners who seek to register as controlled substance dispensing practitioners; (4) incorporate eligibility requirements for registration as a controlled substance dispensing practitioner, and guidelines for the termination of such
registrations; (5) establish security protocols for practitioners who administer or dispense prescription drugs, including enhanced security requirements for those who dispense controlled substances; (6) clarify the general practice requirements which apply to all licensees who are drug dispensing practitioners; (7) clarify when a practitioner may accept unused prescription drugs from a patient for disposal; (8) clarify the duty of a dispensing practitioner to cooperate with Board inspections and audits of a practitioner’s dispensing practice and practice sites. Mr. Wright was unable to attend today’s meeting; however, he submitted proposed modifications with regard to wording, which were relayed to the Committee by Ms. Alley. Following discussion, Reverend Bowyer moved that board staff incorporate the following changes:

1. Change the term “his or her own patients” to “a patient under the practitioner’s care” or “under his or her care” throughout the proposed rule;
2. Globally change the term “physician” “podiatric physician” and/or “physician assistant” to “practitioner”;
3. Add the words “who is a controlled substance registered dispenser” to the end of the first sentence in 3.2.;
4. Change the word “her” to “his or her” in 3.3.c.;
5. Add the words “and in keeping with approved use of the medication” to the end of the sentence in 5.5.;
6. Change “Prior to dispensing a prescription” to “Prior to dispensing a legend drug” in 5.8.;
7. Change “prior to having the prescription filled” to “prior to the medication being dispensed” in 5.10.; and
8. Change “quantity of legend drugs which exceeds the quantity” to “quantity or classification of legend drugs which exceeds the quantity or classification” in 5.12.;

Reverend Bowyer further moved that the Committee recommend that the Board accept the above-mentioned modifications, and authorize staff to move forward with filing the proposed rule and Notice of a Comment Period with the Secretary of State’s Office. Dr. Faheem seconded, and the motion carried.
There being no further business, the meeting adjourned.

[Signature]

Beth Hays, M.A.
Chair of the Legislative Committee
CALL TO ORDER

Approval of Minutes – July 10, 2016

Agenda Items:

- Update Regarding Board Rules
  - 11 CSR 1A
  - 11 CSR 1B
  - 11 CSR 5

- Board of Medicine Comments Submitted in Response the RN Board’s Proposed Revision to 19 CSR 8, Limited Prescriptive Authority for Nurses in Advanced Practice

- Potential Upcoming Legislative Matters
  - Amendments to §30-3-13a (Telemedicine)
  - Marijuana Legalization
  - Statewide Drug Repository Program
  - Amendment to 11 CSR 5 Regarding Schedule Vs
  - Board Restructuring
  - Sweeping of Special Revenue Accounts

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 13th day of November, 2016, at 9:00 a.m.

The following Committee members were present:

Reverend O. Richard Bowyer  
Ahmed Faheem, M.D., Acting Chair  
K. Dean Wright, P.A.-C.

The following Committee member was absent:

Beth Hays, M.A., Chair

The following Staff members were present:

Robert C. Knittle  
Jamie S. Alley, Esq.  
Jamie C. Frame

In the absence of Ms. Hays, the meeting was called to order and chaired by Dr. Faheem. Mr. Wright moved that the minutes of the July 10, 2016 meeting be approved. Reverend Bowyer seconded, and the motion carried.

Mr. Knittle reported that the Board’s proposed legislative rules 11CSR1A, Licensing and Disciplinary Procedures: Physicians; Podiatric Physicians and Surgeons, 11CSR1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants, and 11CSR5, Board of Medicine Rules for Dispensing of Prescription Drugs by Practitioners, have been promulgated, undergone a public comment period, and have been reviewed by the Legislative Rule-Making Review Committee. Non-substantive
changes were made, and a modified version of each rule has been submitted to the Secretary of State’s Office.

Mr. Knittle reported that on behalf of the Board and in response to the West Virginia Board of Examiners for Registered Professional Nurses’ proposed revision of 19 CSR 8, Limited Prescriptive Authority for Nurses in Advances Care, he submitted comments regarding concerns in lifting the limitation on the prescribing of benzodiazepines. The nursing board responded that “there is no evidence full prescribing privileges will result in inappropriate prescribing or an increase in drug use.” The Committee will continue to monitor and express ongoing concerns regarding this revision during the upcoming legislative session.

Mr. Knittle reported that the following topics may be addressed during the 2017 legislative session: amendments to §30-3-13a. Telemedicine Practice; Requirements; Exceptions; Definitions; Rule-Making; marijuana legalization; establishment of a statewide drug repository program; board restructuring, and sweeping of special revenue accounts.

Dr. Faheem reported that the Board may need to hire a part-time employee to assist with legislative matters.

There being no further business, Reverend Bowyer moved that the meeting be adjourned. Mr. Wright seconded, and the motion carried.

ADJOURNMENT

Beth Hays, M.A.
Chair of the Legislative Committee
CALL TO ORDER

Approval of Minutes – November 13, 2016

Agenda Items:

- Meetings of the Legislative Committee during the 2017 Legislative Session
  - Thursday, February 23, 2017
  - Sunday, March 12, 2017
  - Thursday, March 23, 2017
  - Tuesday, April 4, 2017

- Legislative Update
  - 2017 Regular Session
    - January 11, 2017 – Opening Day
    - February 8, 2017 – First Day of the Session
    - February 27, 2017 – Last Day to Introduce Bills in the Senate
    - March 20, 2017 – Last Day to Introduce Bills in the House
    - March 26, 2017 Bills Due Out of the Committees in House of Origin to Ensure Three Full Days for Readings
    - March 29, 2017 – Last Day to Consider Bill on Third Reading in House of Origin
    - April 8, 2017 – Adjournment

- 360° Meeting with State and Federal Law Enforcement / Authorities
  - W. Va. Code §30-1-5(c)
  - W. Va. Code §30-3-14(k)
  - 11CSR1A

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 8th day of January, 2017, at 10:00 a.m.

The following Committee members were present:

Beth Hays, M.A., Chair
Reverend O. Richard Bowyer
Ahmed Faheem, M.D.
K. Dean Wright, P.A.-C.

The following Board members were present as guests:

Carrie Lakin, D.P.M.
David Mullins, M.D.
Wes Steele, M.D.

The following Staff members were present:

Jamie S. Alley, Esq.
Jamie C. Frame

The following guests was present:

Mark Spangler
Andy Wessels

Ms. Hays called the meeting to order and welcomed Dr. Lakin, Dr. Mullins and Dr. Steele to the meeting as newly appointed board members. Reverend Bowyer moved that the minutes of the November 13, 2016 meeting be approved. Dr. Faheem seconded, and the motion carried.
The Legislative Committee reviewed the following proposed interim meeting dates:

- Thursday, February 23, 2017  5:30 p.m.
- Sunday, March 12, 2017       10:00 a.m.
- Thursday, March 23, 2017     5:30 p.m.
- Tuesday, April 4, 2017       5:30 p.m.

Mr. Wright moved that the proposed interim meeting dates be approved. Reverend Bowyer seconded, and the motion carried. Dr. Faheem moved that the Committee recommend that the Board grant the Committee authority to act on behalf of the Board as necessary to respond to legislative matters, at these meetings and any other special meetings which may be necessary, during the 2017 legislative session. Mr. Wright seconded, and the motion carried.

Ms. Alley reported to the Committee that February 8, 2017 is the first day of the 2017 legislative session. The regular session is scheduled to adjourn on April 8, 2017. A copy of the 2017 West Virginia legislative calendar was made available to all Committee members.

Ms. Alley reported that there will likely be legislative efforts during the 2017 session regarding the structuring of Chapter 30 Boards.

Ms. Alley reported to the Committee that prior to his retirement, Mr. Knittle and Diana Shepard, Executive Director of the West Virginia Board of Osteopathic Medicine, met with Delegate Howell and legislative staff to discuss, in part, the Atlanta Journal-Constitution series of articles on state responses to physician sexual misconduct. One item discussed was public confusion regarding which practitioners are licensed by the Board of Medicine as opposed to other Boards, including the Board of Osteopathic Medicine. As a result of this meeting, and in an effort to better assist the public in obtaining information about their healthcare practitioners, the Board of Medicine has modified our homepage to
specify the categories of licenses and certificates that are issued by our Board. Additionally, the Board’s homepage provides a link to the West Virginia Board of Osteopathic Medicine website to facilitate access. Delegate Howell was notified of this modification, and he was pleased with the Board’s timely response to this concern. The current statutory schemes establishing the time frame for investigating and resolving complaints, summary disciplinary proceedings and the ability to permanently revoke a license, as set forth in W. Va. Code §30-1-5(c) and W. Va. Code §30-3-14(k), were also discussed. Delegate Howell and legislative staff were supportive of the Board of Medicine’s proposed language in 11 CSR 1A relating to confidentiality of the complaint and investigation process as well as the ability to cooperate with other state and federal law enforcement agencies. No action was taken with regard to these items, but any or all of these items may be the subject of legislation during the 2017 legislative session.

Dr. Challa joined the meeting as Mr. Wessel’s reported to the Committee that the following topics may be addressed during the 2017 legislative session: sweeping of special revenue accounts, statewide drug repository program; and amendments to telemedicine legislation. Mr. Wright added that the West Virginia Association of Physician Assistants may introduce legislation relating to physician assistant during the upcoming legislative session.

There being no further business, Dr. Faheem moved that the meeting be adjourned. Reverend Bowyer seconded, and the motion carried.

Beth Hays, M.A.
Chair of the Legislative Committee
CALL TO ORDER

AGENDA ITEMS

• **Update on Board of Medicine Bills**
  - **SB 129 and HB 2264** – 11 CSR 1A – Licensing and disciplinary procedures for physicians and podiatrists
  - **SB 130 and HB 2265** – 11 CSR 1B – Licensure, disciplinary and complaint procedures, and continuing education, physician assistants
  - **SB 131 and HB 2266** – 11 CSR 5 – Dispensing of prescription drugs by practitioners

• **Introduced Bills**
  - **SB 4** – Allowing licensed professionals donate time to care of indigent and needy in a clinical setting
  - **SB 149 and HB 2282** – RN rule relating to limited prescriptive authority for advance practice registered nurses
  - **SB 175 and HB 2301** – Relating to direct primary care
  - **SB 253** – Relating to licensing requirements for physicians and osteopathic physicians in WV
  - **SB 269 and HB 2446** – Requiring all executive branch agencies maintain website with specific information
  - **SB 347** – Relating to the modernization of the Physician Assistant Practice Act
  - **HB 2165** – Relating to out of state physicians and surgeons traveling with sports teams within this state
  - **HB 2327** – Protecting consumers from surprise bills by health care providers
  - **HB 2373** – Authorizing school bus drivers trained in administration of epinephrine auto-injectors to administer auto-injectors
  - **HB 2423** – Relating to the criminal offense of therapeutic deception
  - **HB 2502** – Relating to reciprocity of occupational license with other states
  - **HB 2509** – Relating to the practice of telemedicine
  - **HB 2538** – Relating to the licensure of physician assistants
  - **HB 2540** – Permitting a person to practice certain professions for a limited time for a charitable function
• New Bills Introduced after February 17, 2017

- Anticipated Legislative Topics
  - Telemedicine
  - Professional Board structure, consolidation and termination
  - Special revenue bills and appropriations

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 23rd day of February, 2017, at 5:30 p.m.

The following Committee members attended the meeting via teleconference:

Beth Hays, M.A., Chair
Reverend O. Richard Bowyer
Ahmed Faheem, M.D.
David A. Mullins, M.D.
K. Dean Wright, P.A.-C.

The following Staff members were present:

Mark A. Spangler
Jamie S. Alley, Esq.
Jamie C. Frame

The following consultant attended the meeting via teleconference:

Andy Wessels

Ms. Hays called the meeting to order. Mr. Spangler reported to the Committee that the following Board of Medicine legislative rule bills have been introduced, and are single referenced to Senate Judiciary Committee: (1) Senate Bill 129, relating to the licensing and disciplinary procedures for physicians and podiatrists; (2) Senate Bill 130, relating to licensure, disciplinary and complaint procedures, and continuing education, physician assistants; and (3) Senate Bill 131, dispensing of prescription drugs by practitioners. There has been no activity with regard to these bills since introduction.
Mr. Spangler reported to the Committee that the following Board of Medicine legislative rule bills have been introduced, and have passed House Health and Human Resources Committee with a technical amendment to the sunset provision language for rule uniformity: (1) **House Bill 2264**, relating to the licensing and disciplinary procedures for physicians and podiatrists; (2) **House Bill 2265**, relating to licensure, disciplinary and complaint procedures, and continuing education, physician assistants; and (3) **House Bill 2266**, dispensing of prescription drugs by practitioners. Each of these bills now move to House Judiciary Committee.

Mr. Spangler reported that **Senate Bill 4**, allowing licensed professionals to donate time to care for indigent and needy in a clinical setting, has been introduced. As introduced, this bill modifies §30-3-10(a) to permit a physician to obtain up to ten continuing medical education hours in exchange for providing volunteer medical services to eligible indigent or needy patients at a 1:1 hour ratio. This bill was on Senate Health and Human Resources agenda for today, February 23, 2017, and a Committee Substitute was presented; eliminating the continuing medical education component. The Committee Substitute now moves to the Senate Judiciary Committee.

Ms. Alley reported that **Senate Bill 149** and **House Bill 2282**, both relating to the prescriptive authority of Advance Practice Registered Nurses (APRNs), have been introduced. These bills are identical to the emergency rule currently in place, which authorizes APRNs to prescribe a 30 day supply of Schedule III medications without a refill. Senate Bill 149 is single referenced to Senate Judiciary Committee. There has not been any action taken with regard to Senate Bill 149 since introduction. House Bill 2282 has passed House Health and Human Resources Committee with a technical amendment to the sunset provision language for rule uniformity, and now moves to House Judiciary Committee.

Ms. Alley reported that **Senate Bill 175** and **House Bill 2301**, both relating to direct primary care, have been introduced. These bills permit agreements for direct
primary care with an individual or other legal entity authorized to provide primary care services for payment by the patient without using insurance. The bills provide that a direct primary care membership agreement is not considered insurance and that a direct primary care provider/program is not required to obtain certain credentials or licensing. The bills detail requirements for a direct primary care membership agreement. No action has been taken with regard to Senate Bill 175 since introduction. House Bill 2301 has passed House Health and Human Resources Committee and House Judiciary Committee with floor amendments adding additional boards (optometry, dental, chiropractic) into the bill. The bill includes rule-making authority for the West Virginia Board of Medicine and other boards. The amended bill has been referred to the Senate Health and Human Resources Committee.

Mr. Spangler reported that Senate Bill 253, relating to licensing requirements for physicians and osteopathic physicians in West Virginia, has been introduced. This bill modifies the provision of the Medical Practice Act which requires applicants to demonstrate an ability to communicate in English. It would require the Board to apply the English communication requirement liberally, in a manner most favorable to the applicant, and establishes that English language proficiency should not be the sole or primary determining factor in licensing. This language is consistent with the Board’s current practice. This bill is single referenced to Senate Government Organization Committee, and there has been no activity with regard to this bill since introduction.

Mr. Spangler reported that Senate Bill 269 and House Bill 2446, requiring all executive branch agencies maintain a website with specific information, have been introduced. These bills incorporate specific requirements regarding what must be published on state agency websites, including organizational charts, meeting minutes, all agency forms, and Frequency Asked Questions (FAQs). There has been no activity with regard to these bills since introduction.
Mr. Spangler reported on Senate Bill 347, relating to modernization of the Physician Assistant Practice Act. This bill modifies various provisions of the Physician Assistant Practice Act, including adding a second physician assistant member to the Board of Medicine, changing the term supervising to collaborating, modifying prescriptive authority, removing the requirement that licensees be NCCPA certified at renewal, altering the manner in which physician assistants are reimbursed, and granting global signature authority. The Senate Health and Human Resources Committee introduced a Committee Substitute today, February 23, 2017, which deletes the proposed prescriptive authority in the bill and replaces it with language identical to that of Advance Practice Registered Nurses. The bill now moves to the Senate floor. Board staff will continue to monitor this bill.

Ms. Alley reported that House Bill 2165, relating to out of state physicians and surgeons traveling with sports teams within this state, has been introduced. This bill creates limited authorization for an out of state physician to provide care for a traveling sports team in West Virginia and covers both allopathic and osteopathic physicians. This exception is very similar to the language which is currently found in §30-3-13. There has been no activity with regard to this bill since introduction.

Ms. Alley reported on House Bill 2327, protecting consumers from surprise bills by health care providers. This bill would require health care providers to disclose to patients and prospective patients, in writing or through their website, their plan and hospital affiliations prior to the provision of nonemergency services and verbally at the time an appointment is scheduled. There are many other provisions that relate to providing billing and cost information prior to providing nonemergency medical services. This bill is double referenced to House Banking and Insurance Committee and House Health and Human Resources Committee. There has been no activity with regard to this bill since introduction.
Mr. Spangler reported that **House Bill 2373**, authorizing school bus drivers trained in administration of epinephrine auto-injectors to administer auto-injector, has been introduced. This bill permits school bus drivers who have been trained in the administration of an epinephrine auto-injector to administer an epi pen to a student or school staff during transportation to or from a school function when the bus driver reasonably believes the individual is experiencing an anaphylactic reaction. A bus driver may use his or her own epi pen supply or the school’s supply for a student or school personnel authorized to self-administer that meet the requirements of a prescription on file with the school. The bill requires bus drivers to defer to an individual possessing a higher degree of medical training or the parent of the child experiencing an anaphylactic reaction if either are present at the time of the reaction. There has been no activity with regard to this bill since introduction.

Mr. Spangler reported on **House Bill 2423**, relating to criminal offense of therapeutic deception. This bill amends the crime of therapeutic deception to indicate that it applies to physicians as well as psychotherapists. It makes it a crime for a physician to induce a patient to engage in sexual contact by claiming that the sexual contact is consistent with or part of the treatment of the patient. This bill has passed House Health and Human Resources Committee, and now moves to House Judiciary Committee. Following discussion, Dr. Faheem moved that the Board support this bill. Reverend Bowyer seconded, and the motion carried.

Ms. Alley reported on **House Bill 2502**, relating to reciprocity of occupational license with other states. This bill creates a new section in the general statute that states: “Notwithstanding the licensure requirements of each profession in this chapter, a person, who has obtained and maintained for three years an unrestricted license granted by another state to practice a profession licensed under this chapter and has not received a complaint for the three most recent years, meets the educational and experience requirements to apply for licensure.” Following discussion, Reverend Bowyer moved
that the Board oppose House Bill 2502, and request that our agency be omitted from the bill. Dr. Faheem seconded, and the motion carried.

Mr. Spangler reported on House Bill 2509, relating to the practice of telemedicine. This bill removes the prohibition on prescribing Schedule II substances via telemedicine. This bill was amended by House Health and Human Resources Committee today, February 23, 2017, to prohibit the telemedicine prescription of any controlled substance narcotic in any schedule (II-V). The bill now moves to House Judiciary Committee. Following discussion, Reverend Bowyer moved that the Board oppose this bill due to patient safety concerns. Mr. Wright seconded, and the motion carried.

Mr. Spangler reported that Senate Bill 390, relating to the practice of medicine and telemedicine, was introduced yesterday, February 22, 2017. This bill modifies the prohibition on prescribing Schedule II controlled substances via telemedicine: “(1) A physician or podiatrist who practices medicine to a patient solely through the utilization of telemedicine technologies may not prescribe to that patient any controlled substances listed in Schedule II of the Uniform Controlled Substances Act: Provided, that the prescribing limitations do not apply when providing treatment to diagnosed pediatric patients age eighteen and younger with intellectual or developmental disabilities, neurological disease, attention deficit disorder, autism, or a traumatic brain injury in accordance with guidelines as set forth by organizations such as the American Academy of Child and Adolescent Psychiatry, the American Psychiatric Association and/or the American Academy of Pediatrics: Provided, however, That the physician must maintain records supporting the diagnosis and the continued need of treatment.” Mr. Spangler and Ms. Alley met with a representative from West Virginia University last week regarding the language in this bill. Following discussion, Dr. Faheem moved that the Board support this bill. Reverend Bowyer seconded, and the motion carried.

Mr. Spangler reported that House Bill 2538, relating to the licensure of physician assistants, has been introduced. This bill removes the requirement for National
Commission on Certification of Physician Assistants (NCCPA) certification for licensure of a physician assistant. It does not remove the requirement for NCCPA from any other portion of the Physician Assistant Act. House Health and Human Resources Committee amended the bill today, February 23, 2017. The amendment requires NCCPA certification for initial licensure, and removes NCCPA certification requirements for licensure renewal. The bill now moves to House Government Organization Committee. Following discussion, Reverend Bowyer moved that the Board support this bill. Dr. Faheem seconded, and the motion carried.

Ms. Alley reported on House Bill 2540, permitting a person to practice certain professions for a limited time for a charitable function. This bill, which is similar to Senate Bill 4, creates a new section in the general statute that states: “A person holding an unrestricted license granted by another jurisdiction to practice a profession licensed under this chapter may serve as a volunteer in a non-compensated role for a charitable function for a period not to exceed seven days. The person shall contact the appropriate board and notify the board of the activity. The board may not charge a fee to permit this charitable practice.” The bill is single referenced to House Government Organization Committee. There has not been any activity with regard to this bill since introduction.

Mr. Spangler reported that House Bill 2628, relating generally to the powers and duties of the Board of Medicine and the Board of Osteopathic Medicine, has been introduced. This bill includes language that permits the Board to deny an initial license or the reissuance of a license if a licensee/applicant has been convicted of a felony. It makes it a disciplinary offense to knowingly fail to report to the Board any act of “gross misconduct committed by another licensee of the Board” and permits revocation for any period of time, up to the life of the licensee, which is reasonable and necessary. Additionally, the bill requires the Board to report criminal activity to law enforcement. The bill has passed House Health and Human Resources Committee, and now moves to House Government Organization Committee. Dr. Faheem moved that the Board support House Bill 2628. Reverend Bowyer seconded, and the motion carried.
Mr. Spangler reported on House Bill 2630, authorizing the Board of Medicine and the Board of Osteopathic Medicine to share staff. This bill provides: “The West Virginia Board of Medicine is hereby authorized to employ investigators, attorneys, clerks and administrative staff in collaboration with the West Virginia Board of Osteopathic Medicine to share duties and functions between the two boards when it may be efficient and practical for the functioning of the boards. Any sharing of staff or staff resources shall be documented and performed pursuant to the provisions of section nineteen, article one of this chapter.” A reciprocal provision is included in the DO Practice Act. A provision currently exists in the general statute which permits the sharing of administrative staff between Boards. This bill is single referenced to House Government Organization Committee. There has been no activity with regard to this bill since introduction. Following discussion, Reverend Bowyer moved that the Board oppose this bill. Dr. Faheem seconded, and the motion carried.

Ms. Alley reported on House Bill 2631, relating to the deadline to issue a final ruling. The bill provides: “Every board referred to in this chapter shall investigate and resolve complaints which it receives and shall, within six months of the complaint being filed, send a status report to the party filing the complaint by certified mail with a signed return receipt and within one year of the status report's return receipt date issue a final ruling, unless the party filing the complaint and the board agree in writing to extend the time for the final ruling. The time period for final ruling shall be tolled for any delay requested or caused by the accused or by counsel for the accused and in no event shall a complaint proceeding be dismissed for exceeding the time standards in this section when such overage is the result of procedural delay or obstructive action by the accused or his or her counsel or agents.” Following discussion, Dr. Faheem moved that the Board support this bill. Reverend Bowyer seconded, and the motion carried.

Ms. Alley reported that Senate Bill 418, relating to Comprehensive Substance Use Reduction Act, was introduced today, February 23, 2017. This is the Governor’s bill. Some provisions of this bill include: rulemaking authority to the Department of Health
and Human Resources (DHHR) for clean syringe exchange programs; creation of the Office of Drug Control Policy (ODCP) within DHHR under the direction of the Secretary and State Health Officer; moves the Poison Control Center as a division of ODCP; protects law enforcement and first responders from needle-stick injuries; and moves the Controlled Substance Monitoring Program (CSMP) to the ODCP. The ODCP is given many responsibilities, including the development of clinical guidelines for the treatment of acute pain. Board staff will continue to monitor this bill.

Ms. Alley reported that, to date, there have been three medical marijuana bills and three abortion bills introduced during the 2017 legislative session. Board staff will continue to monitor these bills.

Mr. Spangler reported that, to date, there has not been any legislative action regarding the sweeping of special revenue accounts.

Mr. Spangler reported that in January 2017, a letter was sent to G. Nicholas Casey, Esquire, requesting additional staff appropriation to hire a full-time attorney and a part-time communications director. Additionally, Mr. Spangler recently met with Senate Finance Committee Chair, Senator Hall, House Finance Committee Chair, Delegate Nelson, and House Health and Human Resources Committee Chair, Delegate Ellington, who support an amended supplemental spending add-on to allow the Board to employ additional staff. Board staff will keep the Committee apprised of this matter.

There being no further business, Mr. Wright moved that the meeting be adjourned. Dr. Faheem seconded, and the motion carried.

Beth Hays, M.A.
Chair of the Legislative Committee
CALL TO ORDER

Approval of Minutes

- January 8, 2017
- February 23, 2017

Agenda Items:

- Update on Legislative Activities
  - SB 129 and HB 2264 – 11 CSR 1A – Licensing and disciplinary procedures for physicians and podiatrists
  - SB 130 and HB 2265 – 11 CSR 1B – Licensure, disciplinary and complaint procedures, and continuing education, physician assistants
  - SB 131 and HB 2266 – 11 CSR 5 – Dispensing of prescription drugs by practitioners
  - SB 4 and HB 2692 – Allowing licensed professionals donate time to care of indigent and needy in a clinical setting
  - SB 253 – Relating to licensing requirements for physician and osteopathic physicians in West Virginia
  - SB 347 and HB 2753 – Relating to the modernization of the Physician Assistant Practice Act
  - SB 390 – Relating to the practice of medicine and telemedicine
  - HB 2423 – Relating to criminal offense of therapeutic deception
  - HB 2502 – Relating to reciprocity of occupational license with other states
  - HB 2509 – Relating to the practice of telemedicine
  - HB 2538 – Relating to the licensure of physician assistants
  - HB 2540 – Permitting a person to practice certain professions for a limited time for a charitable function
  - HB 2628 – Relating Generally to the powers and duties of the Board of Medicine and the Board of Osteopathic Medicine
  - HB 2630 – Authorizing the Board of Medicine and the Board of Osteopathic Medicine to share staff
• **HB 2631** – Relating to time standards for disposition of complaint proceedings

• **Bills Introduced after February 23, 2017**
  - SB 497 – Relating to liability for physicians who provide services at school athletic events
  - HB 2650 – Youth Mental Health Protection Act
  - HB 2677 – Patient Freedom Act

• **New Bills introduced after March 3, 2017**

• **Overview of SB 418, Relating to Comprehensive Substance Use Reduction Act, by Rahul Gupta, M.D., M.P.H.**

*ADJOURNMENT*
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 12th day of March, 2017, at 10:00 a.m.

The following Committee members were present:

Beth Hays, M.A., Chair
Reverend O. Richard Bowyer
Ahmed Faheem, M.D.
David A. Mullins, M.D.
K. Dean Wright, P.A.-C.

The following Staff members were present:

Mark A. Spangler
Jamie S. Alley, Esq.
Jamie C. Frame

The following consultant attended the meeting:

Andrew Wessels

Ms. Hays called the meeting to order. Dr. Faheem moved that the minutes of the January 08, 2017 meeting and the February 23, 2017 special meeting be approved. Reverend Bowyer seconded, and the motion carried.

Mr. Spangler provided an update with regard to the following Board of Medicine proposed legislative rule bills: (1) Senate Bill 129 and House Bill 2264, relating to the licensing and disciplinary procedures for physicians and podiatrists; (2) Senate Bill 130 and House Bill 2265, relating to licensure, disciplinary and complaint procedures, and continuing education, physician assistants; and (3) Senate Bill 131 and House Bill 2266, dispensing of prescription drugs by practitioners. There has been no activity with regard
to the Senate bills since introduction. The House bills have passed House Health and Human Resources Committee with a technical amendment to the sunset provision language for rule uniformity, and have been bundled into a rule bill which now moves to House Judiciary Committee.

Mr. Spangler reported on Senate Bill 4, allowing licensed professionals to donate time to care for indigent and needy in a clinical setting. The language which would have permitted a physician to obtain up to ten continuing medical education hours in exchange for providing volunteer medical services to eligible indigent or needy patients has been removed, and the bill now moves to Senate Judiciary Committee.

Mr. Spangler reported that Senate Bill 253, relating to licensing requirements for physicians and osteopathic physicians in West Virginia, modifies the provision of the Medical Practice Act which requires applicants to demonstrate an ability to communicate in English language. This bill is single referenced to Senate Government Organization Committee, and there has been no activity with regard to this bill since introduction.

Mr. Spangler provided an update with regard to Senate Bill 390 and House Bill 2509, relating to the practice of telemedicine. At its February 23, 2017 meeting, the Committee voted to support Senate Bill 390 due to the specificity provided in this bill which identifies the age group and the diagnosis for which prescribing is permitted. There has been no activity with regard to Senate Bill 390 since introduction. House Bill 2509 has passed the House with an amendment which prohibits the telemedicine prescription of any controlled substance narcotic in any Schedule (II-V), but allows the prescribing of other Schedule II drugs. Following discussion, Dr. Faheem moved that the Committee support the limitations in Senate Bill 390 and advocate that they be included in House Bill 2509. Mr. Wright seconded, and the motion carried.

At its February 23, 2017 meeting, the Committee voted to support House Bill 2423, relating to criminal offense of therapeutic deception. This bill amends the crime of
therapeutic deception to apply to physicians as well as psychotherapists. Mr. Spangler reported that there has been no movement with regard to this bill since the February 23, 2017 meeting.

At its February 23, 2017 meeting, the Committee voted not to support **House Bill 2502**, relating to reciprocity of occupational license with other states. This bill creates a new section in the general statute that states: “Notwithstanding the licensure requirements of each profession in this chapter, a person, who has obtained and maintained for three years an unrestricted license granted by another state to practice a profession licensed under this chapter and has not received a complaint for the three most recent years, meets the educational and experience requirements to apply for licensure.” This bill was amended in House Government Organization Committee to exclude any profession which has entered into an interstate compact. Board staff will continue to monitor this bill.

Mr. Spangler provided an update with regard to **House Bill 2538**, relating to the licensure of physician assistants. This bill was amended in House Health and Human Resources Committee to require National Commission on Certification of Physician Assistants (NCCPA) certification for initial licensure, but removes NCCPA certification requirement for licensure renewal. The bill now moves to House Government Organization Committee.

Mr. Spangler reported that **House Bill 2540**, permitting a person to practice certain professions for a limited time for a charitable function, provides that “a person holding an unrestricted license granted by another jurisdiction to practice a profession licensed under this chapter may serve as a volunteer in a non-compensated role for a charitable function for a period not to exceed seven days.” Language within the Medical Practice Act already allows for this to occur. The bill has passed the House and now moves to Senate Health and Human Resources Committee.
Mr. Spangler provided an update with regard to House Bill 2628, relating generally to the powers and duties of the Board of Medicine and the Board of Osteopathic Medicine. This bill includes language which permits the Board to deny an initial license or the reissuance of a license if a licensee/applicant has been convicted of a felony. It makes it a disciplinary offense to knowingly fail to report to the Board any act of “gross misconduct committed by another licensee of the Board” and permits revocation for any period of time, up to the life of the licensee, which is reasonable and necessary. Additionally, the bill requires the Board to report criminal activity to law enforcement. At its February 23, 2017 meeting, the Committee voted to support this bill. The bill has passed the House and now moves to Senate Judiciary Committee.

Mr. Spangler provided an update with regard to House Bill 2630, authorizing the Board of Medicine and the Board of Osteopathic Medicine to share staff. A provision currently exists in the general statute which permits the sharing of administrative staff between Boards. The bill has passed House Government Organization Committee and now moves to Senate Judiciary Committee.

Mr. Spangler provided an update with regard to House Bill 2631, relating to time standards for disposition of complaint proceedings. This bill provides that the time period for final ruling in discipline cases can be tolled for any delay requested or caused by or on behalf of the accused. The bill has passed House Government Organization Committee and now moves to House Judiciary Committee.

Mr. Spangler provided an update with regard to Senate Bill 347 and House Bill 2753, relating to the modernization of the Physician Assistant Practice Act. These bills modify various provisions of the Physician Assistant Practice Act, including adding a second physician assistant to member to the Board of Medicine, changing the term supervision to collaborating, modifying prescriptive authority, removing the requirement that licensees be NCCPA certified at the time of renewal, altering the manner in which physician assistants are reimbursed and granting global signature authority. There has
been talk of eliminating a podiatrist member from the current Board composition and replacing them with a physician assistant member. Dr. Mullins moved that the Board support the addition of members to the Board of Medicine in a proportional manner. Reverend Bowyer seconded, and the motion carried.

Dr. Gupta joined the meeting at this time. Mr. Wright provided the Committee with an overview of the current NCCPA recertification examination process. He indicated that the content covered in the recertification examination is very broad does not focus on core knowledge. The NCCPA is in the process of converting the recertification examination to a core knowledge examination, but the anticipated date of implementing this change has not yet been determined. A hearing regarding NCCPA recertification is scheduled for Tuesday, March 14, 2017, at 3:00 p.m. in House Health and Human Resources Committee. Following discussion, Dr. Faheem moved that the Board support Senate Bill 347 and House Bill 2753, but advocate that licensees maintain continuous NCCPA certification and hold the NCCPA to a set time frame for which they will implement core knowledge examinations.

Ms. Alley reported that the following bills have been introduced: Senate Bill 497, relating to liability for physician who provide services at school athletic events; House Bill 2650, Youth Mental Health Protection Act; and House Bill 2677, Patient Freedom Act. There has been no activity with regard to these bills since introduction.

Ms. Alley reported on Senate Bill 2844, relating to provisions applicable to military members and their spouses. This bill waives the licensing requirements for veterans and their family members. Reverend Bowyer moved that the Board oppose Senate Bill 2844 due to safety concerns. Dr. Mullins seconded, and the motion carried.

Ms. Alley reported on Senate Bill 560, which creates a medical malpractice peer review panel by the Board of Medicine to review medical malpractice and medical malpractice related claims. The Board has been asked to submit a Fiscal Note with regard
to this bill. Following discussion, Reverend Bowyer moved that the Board oppose this bill due to technical reasons. Dr. Mullins seconded, and the motion carried.

Dr. Gupta provided the Committee with an overview of Senate Bill 418, which is the Governor’s bill, relating to Comprehensive Substance Use Reduction Act. Some provisions of this bill include: rulemaking authority to the Department of Health and Human Resources (DHHR) for clean syringe exchange programs; creation of the Office of Drug Control Policy (ODCP) within DHHR under the direction of the Secretary and State Health Officer; moves the Poison Control Center as a division of ODCP; protects law enforcement and first responders from needle-stick injuries; and moves the Controlled Substance Monitoring Program (CSMP) to the ODCP.

There being no further business to consider, Reverend Bowyer moved that the meeting be adjourned. Mr. Wright seconded, and the motion carried.

Ahmed Faheem, M.D.
Acting Chair of the Legislative Committee
CALL TO ORDER

Agenda Items:

- Update on Legislative Activities and Legislative Calendar

1. WVBOM Rule Bills Update

   11CSR1A, 11CSR1B and 11CSR5

2. Bills Amending the Physician Assistant Practice Act

   SB 347 (HB 2753) (also affects Board composition)
   HB 2538

3. Telemedicine

   HB 2509 – Relating to the practice of telemedicine (SB390)

4. Bills Amending the Medical Practice Act or the General Statute for Boards

   HB 2628 – (clarifying authority to deny a license or renewal for a felony conviction and removing time limit of revocation authority)

   HB 2630 – Authorizing the Board of Medicine and the Board of Osteopathic Medicine to share staff

   HB 2631 – Relating to time standards for disposition of complaint proceedings

   HB 2502 – Relating to reciprocity of occupational license with other states
SB 253 – Relating to English language requirements for physicians and osteopathic physicians in WV

SB 4 (HB2692) and HB 2540 Volunteer and donated time practice bills

HB 2446 – Relating to the requirement that all executive branch agencies maintain a website that contains specific information

5. Bills Which Directly Affect the WVBOM or Authorize Rulemaking Authority

SB 560 – Creating medical malpractice peer review panel by Board of Medicine

HB 2301 – Direct Primary Care

HB 2984 – Occupational Board Reform Act

6. Other Bills of Interest

SB 418 and HB 3028 – Relating to the Comprehensive Substance Use Reduction Act

HB 2423 – Relating to criminal offense of therapeutic deception

HB 2945 – Relating to exemptions from mandated immunizations

HB 2989 – Placing limitations on length of time that prescriptions may be issued for schedule II and III controlled substances for the initial treatment of acute pain

7. New Bills introduced after March 17, 2017

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Legislative Committee Minutes
March 23, 2017

A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 23rd day of March, 2017, at 5:30 p.m.

The following Committee members attended the meeting via teleconference:

Beth Hays, M.A., Chair
Reverend O. Richard Bowyer
Ahmed Faheem, M.D.
David A. Mullins, M.D.
K. Dean Wright, P.A.-C.

The following Staff members were present:

Mark A. Spangler
Jamie S. Alley, Esq.
Jamie C. Frame

The following consultant attended the meeting via teleconference:

Andrew Wessels

Ms. Hays called the meeting to order. Mr. Spangler provided an update with regard to the following Board of Medicine proposed legislative rule bills: (1) Senate Bill 129 and House Bill 2264, relating to the licensing and disciplinary procedures for physicians and podiatrists; (2) Senate Bill 130 and House Bill 2265, relating to licensure, disciplinary and complaint procedures, and continuing education, physician assistants; and (3) Senate Bill 131 and House Bill 2266, dispensing of prescription drugs by practitioners. There has been no activity with regard to the Senate bills since introduction. The House bills have been bundled into House Bill 2219, which authorizes various health-related boards and agencies to promulgate legislative rules. House Bill 2219 is scheduled for second reading on the House floor tomorrow, March 24, 2017.
Mr. Spangler reported to the Committee that Senate Bill 347, relating to modernization of the Physician Assistant Practice Act, was on first reading on the House floor today, March 23, 2017. This bill modifies various provisions of the Physician Assistant Practice Act, including adding a second physician assistant to member to the Board of Medicine, changing the term supervision to collaborating, modifying prescriptive authority, removing the requirement that licensees be NCCPA certified at the time of renewal, altering the manner in which physician assistants are reimbursed and granting global signature authority. Board staff will continue to monitor this bill.

Mr. Spangler provided an update with regard to House Bill 2509, relating to the practice of telemedicine. Senate Health and Human Resources Committee amended this bill to conform with Senate Bill 390, relating to the practice of medicine and telemedicine. The bill now moves to Senate Judiciary Committee.

Mr. Spangler reported that House Bill 2628, relating generally to the powers and duties of the Board of Medicine and the Board of Osteopathic Medicine, has passed the House and now moves to Senate Government Organization Committee.

Mr. Spangler provided an update with regard to House Bill 2630, authorizing the West Virginia Board of Medicine and the West Virginia Board of Osteopathic Medicine to share staff. This bill has passed House Government Organization Committee and now moves to Senate Government Organization Committee. Board staff will continue to monitor this bill.

Mr. Spangler reported that House Bill 2631, relating to time standards for disposition of complaint proceedings, was amended in House Judiciary Committee. The amendment removed language which provided that “the time period for final ruling shall be tolled for any delay requested or caused by the accused or by counsel for the accused”. The amendments also created ambiguity regarding the provision of status reports and the length of time a deadline for final ruling may be extended. Following discussion,
Reverend Bowyer moved that the Board oppose this bill as amended. Dr. Mullins seconded, and the motion carried. Board staff will continue to closely monitor this bill.

Mr. Spangler provided an update with regard to House Bill 2502, relating to reciprocity of occupational license with other states. This bill was on third reading on the House floor, but was sent back to House Judiciary Committee. Board staff will continue to monitor this bill.

Mr. Spangler reported that Senate Bill 253, relating to licensing requirements for physician and osteopathic physicians in West Virginia, is single referenced to Senate Government Organization Committee. There has been no activity with regard to this bill since introduction.

Ms. Alley reported that Senate Bill 4, allowing licensed professionals to donate time to care for indigent and needy in a clinical setting, has passed the Senate. This bill was amended in House Health and Human Resources Committee to include language from House Bill 2540, permitting a person to practice certain professions for a limited time for a charitable function. Specifically, the amendment permits a person holding an unrestricted license granted by another state or jurisdiction to serve as a volunteer without compensation for a charitable function in West Virginia for a period not to exceed ten days. The West Virginia Medical Practice Act currently provides that an individual is exempt for licensure requirements if the individual is "a physician or podiatrist holding one or more unrestricted licenses granted by another state or foreign country serving as a volunteer in a non-compensated role for a charitable function for a period not to exceed seven days." Following discussion, Mr. Wright moved that the Board authorize Board of Medicine staff to point out inconsistencies with regard to the number of days that an individual may volunteer for a charitable function. Reverend Bowyer seconded, and the motion carried.
Mr. Spangler provided an update with regard to House Bill 2446, relating to the requirement that all executive branch agencies maintain a website that contains specific information. This bill has passed the House and now moves to Senate Government Organization Committee.

Mr. Spangler reported to the Committee that he recently submitted a fiscal note in the amount of $365,000 with regard to Senate Bill 560, creating a medical malpractice peer review panel by the Board of Medicine. At its March 12, 2017 meeting, the Committee voted to oppose this bill due to technical concerns. There has been no activity with regard to the bill since introduction.

Ms. Alley reported to the Committee that House Bill 2301, relating to direct primary care, is completed legislation, and is awaiting action by the Governor. The bill includes rule-making authority for the Board of Medicine.

Mr. Spangler reported that House Bill 2984, Occupational Board Reform Act, creates the Office of Supervision of Occupation Boards, and provides the Attorney General’s Consumer Protection Division with the authority to establish the office. The Attorney General’s Office submitted a fiscal note with regard to this bill in the amount of $855,000. Following discussion, Reverend Bowyer moved that the Board oppose this bill. Dr. Faheem seconded, and the motion carried.

Mr. Spangler provided the Committee with an update with regard to House Bill 3028, relating to the Comprehensive Substance Use Reduction Act. This bill was amended by the Select Committee on Prevention and Treatment of Substance Abuse to provide that the Controlled Substance Monitoring Program (CSMP) will remain under the West Virginia Board of Pharmacy. The bill passed House Health and Human Resources Committee today, March 23, 2017, and is scheduled for first reading on the House floor tomorrow, March 24, 2017.
Mr. Spangler reported that there has been no activity with regard to House Bill 2423, relating to the criminal offense of therapeutic deception, since the February 17, 2017 meeting.

Mr. Spangler reported that House Bill 2945, relating to exemptions from mandated immunizations, has been introduced. There has been no activity with regard to this bill since introduction.

Mr. Spangler reported that House Bill 2989, placing limitations on the length of time that prescriptions may be issued for schedule II and III controlled substances, has been introduced. This bill provides that “a practitioner may not prescribe more than a seven-day supply of a schedule II or III controlled substance for a patient upon initial consultation or treatment of the patient for acute pain.” Board staff will continue to monitor this bill.

Mr. Spangler reported that House Bill Blank, creating the Board of Nursing and Health Services, is on the House Government Organization Committee agenda for tomorrow, March 24, 2017. The text of this bill is not yet available for public viewing. Board staff will monitor this bill closely and keep the Committee apprised.

There being no further business to consider, Reverend Bowyer moved that the meeting be adjourned. Dr. Mullins seconded, and the motion carried.

Ahmed Faheem, M.D.
Acting Chair of the Legislative Committee
CALL TO ORDER

Agenda Items:

- Active Bills of Interest
  
  1. Rule Bill
     - HB 2219
  
  2. Physician Assistant Bill
     - SB 347
  
  3. Telemedicine Bill
     - HB 2509
  
  4. Bills Amending the Medical Practice Act or the General Statute for Boards
     - HB 2628 (felony conviction and revocations)
     - HB 2630 (sharing of staff)
     - HB 2631 (time standards for complaint proceedings)
     - SB 4 and HB 2540 (volunteer and donated time)
  
  5. Other Bills of Interest
     - SB 465 (medical professional liability)
     - SB 386 (medical marijuana)
     - SB 36 (school nurses to administer opioid antagonists)
     - HB 2373 (epinephrine auto-injectors)
     - SB 497 (liability for providers at school athletic events)
     - SB 398 (Emergency Volunteer Health Practitioners Act)
     - HB 3028 (Office of Drug Control Policy)

- Update on Bills that have Completed Legislation

- Update on Bills that Failed to Crossover

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Legislative Committee Minutes
April 4, 2017

A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 4th day of April, 2017, at 5:30 p.m.

The following Committee members attended the meeting via teleconference:

Reverend O. Richard Bowyer
Ahmed Faheem, M.D., Acting Chair
David A. Mullins, M.D.
K. Dean Wright, P.A.-C.

The following Committee member was absent:

Beth Hays, M.A., Chair

The following Staff members were present:

Mark A. Spangler
Jamie S. Alley, Esq.
Jamie C. Frame

The following consultant was present:

Andrew Wessels

In the absence of Ms. Hays, Dr. Faheem called the meeting to order and chaired the meeting. Mr. Spangler reported that House Bill 2219, authorizing miscellaneous boards and agencies to promulgate legislative rules, is scheduled for third reading on the Senate floor tomorrow, April 5, 2017.

Mr. Spangler reported to the Committee that Senate Bill 347, relating to modernization of the Physician Assistant Practice Act, has completed the legislative process and is awaiting action by the Governor.
Mr. Spangler provided an update with regard to House Bill 2509, relating to the practice of telemedicine. This bill was amended in Senate Health and Human Resources Committee to incorporate language found within Senate Bill 390, relating to the practice of medicine and telemedicine. The language incorporated specifies the age limit and diagnosis for which a physician or podiatrist who practices medicine to a patient solely through the utilization of telemedicine technologies may prescribe controlled substances listed in Schedule II of the Uniform Controlled Substances Act. The bill was further amended in Senate Judiciary Committee to provide that “a physician or health care provider may not prescribe any drug with the intent of causing an abortion.” This bill passed the Senate today, April 4, 2017, and now moves back to the House with a request to concur. There is talk that there may be an attempt to strip the amendments. Following discussion, Dr. Faheem moved that the Board oppose the prescribing of Schedule II controlled substances to adult patients via telemedicine encounter, unless the adult patient first presents for a face to face encounter with the physician. Dr. Mullins seconded, and the motion carried.

Mr. Spangler reported that House Bill 2628, relating generally to the powers and duties of the Board of Medicine and the Board of Osteopathic Medicine, is scheduled for second reading on the Senate floor tomorrow, April 5, 2017.

Mr. Spangler reported that there has been no activity with regard to House Bill 2630, authorizing the West Virginia Board of Medicine and the West Virginia Board of Osteopathic Medicine to share staff, since March 6, 2017. Board staff will continue to monitor this bill.

Mr. Wright joined the meeting via teleconference at this time. Mr. Spangler provided an update with regard to House Bill 2631, relating to time standards for disposition of complaint proceedings. At its March 23, 2017 meeting, Mr. Spangler reported that this bill was amended in House Judiciary Committee. The amendment removed language which provided that the time period for final ruling shall be tolled for
any delay requested or caused by the accused or by counsel for the accused. Following discussion, the Board opposed the bill as amended. Yesterday, April 3, 2017, the bill was placed on Senate Government Organization Committee agenda with very little notice given to the public. Mr. Spangler reported that he worked with Senator Takubo and his staff to draft an amendment that would return the bill to its original language, and would allow for the tolling of the time period associated with complaint proceedings for any delay requested or caused by the accused or by counsel for the accused. Senator Takubo will introduce the amendment tomorrow, April 5, 2017, during second reading on the Senate floor. Dr. Faheem moved that in the event that House Bill 2631 is passed without being amended to allow for the tolling of the time period for any delay requested or caused by the accused or by counsel for the accused, that Mr. Spangler be given authorization to approach Governor Justice seeking that this bill be vetoed. Reverend Bowyer seconded, and the motion carried.

Mr. Spangler provided an update with regard to Senate Bill 4, allowing licensed professionals to donate time to care for indigent and needy in a clinical setting. This bill was amended in House Health and Human Resources Committee to include language from House Bill 2540, permitting a person to practice certain professions for a limited time for a charitable function. Specifically, the amendment permits a person holding an unrestricted license granted by another state or jurisdiction to serve as a volunteer without compensation for a charitable function in West Virginia for a period not to exceed ten days. The West Virginia Medical Practice Act currently provides that an individual is exempt for licensure requirements if the individual is a physician or podiatrist holding one or more unrestricted licenses granted by another state or foreign country serving as a volunteer in a non-compensated role for a charitable function for a period not to exceed seven days. This bill is scheduled for third reading on the House floor tomorrow, April 5, 2017.

Mr. Spangler provided an update with regard to Senate Bill 465, relating to medical professional liability. A Committee Substitute was introduced in Senate
Judiciary Committee, which provides that the person who signs the screening certificate of merit be from the profession and within the specialty field, if any, or other specialty field that encompasses the area of practice of the health care provider upon whom the service of a notice is required. This bill has passed the Senate, and now moves to House Judiciary Committee for consideration.

Mr. Spangler reported that Senate Bill 386, creating the West Virginia Medical Cannabis Act, has been amended to prohibit the following: (1) smoking medical cannabis; (2) incorporating medical cannabis into edible form; and growing medical cannabis unless the grower/processor has received a permit. Additionally, as amended, the bill creates a Medical Cannabis Advisory Board within the West Virginia Bureau for Public Health. Board staff will continue to monitor this bill.

Mr. Spangler reported that Senate Bill 36, permitting school nurses to possess and administer opioid antagonists, has completed the legislative process and is awaiting action by the Governor.

Mr. Spangler reported that House Bill 2373, authorizing school bus drivers trained in administration of epinephrine auto-injectors to administer auto-injectors, is scheduled for third reading on the Senate floor tomorrow, April 5, 2017.

Mr. Spangler reported that Senate Bill 497, relating to liability for health care providers who provide services at school athletic events, and Senate Bill 398, creating the Emergency Volunteer Health Practitioners Act, have both completed the legislative process and are awaiting action by the Governor.

Mr. Spangler reported that House Bill 3028, relating to the Comprehensive Substance Use Reduction Act, has passed the House and now moves to Senate Health and Human Resources Committee for consideration.
Mr. Spangler reported that Senate Bill 560, creating a medical malpractice peer review panel by the Board of Medicine, was not passed during the 2017 legislative session. This bill has been referred for interim study.

Mr. Spangler reported that House Bill 2502, relating to reciprocity of occupational license with other states, was not passed during the 2017 legislative session.

Mr. Spangler reported that there will be a study resolution on occupational licensing boards.

There being no further business to consider, the meeting adjourned by consensus. ADJOURNMENT

Ahmed Faheem, M.D.
Acting Chair of the Legislative Committee
WEST VIRGINIA BOARD OF MEDICINE
Legislative Committee Agenda
May 7, 2017 at 10:00 a.m.

CALL TO ORDER

Approval of Minutes

- March 12, 2017
- March 23, 2017
- April 4, 2017

Agenda Items:

- Legislative Rules 11CSR1A, 11CSR1B and 11CSR5
- Overview of the 2017 Legislative Session Including an Update on Completed Legislation
- Rulemaking for 2018 Legislative Session
- Legislative Goals for 2018
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 7th day of May, 2017, at 10:00 a.m.

The following Committee members were present:

Ahmed Faheem, M.D., Acting Chair
Reverend O. Richard Bowyer
David Mullins, M.D.
K. Dean Wright, P.A.-C.

The following Committee member was absent:

Beth Hays, M.A.

The following staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Jamie C. Frame

The following consultant was present:

Andy Wessels

In the absence of Ms. Hays, Dr. Faheem called the meeting to order and chaired the meeting. Dr. Mullins moved that the minutes of the March 12, 2017, March 23, 2017, and April 4, 2017 meetings be approved. Reverend Bowyer seconded, and the motion carried.
Mr. Spangler reported to the Committee that the Board’s proposed legislative rules 11 CSR 1A, *Licensing and Disciplinary Procedures for Physicians and Podiatric Physicians*, 11 CSR 1B, *Licensure, Disciplinary and Complaint Procedures, and Continuing Education for Physician Assistants*, and 11 CSR 5, *Dispensing of Prescription Drugs by Practitioners*, have completed the legislative process and have been signed by the Governor. Board staff will file the final rules with the Secretary of State’s office prior to June 7, 2017, and the rules will become effective in early July. Licensees will receive notification of the amendments to 11 CSR 1A, 11 CSR 1B and 11 CSR 5 via e-mail. The revised rules will also be published on the Board’s website and in the June 2017 edition of the newsletter.

Mr. Spangler reported that the bills identified below have completed the legislative process, have been signed by the Governor and will now become law.

**Senate Bill 4**, allowing licensed professionals to donate time to care for indigent and needy in a clinical setting. This bill permits a person holding an unrestricted license granted by another state or jurisdiction to serve as a volunteer without compensation for a charitable function in West Virginia for a period not to exceed ten days. This bill creates inconsistencies with regard to the number of days that an individual may volunteer for a charitable function, as the West Virginia Medical Practice Act provides that an individual is exempt from licensure requirements if the individual is “a physician or podiatrist holding one or more unrestricted licenses granted by another state or foreign country serving as a volunteer in a non-compensated role for a charitable function for a period not to exceed seven days.”

**Senate Bill 386**, Creating West Virginia Medical Cannabis Act. This bill relates to the authorization, use, possession, growing, processing and dispensing of cannabis for serious medical conditions. It creates a medical cannabis program within the Department of Health and Human Resources under the direction of the Bureau for Public Health. Mr.
Spangler reported that the Board of Medicine has received several calls regarding medical marijuana following the passage of this bill.

**Senate Bill 398**, creating the Emergency Volunteer Health Practitioners Act. This bill permits volunteer health practitioners who are licensed and in good standing in another state to practice in this state while an emergency declaration is in effect.

**House Bill 2359**, Relating to offenses and penalties for practicing osteopathic medicine without a license. In addition to providing offenses and penalties for practicing osteopathic medicine without a license, this bill authorizes the West Virginia Board of Medicine and the West Virginia Board of Osteopathic Medicine to share staff or staff resources when it may be efficient and practical for the functioning of the boards.

**House Bill 2509**, relating to the practice of telemedicine. This bill specifies the age limit and diagnosis for which a physician or podiatrist who practices medicine to a patient solely through the utilization of telemedicine technologies may prescribe controlled substances listed in Schedule II of the Uniform Controlled Substance Act. It also provides that “a physician or health care provider may not prescribe any drug with the intent of causing an abortion.” This rule is effective from passage. Board staff will notify licensees of the changes regarding telemedicine prescribing via e-mail and the Board’s newsletter.

**House Bill 2628**, relating generally to the powers and duties of the Board of Medicine and the Board of Osteopathic Medicine. This bill permits the Board to deny an initial license or the reissuance of a license if a licensee/applicant has been convicted of a felony. It makes it a disciplinary offense to knowingly fail to report to the Board any act of “gross misconduct committed by another licensee of the Board” and permits revocation for any period of time, up to the life of the licensee, which is reasonable and necessary. Additionally, the bill requires the Board to report criminal activity to law enforcement.
House Bill 2631, relating to time standards for disposition of complaint proceedings. This bill provides that the time period for final ruling in discipline cases can be tolled for any delay requested or caused by or on behalf of the respondent.

House Bill 2833, relating to specifying the contents and categories of information for inclusion in annual reports to be submitted by professional licensing boards. This bill will require additional financial information be included in the annual report. There is some ambiguity regarding complaint information that is to be included in the report.

House Bill 2301, relating to direct primary care. This bill authorizes practitioners to enter into a private agreement with a patient, without any insurance involvement, and includes rulemaking authority for the Board of Medicine.

Mr. Spangler reported that Senate Bill 347, relating to modernization of the Physician Assistant Practice Act, and House Bill 2446, requiring executive branch agencies maintain a website that contains specific information, completed the legislative process, but were vetoed by the Governor and did not become law.

Ms. Alley reported that the following bills were passed during the 2017 legislative session, and provide, but do not require, rule-making authority for the Board: House Bill 2301, relating to direct primary care, and House Bill 2509, relating to the practice of telemedicine. Dr. Mullins moved that the Board defer drafting a rule relating to direct primary care at this time, and authorize staff to begin researching and preliminarily drafting of telemedicine rules with the goal of promulgating rules related to telemedicine, during the 2019 legislative session. Reverend Bowyer seconded, and the motion carried.

Mr. Wright joined the meeting at this time. Ms. Alley reported to the Committee that the Board’s legislative rules 11 CSR 6, Continuing Education for Physicians and Podiatrists, and 11 CSR 10, Practitioner Requirements for Accessing the West Virginia Controlled Substance Monitoring Program Database, were last updated in 2013. Mr.
Wright moved that the Board authorize staff to revise 11 CSR 6 and 11 CSR 10 for promulgation during the 2018 legislative session. Dr. Mullins seconded, and the motion carried.

Mr. Spangler reported on potential legislative goals for 2018, which include:

(1) Changing the burden of proof in Board disciplinary matters from clear and convincing evidence to preponderance of evidence standard, which would align the Board of Medicine and the Board of Osteopathic Medicine;

(2) Changing the timeframe associated with summary proceedings from fifteen days to thirty days, and providing that the hearing can occur before a hearing examiner, rather than the Board;

(3) Waiving the time standards for disposition in cases which relate to death and/or overprescribing;

(4) Allowing the Board the authority to waive certain post-graduate training requirements for ABMS Board certified applicants on a case by case basis;

(5) Allowing Board of Medicine investigators to carry weapons; and

(6) Modernization of the Physician Assistants Practice Act.

Reverend Bowyer moved that the Board authorize staff to explore the above-mentioned matters identified as legislative goals for 2018. Mr. Wright seconded, and the motion carried.
There being no further business to consider, the meeting adjourned.

Beth Hays, M.A.
Chair of the Legislative Committee
Executive / Management Committee
Meeting Agendas and Minutes
CALL TO ORDER

Approval of Minutes - May 15, 2016

Agenda Items:

- Fiscal Reports/Purchasing Card Transactions for the months of May and June 2016
- 2016-2017 Hearing Examiners
- Interstate Medical Licensure Compact Commission
- Board of Medicine Disaster Response
- Office Updates
  - 2016 Licensure Renewal Data
  - Big Picture
  - Personnel
  - Office Security

ADJOURNMENT
CALL TO ORDER

Approval of Minutes – July 10, 2016

Agenda Items:

- Fiscal Reports/Purchasing Card Transactions for the Months of July and August 2016
- CME Concerns Relating to Maintenance of Certification
- Board Policies and Position Statements
  - Treatment of Opioid Addiction in the Medical Office
  - Telemedicine
- Board Committees
  - Ad Hoc Americans with Disabilities Act Committee
  - Corporate Practice of Medicine
  - Professional Liability Committee
- Board of Medicine Comments Submitted in Response to the RN Board’s Proposed Revisions to 19 CSR 8, Limited Prescriptive Authority for Nurses in Advanced Practice
- Updates
  - Personnel
  - Search Committee
  - Board Rules – 11 CSR 1A, 11 CSR 1B and 11 CSR 5

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Executive/Management Committee Meeting
Public Session Minutes
July 10, 2016

A meeting of the West Virginia Board of Medicine Executive/Management Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 10th day of July, 2016, at 11:15 a.m.

The following Committee members were present:

Ahmed Faheem, M.D., Chair
R. Curtis Arnold, D.P.M.
Reverend O. Richard Bowyer
Rahul Gupta, M.D., M.P.H.

The following Staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Jamie C. Frame

Dr. Faheem called the meeting to order. Reverend Bowyer moved that the minutes of the May 15, 2016 meeting be approved. Dr. Gupta seconded, and the motion carried.

In advance of the meeting, members were provided with a copy of the fiscal reports and purchasing card transactions for the months of May and June. Mr. Knittle reported that the Board continues to maintain a solid financial position. Upon review of the expenditures, Reverend Bowyer moved that the purchasing card transactions for the months of May and June be approved as submitted. Dr. Arnold seconded, and the motion carried.

Mr. Knittle reported that the bidding process for hearing examiners has concluded. For the 2016-2017 fiscal year, the Board has contracted with the following three hearing examiners: Lewis Brewer, Esq., Jack McClung, Esq. and Hershel (Ned) Rose, Esq.
Mr. Knittle reported that he recently attended a meeting of the Interstate Medical Licensure Compact Commission in Salt Lake City, Utah. The Commission has made substantial progress, and will tentatively begin issuing Interstate Medical Licensure Compact Licenses in January 2017. The U.S. Health Resources and Services Administration (HRSA) grant, which is available through the Federation of State Medical Boards, offers state medical and osteopathic boards $250,000 annually for three years to assist with implementation of the administrative and technical infrastructure of the Interstate Medical Licensure Compact.

With the recent flooding that devastated portions of the state, the Committee discussed the need for a plan to facilitate physician services and obtain medical supplies in the event of an emergency. Dr. Gupta reported to the Committee that one of the biggest issues that the state faces in emergency situations is coordination. It is unknown at this time, if any public health preparedness legislation will be introduced in the upcoming legislative session.

Mr. Knittle reported that the 2016 medical doctor license renewal period for physicians whose last name begins with the letters A through L ended at 4:30 p.m. on June 30th. In total, 3,385 physicians renewed their medical license. Overall, the Board experienced a net gain of 87 physicians. Additionally, as of June 30, 2016 there were 894 physician assistants licensed by the Board; this number continues to steadily increase. During the 2016 licensure renewal period, the Board absorbed $17,700 in fees associated with credit card transactions.

Mr. Knittle reported that with regard to Big Picture, the database is in place; however, additional work enhancements are needed relating to the functionality for the Board. Board staff recently worked with Big Picture and other state entities to develop a Patient Injury Compensation Fund (PICF) payment portal on the Board’s website, which is currently accessible by physicians applying for medical doctor licensure. In January, licensees who are eligible to renew their medical license in 2017 will be able to access the PICF portal.
Mr. Knittle reported that in response to the passage of House Bill 4145 during the 2016 legislative session, relating to carrying or use of a handgun or deadly weapon, the Board has posted security and safety signage at the entrance of the board office and the board room indicating that the Board complies with the West Virginia Division of Personnel's Workplace Security Policy. The signage further indicates that the possession of any firearm or dangerous/deadly weapon on the premises by anyone other than a duly authorized member of law enforcement while engaging in his or her official capacity is strictly prohibited. Upon hire, staff members sign an acknowledgment form attesting that they have received a copy of the Workplace Security Policy and that they understand its contents.

Reverend Bowyer moved that the Committee enter into executive session for the purpose of considering personnel matters regarding restructuring of positions within the office and staff resignation. Dr. Arnold seconded, and the motion carried. Ms. Alley and Ms. Frame left the meeting room at this time.

The executive session concluded, and the public session resumed. Dr. Arnold moved to approve the restructuring of staff positions within the office. Reverend Bowyer seconded, and the motion carried.

Reverend Bowyer moved to regrettably accept Mr. Knittle's resignation as executive director effective December 30, 2016. Dr. Gupta seconded, and the motion carried.

There being no further business, the meeting adjourned.

Ahmed D. Faheem, M.D.
Chair of the Executive/Management Committee
CALL TO ORDER

Approval of Minutes – July 10, 2016

Agenda Items:

- Fiscal Reports/Purchasing Card Transactions for the Months of July, August, September and October 2016
- Selection of 2017 Meeting Dates:
  - January 9, 2017
  - March 13, 2017
  - May 8, 2017
  - July 10, 2017
  - September 11, 2017
  - November 13, 2017
- Board Policies and Position Statements
  - Treatment of Opioid Addiction in the Medical Office
  - Telemedicine
- Board Committees
  - Ad Hoc Americans with Disabilities Act Committee
  - Corporate Practice of Medicine
  - Professional Liability Committee
- Updates
  - Personnel
  - Office
  - Operations
  - Search Committee

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Executive/Management Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 13th day of November 2016 at 10:00 a.m.

The following Committee members were present:

Ahmed Faheem, M.D., Chair
Reverend O. Richard Bowyer
Kishore K. Challa, M.D., F.A.C.C.

The following Committee member was absent:

Rahul Gupta, M.D., M.P.H.

The following Staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Jamie C. Frame

Dr. Faheem called the meeting to order. Reverend Bowyer moved that the minutes of the July 10, 2016 meeting be approved. Dr. Challa seconded, and the motion carried.

In advance of the meeting, members were provided with a copy of the fiscal reports and purchasing card transactions for the months of July, August, September and October. Mr. Knittle reported that the Board continues to maintain a solid financial position. Upon review of the expenditures, Reverend Bowyer moved that the purchasing card transactions for the months of July, August, September and October be approved as submitted. Dr. Challa seconded, and the motion carried.
The committee reviewed the following proposed schedule of 2017 Board meeting dates:

January 9, 2017
March 13, 2017
May 8, 2017
July 10, 2017
September 11, 2017
November 13, 2017

Following discussion, Dr. Challa moved that the proposed meeting dates be presented to the Board for approval as submitted. Reverend Bowyer seconded, and the motion carried.

Mr. Knittle reported that the Board’s policy titled Data 2000 and Treatment of Opioid Addiction In The Medical Office, which was adopted by the Board in September 2013, is currently inconsistent with federal law. In August 2016, changes were made to the federal regulation which permits practitioners who have been certified by the Substance Abuse and Mental Health Services Administration for at least one year to provide medication assisted treatment for opioid use disorder for up to 100. The changes permit a practitioner to request a subsequent increase for up to a maximum patient load of 275. Following discussion, Reverend Bowyer moved that the Committee recommend that the Board withdraw the current policy on Data 2000 and Treatment of Opioid Addiction in the Medical Office, and replace it with the following:

It is the policy of the West Virginia Board of Medicine that physicians who engage in the treatment of opioid addiction and/or substance use disorder in a medical office setting shall ensure that they are and remain in compliance with all applicable state and federal laws. Physicians who engage in the office based treatment of substance use disorders with medication assistance, such as buprenorphine, must be familiar with all current state and federal requirements for the office based use of any and all such medications, including but not limited to 41 C.F.R. Part 8, Subpart F.
Dr. Challa seconded, and the motion carried.

Mr. Knittle reported that the Board’s Position Statement on Telemedicine was adopted in November 2014. This statement closely resembles, but is not identical to W. Va. Code §30-3-13a., regarding telemedicine practice; requirements; exceptions; definitions; and rule-making, which was enacted during the 2016 legislative session. Following discussion, Reverend Bowyer moved that the committee recommend that the Board withdraw the Position Statement on Telemedicine as moot. Dr. Challa seconded, and the motion carried.

Mr. Knittle reported that the following committees exist, but are not currently utilized: Ad Hoc Americans with Disabilities Act Committee; Corporate Practice of Medicine Committee; and Professional Liability Committee. Following discussion, President Faheem notified the Committee that he has elected to retire these committees, but they may be reconstituted in the future if needed.

Mr. Knittle reported that several changes have occurred with regard to personnel. Ms. Amy Young, who served as the Physician Assistant Coordinator, is no longer employed by the Board. Following Ms. Young’s departure, Sheree Thompson, Supervisor of Licensing, Certification and Renewals, will staff the Physician Assistant Committee meeting. Ryan Moore, who previously held the Administrative Assistant/Receptionist position with the Board, has assumed the position of Physician Assistant Licensure Analyst. The Administrative Office Assistant/Receptionist position is currently vacant.

Mr. Knittle reported that it is anticipated that as of January 1, 2017 the West Virginia Board of Examiners for Registered Professional Nurses will no longer be housed at 101 Dee Drive, leaving the space currently occupied by that Board available for lease. Following discussion, the Committee elected to pursue leasing the additional office space.

Mr. Knittle reported that in response to legislation passed during the 2016 legislative session, staff have been working to implement requirements regarding controlled substance
monitoring program certification, collection of the mandatory patient injury compensation fund fee and criminal history record checks.

Dr. Faheem reported that the Search Committee has completed the initial interview of candidates for the Executive Director position and has short-listed three candidates. These three candidates will be invited to return for a second interview which will be conducted by the Search Committee and key staff on Saturday, November 19, 2016. Thereafter, the Search Committee will determine how they would like to proceed.

Mr. Knittle thanked the Committee for their support throughout his tenure as Executive Director of the Board. Likewise, committee members expressed their gratitude for Mr. Knittle’s dedication and leadership throughout the years.

Reverend Bowyer moved that the Committee enter into executive session to discuss personnel matters pursuant to W. Va. Code §6-9A-4(b)(2)(A). Dr. Challa seconded and the motion carried. Ms. Alley and Ms. Frame left the meeting room at this time. The public session recessed, and an executive session commenced. Once the executive session concluded, the Board reconvened in public session. No action was taken in association with matters discussed in executive session.

There being no further business to consider, the meeting adjourned.

Ahmed D. Faheem, M.D.
Chair of the Executive/Management Committee

ADJOURNMENT
CALL TO ORDER

Approval of Minutes – November 13, 2016

Agenda Items:

- Fiscal Reports and Purchasing Card Transactions for the Months of November and December 2016
- Purchasing Card Audit
- Board Appointments
- Gubernatorial Transition
- Interstate Medical Licensure Compact Commission
  - Update
  - Appointment of Commissioner
- FSMB Request for Comments on Model Policy for the Use of Opioid Analgesics in the Treatment of Chronic Pain
- 360° Meeting with State and Federal Law Enforcement / Authorities
- Potential Changes to the DEA Registration Renewal Process
- Personnel
  - Start Date for Incoming Executive Director
  - Transitional Signature Authority
  - Part-Time Communications Officer
  - Full-Time Board Attorney
Office

- Additional Office Space
- Big Picture Database
- Orientation and Reference Manual
- Insurance Merger

**ADJOURNMENT**
WEST VIRGINIA BOARD OF MEDICINE
Executive/Management Committee Meeting
Public Session Minutes
January 8, 2017

A meeting of the West Virginia Board of Medicine Executive/Management Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 8th day of January 2017 at 11:15 a.m.

The following Committee members were present:

Ahmed Faheem, M.D., Chair
Reverend O. Richard Bowyer
Kishore K. Challa, M.D., F.A.C.C.

The following Committee member was absent:

Rahul Gupta, M.D., M.P.H.

The following Board members were present as guests:

Carrie Lakin, D.P.M.
David Mullins, M.D.
Wes Steele, M.D.

The following Staff members were present:

Jamie S. Alley, Esq.
Jamie C. Frame

The following guest was present:

Mark Spangler

Dr. Faheem called the meeting to order. Reverend Bowyer moved that the minutes of the November 13, 2016 meeting be approved. Dr. Challa seconded, and the motion carried.

In advance of the meeting, members were provided with a copy of the fiscal report and purchasing card transactions for the month of November 2016. Due to the timing of the meeting,
the final report for purchasing card transactions in December 2016 was not yet available. Ms. Alley advised the Committee that a draft report was available, and that the final report would be presented at the March 2017 meeting. Upon review of the expenditures, Dr. Challa moved that the purchasing card transactions for the month of November 2016 be approved as submitted. Reverend Bowyer seconded, and the motion carried.

Ms. Alley reported to the Committee that at the July 2015 meeting, the Committee received the initial findings of the purchasing card audit for the period of January 1, 2013 to December 31, 2014. The recommended findings of the auditor included: (1) further breakout of office supplies for purchasing card approval; (2) further specification of purchasing card approval in the Executive/Management Committee minutes; and (3) a sign-in sheet to document committee member attendance at meetings. The Committee found that the Boards current practice was acceptable and took no action. The Board recently received the final audit report, and there were no changes with regard to the findings.

Dr. Faheem welcomed Dr. Lakin, Dr. Mullins and Dr. Steele who attended the meeting as guests. He reported that the Board now has a full complement of members, and that Committee appointments will be made following the January 9, 2017 Board meeting.

Dr. Faheem reported that the gubernatorial inauguration will be held in Charleston on Monday, January 16, 2017 at 1:00 p.m. Governor-elect Jim Justice has announced that G. Nicholas Casey, Esquire will serve as his Chief of Staff. The Board looks forward to working with Governor Justice, Mr. Casey and the entire administration.

Ms. Alley reported to the Committee that the Interstate Medical Licensure Compact Commission (IMLCC) continues to progress, and anticipates the expedited licensure process will be available to qualifying applicants as early as January 20, 2017. The next meeting of the IMLCC is scheduled to occur via teleconference on February 22, 2017. Board staff continue to work with the West Virginia State Police regarding the implementation of criminal history records checks. Following discussion, Reverend Bowyer moved that the Committee recommend that the Board appoint Mark Spangler, incoming Executive Director, to serve as the Board’s
voting representative and Commissioner upon the Interstate Medical Licensure Compact Commission, effective January 23, 2017. Dr. Challa seconded, and the motion carried.

Ms. Alley reported to the Committee that the Workgroup on the Federation of State Medical Board’s Model Policy for the Use of Opioid Analgesics in the Treatment of Chronic Pain has completed its draft policy titled Guidelines for the Chronic Use of Opioid Analgesics. The Executive / Management Committee reviewed the draft policy and does not have any comments or concerns. A copy of the draft policy will be provided to Board members for their review. The deadline for comments to be submitted is January 30, 2017, and all comments should be communicated to Jamie Alley.

Ms. Alley reported that Leslie Inghram, Supervisor of the Investigation and Complaint Unit has been asked by her colleagues at the Drug Enforcement Administration (DEA) to represent the Board of Medicine as its Stakeholder in the new initiative DEA360 program, so she will be ably representing the Board in that capacity.

Ms. Alley reported to the Committee that the Board was notified of changes to the Drug Enforcement Administration (DEA) registration renewal process. One of the changes is that the agency will now send only one renewal notice to a registrant approximately 65 days prior to the expiration date, and no further reminders to renew the DEA registration will be sent. Board staff will continue to monitor changes to the DEA registration renewal process and will report any update to the Committee.

Dr. Faheem reported that the start date for the incoming Executive Director, Mark Spangler, is January 23, 2017. Mr. Spangler, who attended the Committee meeting as a guest, was welcomed by Committee members. Ms. Alley has transitional signature authority for the period of January 3, 2017 through January 23, 2017. In conjunction with her transitional signature authority, Dr. Challa moved that Ms. Alley be authorized to enter consent orders. Reverend Bowyer seconded, and the motion carried.

Ms. Alley reported that the Committee has previously discussed hiring a part-time Communications Officer and a full-time Board Attorney, however, no official action has been
taken regarding these positions. There are currently budgetary issues affecting our ability to processed.

Ms. Alley reported to the Committee that the West Virginia Board of Examiners for Registered Professional Nurses (RN Board) planned to move their office from its current location at 101 Dee Drive to a new location prior to January 1, 2017. The Committee had previously elected to pursue leasing the additional office space beginning on January 1, 2017, however, the RN Board has not yet moved. The Board of Medicine will pursue leasing the space as soon as it becomes available.

Ms. Alley reported on the continuing concerns with the Big Picture Database. Big Picture has not yet provided the Board with a usable historical licensee report, annual report documents or a completed physician assistant renewal application, and has not provided Board staff with updates as requested. Scott Wilkinson, the Board’s Information Systems Coordinator, anticipates that Big Picture will be able to provide a functional physician assistant renewal application prior to when physician assistant renewals begin on February 8, 2017. Moving forward, the Board will need to address our working relationship with Big Picture.

Ms. Alley reported to the Committee that Board staff are working with Lenny Hannigan of AlignHR to revise the Board’s Orientation and Reference Manual. This project is nearing completion with the hope that it will be presented to the Committee at the March meeting.

Ms. Alley reported to the Committee that BrickStreet Mutual Insurance Company, the Board’s workers’ compensation carrier, recently announced a joint venture through affiliation with the Motorist Mutual Insurance Company.

There being no further business to consider, Reverend Bowyer moved that the meeting be adjourned. Dr. Challa seconded, and the motion carried.

Ahmed D. Faheem, M.D.
Chair of the Executive/Management Committee
CALL TO ORDER

Approval of Minutes

- January 8, 2017

Agenda Items:

- Fiscal Reports and Purchasing Card Transactions for the Months of December 2016, January 2017 and February 2017

- Request from DHHR Bureau for Public Health regarding tobacco cessation continuing education

- Legislative Topics

- Interstate Medical Licensure Compact Commission Update

- Office Updates
  - Additional Office Space
  - Board Contracts
  - Big Picture Database
  - Orientation and Reference Manual

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Executive/Management Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 12th day of March 2017 at 11:30 a.m.

The following Committee members were present:

Ahmed Faheem, M.D., Chair
Reverend O. Richard Bowyer
Kishore K. Challa, M.D., F.A.C.C.
Rahul Gupta, M.D., M.P.H.

The following Staff members were present:

Mark A. Spangler
Jamie S. Alley, Esq.
Jamie C. Frame

Dr. Faheem called the meeting to order. Reverend Bowyer moved that the minutes of the January 8, 2017 meeting be approved. Dr. Gupta seconded, and the motion carried.

In advance of the meeting, members were provided with a copy of the final fiscal report and purchasing card transactions for the months of December 2016 and January 2017. Due to the timing of the meeting, the final report for purchasing card transactions in February 2017 was not yet available. Mr. Spangler advised the Committee that a draft report was available, and that the final report would be presented at the May 2017 meeting. Upon review of the expenditures, Reverend Bowyer moved that the purchasing card transactions for the month of December 2016 be approved as submitted. Dr. Challa seconded, and the motion carried. Reverend Bowyer moved that the purchasing card transactions for the month of January 2017 be approved as submitted. Dr. Challa seconded, and the motion carried.

Mr. Spangler reported to the Committee that the West Virginia Purchasing Division contends that the Board’s contract for human resources and for communication services is
invalid and will need to be put out for bid. Mr. Spangler will continue to work with the Purchasing Division with regard to these matters, and will keep the Committee apprised.

In advance of today’s meeting, Committee members were provided with a copy of a letter submitted by Dr. Gupta requesting that the Board of Medicine, as well as other health-related boards and agencies, consider requiring annual tobacco cessation continuing education. Dr. Gupta reported to the Committee that West Virginia has the highest prevalence of tobacco use among pregnant women in the Country, and that physicians play a key role in assisting patients to stop smoking. Board staff will follow-up with the Licensure Committee regarding this matter.

Mr. Spangler reported to the Committee that, to date, there has not been any legislative action regarding the sweeping of special revenue accounts. Board staff will continue to monitor bills of interest to the Board.

Mr. Spangler reported that the Interstate Medical Licensure Compact Commission (IMLCC) had anticipated being able to accept and process applications for Interstate Medical Licensure Compact (IMLC) licenses beginning in January 2017. However, eight states which have joined the IMLCC have been issued letters from the Federal Bureau of Investigations indicating that they are not currently authorized to received criminal history record check results in association with IMLC licensure. Therefore, the Commission has delayed accepting applications for IMLC licensure.

Mr. Spangler reported that the West Virginia Board of Examiners for Registered Professional Nurses (RN Board) vacated from their office location at 101 Dee Drive in February 2017. The Board of Medicine has begun leasing this space, and renovations will commence in the near future.

Mr. Spangler reported that Big Picture has completed the requested modifications with regard to the physician assistant licensure renewal application and the associated resource. Mr. Spangler is currently work with Daniel Albertson, Chief Executive Officer, to reconcile finances and assess the Board’s working relationship with Big Picture.
Mr. Spangler reported to the Committee that Board staff continue to work with Lenny Hannigan of AlignHR to revise the Board’s Orientation and Reference Manual.

There being no further business to consider, the meeting adjourned.

Ahmed D. Faheem, M.D.
Chair of the Executive/Management Committee
CALL TO ORDER

Approval of Minutes

• March 12, 2017

Agenda Items:

• Fiscal Reports and Purchasing Card Transactions for the Months of March and April

• PEIA Telehealth Services

• Office Renovations

• Staffing Needs

• Renewal Update

• Strategic Planning

• Big Picture Database

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Executive/Management Committee Minutes
May 7, 2017

A meeting of the West Virginia Board of Medicine Executive/Management Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 7th day of May 2017 at 10:00 am.

The following Committee members were present:
   Ahmed Faheem, M.D., Chair
   Reverend O. Richard Bowyer
   Kishore K. Challa, M.D., F.A.C.C.
   Rahul Gupta, M.D., M.P.H.

The following Staff members were present:
   Mark A. Spangler, M.A.
   Jamie S. Alley, Esq.
   Jamie C. Frame

Dr. Faheem called the meeting to order. Reverend Bowyer moved that the minutes of the March 12, 2017 meeting be approved. Dr. Gupta seconded, and the motion carried.

In advance of the meeting, members were provided with a copy of the fiscal report and purchasing card transactions for the months of February, March and April 2017. The fiscal report and purchasing card transactions for the month of February 2017 was inadvertently not placed on the May 7, 2017 agenda; therefore, the February purchasing card transactions will be presented at the July meeting. Upon review of the expenditures, Reverend Bowyer moved that the purchasing card transactions for the month of March be approved as submitted. Dr. Gupta seconded, and the motion carried. Reverend Bowyer moved that the purchasing card transactions for the month of April be approved. Dr. Gupta seconded, and the motion carried.
Mr. Spangler reported that Big Picture has not followed through with their commitment to address the Board’s concerns and provide the level of service that is expected. Renewals for medical doctors (M-Z), pediatric physicians, PLLCs and drug dispensing registrations began on May 3, 2017. Despite months of notice, Big Picture was unable to provide an accurate and usable renewal application, resulting in utilization of paper applications until several outstanding issues are addressed. Due to the unsatisfactory service that Big Picture has provided, Reverend Bowyer moved that the Committee recommend that the Board authorize Mr. Spangler to begin searching for a new database vendor and move forward with initiating the bidding process. Dr. Gupta seconded, and the motion carried.

Mr. Spangler reported to the Committee that the Board has received correspondence indicating that PEIA has partnered with iSelectMD physicians to provide telehealth services to all PEIA members for non-emergent medical conditions. The correspondence further provides that iSelectMD physicians will recommend a treatment plan and, when appropriate, prescribe medication via telephone. The Committee and Mr. Spangler will follow-up with Ted Cheatham, Director of PEIA, to ensure that this process is in full compliance with W. Va. Code §30-3-13a regarding telemedicine.

Mr. Spangler reported that the Board has begun leasing the office space previously occupied by West Virginia Board of Registered Professional Nurses, and that renovations have commenced.

Mr. Spangler reported to the Committee that the Board’s spending authority in relation to personnel has been increased by 140K in the 2018 budget. The Executive Director will analyze the agency’s needs and hire additional staff accordingly.

Mr. Spangler reported to the Committee that he would like to hold a meeting of the Board dedicated to discussing strategic planning. The Committee will seek input from board members regarding their preference as to the date that the meeting should occur.

Mr. Spangler reported that physician assistant licensure renewals ended on March 31, 2017. Of the 965 physician assistants eligible to renew their license, 839 renewed their license and 128
allowed their license to expire. These numbers are consistent with prior physician assistant renewals.

Dr. Gupta reported to the Committee regarding the medical marijuana law which was passed during the 2017 legislative session.

There being no further business to consider, the meeting adjourned.

Ahmed D. Paheem, M.D.
Chair of the Executive/Management Committee
Complaint Committee
Meeting Agendas and Minutes
CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

May 15, 2016 Meeting Minutes

I. COUNSEL’S REPORT

15-125-W Gorli Harish, M.D.
16-05-W Dallas Aaron Smith Jr., M.D.

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints
B. New Complaints
C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 10th day of July 2016, beginning at 12:30 p.m.

The following Committee members were present:

Kishore K. Challa, M.D., Chair
R. Curtis Arnold, D.P.M.
Ahmed Daver Faheem, M.D.

The following Committee members were absent:

Matthew Upton, M.D.
Cheryl Henderson, Esquire

The following Staff members were present:

Robert C. Knittle
Jamie S. Alley
Leslie A. Inghram
Karen Day-Burr

The following Staff members were absent:

Rhonda A. Dean

CALL TO ORDER  Dr. Challa called the meeting to order.

APPROVAL OF PUBLIC MINUTES  Dr. Faheem made a motion to approve the minutes of May 15, 2016. Dr. Arnold seconded the motion, and the motion carried.

BOARD COUNSEL REPORT  Ms. Alley provided an update with respect to the Consent Orders offered by the Committee. Since the May meeting, fully executed Consent Orders have been entered with respect to the following licensees:

1. Gorli Harish, M.D. – On June 14, 2016, the license entered into a Consent Order with the Board which imposed a fine in the amount of $4,875 and an administrative fee of $100.00 for failing to
complete 48.75 hours of his required continuing medical education requirements for the period of July 1, 2012 through June 30, 2014, and for his inaccurate certification that he had completed the same. The licensee is also required to complete 48.75 additional hours of CME to ameliorate his deficit.

2. Dallas Aaron Smith, Jr., M.D.- On June 17, 2016, the licensee entered into a Consent Order with the Board which issued a public reprimand to the licensee for having action (in the form of a reprimand) taken against his Virginia medical license.

3. Jamie Leann Hall-Jasper, D.P.M.- On May 16, 2016, the licensee entered into a Consent Order which placed her podiatric license in suspended status until evaluations regarding her current fitness to practice could be completed.

EXECUTIVE SESSION
Dr. Arnold made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Faheem. The motion carried, and the Complaint Committee entered into Executive Session to consider disciplinary matters pursuant to West Virginia Code §30-3-6.

PUBLIC SESSION
The Executive Session concluded and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS

Upon return to public session, Dr. Faheem moved that the Committee take the following actions:

CLOSURES

16-35-W  Alan Harry Rohrer, M.D.
16-14-P  Sushil Mitter Sethi, M.D.
16-31-W  Richard Osbourne Booth, M.D.
16-06-W  Richard Ford Carter, M.D.
15-120-G  George Costin, M.D.
15-31-C  Iraj Derakhshan, M.D.
15-68-W  Iraj Derakhshan, M.D.
15-91-G  Iraj Derakhshan, M.D.
15-95-W  Iraj Derakhshan, M.D.
15-154-S  Iraj Derakhshan, M.D.
15-176-D  Iraj Derakhshan, M.D.
16-32-W Iraj Derakhshan, M.D.
16-64-W Dan Lucian Dumitru, M.D.
15-168-S J. Jorge A. Gordinho, M.D.
15-153-G John Herbert King, M.D.
16-04-W Frank Rivas, M.D.
15-43-W Nikolas N. Soumelidis, M.D.
16-38-W John Richard Wohlwend, M.D.
16-39-W Roderick Allen Young, II, M.D.
16-24-P Thomas Robert Adamski, M.D.
16-12-S Steven Albert Artz, M.D.
16-28-U Michael Boustany, M.D.
16-27-H Leszek Jerzy Ficwolski, M.D.
16-20-C Lily Ferrer Jacob, M.D.
16-49-F Todd Allan Lares, M.D.
16-23-P Julie Kathryn McCammon, M.D.
16-45-C Muhammad Samer Nasher-Alnaim, M.D.
16-48-R Albert James Paine, M.D.
16-47-B Michael Shramowiat, M.D.
16-44-T Eleanor Alice Smith, M.D.
16-26-V Robert Brian Wade, M.D.

**INITIATED COMPLAINTS**

16 89-W
16-90-W
16-91-W
16-92-W
16-93-W
16-94-W
16-95-W
16-96-W
16-97-W
16-98-W
16-99-W
16-100-W
16-101-W
16-102-W
16-103-W
16-104-W
16-105-W
16-106-W
16-107-W
16-108-W

Dr. Arnold seconded the motion, and the motion carried.

Thereafter, Dr. Faheem moved that the Committee make the following finding:
FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14

15-71-W    Raymond Omar Rushden, M.D.

Dr. Arnold seconded the motion, and the motion carried.

ADJOURNMENT

There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Special Meeting

Public Agenda

August 2, 2016

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

I. COUNSEL’S REPORT

II. INTERVIEWS

III. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints
B. New Complaints
C. Other Ongoing Matters

IV. POSSIBLE COMPLAINTS TO INITIATE

V. CONSENT ORDER AND DISCIPLINARY ACTIVITY

VI. COMPLAINT COMMITTEE ACTIONS AND RECOMMENDATIONS

ADJOURNMENT
A special meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 2nd day of August 2016, at 4:30 p.m.

The following Committee members were present:

Kishore K. Challa, M.D., Chair (participating via telephone)
R. Curtis Arnold, D.P.M. (participating via telephone)
Cheryl Henderson, J.D. (participating via telephone)
Matthew Upton, M.D. (participating via telephone)

The following Staff members were present:

Robert C. Knittle
Jamie S. Alley
Patrick A. Muncie
Karen Day-Burr
Rhonda A. Dean

The following Staff member was absent:

Leslie A. Inghram

CALL TO ORDER

Dr. Challa called the meeting to order.

EXECUTIVE SESSION

Dr. Arnold made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) to discuss effecting a license as well as related information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Upton. The motion carried, and the Complaint Committee entered into Executive Session to consider matters pursuant to West Virginia Code §30-3-6 and W. Va. Code § 6-9A-4(b)(4) and (6).
The Executive Session concluded and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS

Upon return to public session, Dr. Arnold moved that the Committee take the following Actions:

INITIATED COMPLAINT

16-113-W

Ms. Henderson seconded the motion, and the motion carried.

ADJOURNMENT

There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.,
Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Agenda

September 11, 2016

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

July 10, 2016 Meeting Minutes
August 2, 2016 Special Meeting Minutes

I. COUNSEL’S REPORT

Vernon Ray Stanley, M.D.

II. INTERVIEWS

III. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints
B. New Complaints
C. Other Ongoing Matters

IV. POSSIBLE COMPLAINTS TO INITIATE

V. CONSENT ORDER AND DISCIPLINARY ACTIVITY

VI. COMPLAINT COMMITTEE ACTIONS AND RECOMMENDATIONS

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Complaint Committee Meeting Minutes
September 11, 2016

A meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 11th day of September 2016, beginning at 11:00 a.m.

The following Committee members were present:

   R. Curtis Arnold, D.P.M., Acting Chair
   Cheryl Henderson, Esquire
   Matthew Upton, M.D.

The following Committee members were absent:

   Kishore K. Challa, M.D., Chair

The following Staff members were present:

   Robert C. Knittle
   Jamie S. Alley
   Leslie A. Inghram
   Patrick Muncie
   Karen Day-Burr
   Rhonda A. Dean

CALL TO ORDER

Dr. Arnold called the meeting to order.

APPROVAL OF PUBLIC MINUTES

Ms. Henderson made a motion to approve the minutes of July 10, 2016 and August 2, 2016, Special Meeting. Dr. Upton seconded the motion, and the motion carried.

BOARD COUNSEL REPORT

Ms. Alley provided an update with respect to the Consent Orders offered by the Committee. Since the September meeting, fully executed Consent Orders have been entered with respect to the following licensees:

1. Vernon Ray Stanley, M.D. – On July 11, 2016, the license entered into a Consent Order with the Board which imposed a Public Reprimand in association with his medical recordkeeping while practicing medicine at the Hope Clinic. Dr. Stanley was also assessed a Civil Fine in the amount of $1,000 and restricted from treating patients for chronic pain or practicing medicine at any practice location where patients are treated for pain.
2. John Dylan Davis, M.D. – On October 7, 2016, the licensee entered into a Consent Order with the Board which imposed a Public Reprimand for Dr. Davis' self-report of breaching the Controlled Drugs Policy of the hospital where he is employed.

3. Eugenio Aldea Menez, M.D. – On October 24, 2016, the licensee voluntarily surrendered his West Virginia medical license. On April 28, 2016, Dr. Menez was arrested and charged with 15 counts of delivery of a Schedule II narcotic. Dr. Menez later notified the Board of his interest in retirement. In light of his interest in retirement and to protect the public without the need to conduct a complete investigation and public hearing, the Board and Dr. Menez voluntarily entered into a Consent Order in which Dr. Menez, permanently surrendered his West Virginia medical license.

EXECUTIVE SESSION

Dr. Upton made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Ms. Henderson. The motion carried, and the Complaint Committee entered into Executive Session to consider disciplinary matters pursuant to West Virginia Code §30-3-6.

PUBLIC SESSION

The Executive Session concluded and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS

Upon return to public session, Ms. Henderson moved that the Committee take the following actions:

CLOSURES

16-29-W    Jeffery Floyd Addison, M.D.
16-71-A    Jeffery Floyd Addison, M.D.
16-60-W    Eric Bonner, M.D.
16-70-P    Prudencio Chu Corro, M.D.
16-16-B    Stephen David Durrenberger, M.D.
16-76-C    Warren Lee Grace, M.D.
15-119-E    Dale Steven Herman, D.P.M.
16-58-B    Roshan Ally Hussain, M.D.
16-61-W    Matthew Page Jones, M.D.
15-28-V    Brian Stephen Love, M.D.
15-40-W    Brian Stephen Love, M.D.
16-96-W    Donald Hastings Michels, M.D.
16-59-N  Dustin Edward Robinson, M.D.
16-102-W  Velayudhan Sahadevan, M.D.
16-78-M  Rupali Nitin Sangrampurkar, M.D.
15-165-W  Rodney F. Sempirek, P.A.-C
16-83-A  Michael Stramowiat, M.D.
16-79-P  Jennifer Anne Sivak-Callicott, M.D.
15-105-W  Denise Coral Smyth, M.D.
16-68-W  Aris Quercil Urbanes, M.D.
16-80-H  Johnny George Walker, M.D.
16-106-W  John William Wyllie, M.D.
16-77-H  Eduardo Daniel Zamora, M.D.

INITIATED COMPLAINTS

16-128-W
16-129-W
16-130-W
16-131-W
16-132-W
16-133-W
16-134-W

Dr. Upton seconded the motion, and the motion carried.

ADJOURNMENT  There being no further business, the Complaint Committee determined by
               consensus to adjourn.

R. Curtis Arnold, D.P.M.
Acting Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Agenda

November 13, 2016

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

September 11, 2016 Meeting Minutes

I. COUNSEL’S REPORT

John Dylan Davis, M.D.
Eugenio Aldea Menez, M.D.

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints
B. New Complaints
C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 13th day of November, 2016 beginning at 11:00 a.m.

The following Committee members were present:

    Kishore K. Challa, M.D., Chair
    R. Curtis Arnold, D.P.M.
    Matthew Upton, M.D.

The following Committee member was absent:

    Cheryl Henderson, Esquire

By special appointment, Reverend O. Richard Bowyer was present and participated in the meeting regarding certain matters, where necessary, for quorum purposes.

The following Staff members were present:

    Robert C. Knittle
    Jamie S. Alley
    Leslie A. Inghram
    Patrick Muncie
    Karen Day-Burr
    Rhonda A. Dean

CALL TO ORDER

Dr. Challa called the meeting to order.

APPROVAL OF PUBLIC MINUTES

Dr. Arnold made a motion to approve the minutes of September 11, 2016 meeting. Dr. Upton seconded the motion, and the motion carried.

BOARD COUNSEL REPORT

Ms. Alley provided an update with respect to the Consent Orders offered by the Committee. Since the September meeting, fully executed Consent Orders have been entered with respect to the following licensees:
1. 16-63-W John Dylan Davis, M.D. Dr. Davis entered into a Consent Order with the Board to resolve a complaint related to the inadvertent removal of waste medications from the premise of his employer/hospital. Dr. Davis self-reported this incident to the Board, and the Consent Order imposed a public reprimand.

2. 16-69-W Eugenio Allde Menez, M.D. - On April 28, 2016, Dr. Menez was arrested and charged with fifteen counts of delivery of a Schedule II narcotic. Effective October 24, 2016, Dr. Menez entered into a Consent Order permanently surrendering his medical license.

EXECUTIVE SESSION Dr. Arnold made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Upton. The motion carried, and the Complaint Committee entered into Executive Session to consider disciplinary matters pursuant to West Virginia Code §30-3-6.

PUBLIC SESSION The Executive Session concluded and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS

Upon return to public session, Dr. Arnold moved that the Committee take the following actions:

CLOSURES

16-74-R    David A. Anderson, D.P.M.
16-87-E    Esam Nuri Baryun, M.D.
16-91-W    Jennifer Brooke Boudrea, M.D.
16-117-R   Richard Graham Bowman, M.D.
16-72-M    Kevin Eggleston, M.D.
16-57-S    Edward Joseph Grey, M.D.
16-81-B    Alvaro Rafael Gutierrez, M.D.
16-56-N    Curtis Wayne Harrison, M.D.
16-132-W   Muhammad Yasier Kanawati, M.D.
16-75-P    Shahnnoor Ali Khan, M.D.
16-114-B   Michael Vincent Korona, M.D.
16-86-V    Tarun Mohan Kumar, M.D.
16-133-W   Kathleen June Martin, M.D.
16-03-W    Wilhelm Delano Meriwether, M.D.
16-97-W    Anthony Joseph Minotti, M.D.
16-112-S   Anand Donald Mishra, M.D.
Dr. Upton seconded the motion, and the motion carried.

Thereafter, Dr. Arnold moved that the Committee make the following finding:

**FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14**

<table>
<thead>
<tr>
<th>Code</th>
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<tbody>
<tr>
<td>15-96-W</td>
<td>Mitchell Simon Finkel, M.D.</td>
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<td>16-19-H</td>
<td>Mitchell Simon Finkel, M.D.</td>
</tr>
<tr>
<td>15-107-S</td>
<td>Louis William Groves, M.D.</td>
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<tr>
<td>16-46-W</td>
<td>Steven Robert Matulis, M.D.</td>
</tr>
<tr>
<td>16-54-W</td>
<td>Steven Robert Matulis, M.D.</td>
</tr>
</tbody>
</table>
Dr. Upton seconded the motion, and the motion carried.

**ADJOURNMENT** There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Special Meeting

Public Agenda

November 30, 2016

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

I. COUNSEL'S REPORT

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints
B. New Complaints
C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

ADJOURNMENT
A special meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 30th day of November 2016, at 4:30 p.m.

The following Committee members were present and participated via telephone:

Kishore K. Challa, M.D., Chair
R. Curtis Arnold, D.P.M.
Cheryl Henderson, J.D.
Matthew Upton, M.D.

The following Staff members were present:

Robert C. Knittle
Jamie S. Alley
Leslie A. Inghram
Patrick A. Muncie
Karen Day-Burr
Rhonda A. Dean

CALL TO ORDER

Dr. Challa called the meeting to order.

EXECUTIVE SESSION

Dr. Arnold made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) to discuss effecting a license as well as related information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Ms. Henderson. The motion carried, and the Complaint Committee entered into Executive Session to consider matters pursuant to West Virginia Code §30-3-6 and W. Va. Code § 6-9A-4(b)(4) and (6).
The Executive Session concluded and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS

Upon return to public session, Ms. Henderson moved that the Committee take the following Actions:

INITIATED COMPLAINT

16-164-W

Dr. Arnold seconded the motion, and the motion carried.

Thereafter, Ms. Henderson moved that the Committee make the following finding:

FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14

14-89-S Omar Khalid Hasan, M.D.

Dr. Upton seconded the motion, and the motion carried.

ADJOURNMENT

There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Public Agenda

January 8, 2017

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

November 13, 2016 Meeting Minutes
November 30, 2016 Special Meeting Minutes

I. COUNSEL’S REPORT

16-50-S Thair Ali Barghouthi, M.D.
16-93-W Ranga Chelva Krishna, M.D.
16-95-W James Ethan Lowe, P.A.-C.
16-98-W James P. Morgan, M.D.
16-66-W Jason Charles Brinkman Reutter, M.D.
15-141-W Charles Lee Rosen, M.D.

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints
B. New Complaints
C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Complaint Committee Meeting Minutes
January 8, 2017

A meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 8th day of January, 2017 beginning at 12:30 p.m.

The following Committee members were present:

Kishore K. Challa, M.D., Chair
Matthew Upton, M.D.
Cheryl Henderson, Esquire

The following Staff members were present:

Jamie S. Alley
Leslie A. Thornton-Inghram
Patrick Muncie
Karen Day-Burr
Rhonda A. Dean

CALL TO ORDER
Dr. Challa called the meeting to order.

APPROVAL OF PUBLIC MINUTES
Dr. Upton made a motion to approve the minutes of November 13, 2016 and November 30, 2016. Ms. Henderson seconded the motion, and the motion carried.

BOARD COUNSEL REPORT
Ms. Alley provided an update with respect to the Consent Orders offered by the Committee. Since the November meeting, fully executed Consent Orders have been entered with respect to the following licensees:

1. 16-50-S Thair Ali Barghouthi, M.D. – On December 29, 2016, the licensee entered into a Consent Order with the Board which imposed a public reprimand to the licensee for delegating professional responsibilities related to nuclear medicine stress test scans to a person Dr. Barghouthi knew, or had reason to know, was not qualified or licensed to perform the delegated acts.
2. 16-93-W Ranga Chelva Krishna, M.D. – On January 8, 2017, the licensee entered into a Consent Order with the Board which imposed a public reprimand for having action taken against his New York and Pennsylvania medical licensees and for failing to disclose his felony tax fraud conviction on his 2012 reinstatement application and civil fine in the amount of $1,000.

3. 16-95-W James Ethan Lowe, P.A.-C – On January 8, 2017, the licensee entered into a Consent Order with the Board which imposed a civil fine in the amount of $500.00 for failure to notify the Board of the termination of his practice agreement with his supervising physician.

4. 16-98-W James P. Morgan, M.D. - On January 8, 2017, the licensee entered into a Consent Order with the Board which imposed a public reprimand to the licensee for having action taken against his Virginia license, and for the conduct which for the basis for the Virginia discipline.

5. 16-66-W Jason Charles Brinkman Reutter, M.D. - On January 8, 2017, the licensee entered into a Consent Order with the Board which imposed a civil fine in the amount of $5000.00 for practicing medicine pursuant to an inactive status license.

6. 15-141-W Charles Lee Rosen, M.D. – On January 8, 2017, the licensee entered into a Consent Order with the Board which imposed a public reprimand for failing to disclose his two-week suspension from practice by WVU in association with his license renewal application.

EXECUTIVE SESSION  
Dr. Upton made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Ms. Henderson. The motion carried, and the Complaint Committee entered into Executive Session to consider disciplinary matters pursuant to West Virginia Code §30-3-6.

PUBLIC SESSION  
The Executive Session concluded and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS  
Upon return to public session, Dr. Upton moved that the Committee take the
following actions:

CLOSURES

<table>
<thead>
<tr>
<th>Code</th>
<th>Name</th>
</tr>
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<tbody>
<tr>
<td>16-01-W</td>
<td>Majester N. Abdul-Jalil, M.D.</td>
</tr>
<tr>
<td>16-116-F</td>
<td>Frederick David Adams, M.D.</td>
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<tr>
<td>16-122-W</td>
<td>Michael Scott Beasley, M.D.</td>
</tr>
<tr>
<td>16-124-A</td>
<td>William Claude Bird, M.D.</td>
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<tr>
<td>16-110-B</td>
<td>Nohl Arthur Braun, M.D.</td>
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<tr>
<td>16-162-D</td>
<td>Michael Howard Chancey, M.D.</td>
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<tr>
<td>16-123-W</td>
<td>G. Stephen Dawson, II, M.D.</td>
</tr>
<tr>
<td>16-144-H</td>
<td>Kara Lynn Gillespie, P.A.-C</td>
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<tr>
<td>16-142-M</td>
<td>Hassan Arshad Jafary, M.D.</td>
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<tr>
<td>16-137-S</td>
<td>Mehran Khajavi, M.D.</td>
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<tr>
<td>16-126-O</td>
<td>Anthony Adolphus McFarlane, M.D.</td>
</tr>
<tr>
<td>16-127-R</td>
<td>Stephan Robert Paul, M.D.</td>
</tr>
<tr>
<td>16-143-C</td>
<td>Leela Vadrevu Raju, M.D.</td>
</tr>
<tr>
<td>16-136-H</td>
<td>Ahmed Moudar Sakkal, M.D.</td>
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<tr>
<td>16-120-L</td>
<td>Heather Michelle Skeens, M.D.</td>
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<tr>
<td>16-141-C</td>
<td>Timothy Lawrence Thistlewaite, M.D.</td>
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INITIATED COMPLAINTS

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<td>17-24-W</td>
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<td>17-25-W</td>
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</tbody>
</table>
Ms. Henderson seconded the motion, and the motion carried.

Thereafter, Dr. Upton moved that the Committee make the following finding:

FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14

16-25-H      Yasar Aksoy, M.D.
16-113-W      Yasar Aksoy, M.D.

Ms. Henderson seconded the motion, and the motion carried.

ADJOURNMENT  There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Public Agenda

March 12, 2017

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

November 30, 2016 Special Meeting Minutes
January 8, 2017 Meeting Minutes

I. COUNSEL’S REPORT

16-90-W       Devender K. Batra, M.D.
15-107-S       Louis W. Groves, M.D.
16-08-W       Ahmed M. A. Kneifati, M.D.
16-94-W       G. William Lavery, M.D.
16-65-W       Christopher J. Murphy, M.D.

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints
B. New Complaints
C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 12th day of March, 2017 beginning at 12:30 p.m.

The following Committee members were present:

Kishore K. Challa, M.D., Chair
Matthew Upton, M.D.
Cheryl Henderson, Esquire
Rusty L. Cain, D.P.M.

The following Staff members were present:

Mark A. Spangler, Director
Jamie S. Alley, Esquire
Leslie A. Thornton-Inghram, CMBI
Patrick A. Muncie
Felicia A. Bryant
Rhonda A. Dean

CALL TO ORDER
Dr. Challa called the meeting to order. Dr. Challa welcomed Dr. Cain to the Committee.

APPROVAL OF PUBLIC MINUTES
Dr. Upton made a motion to approve the minutes of January 8, 2017. Ms. Henderson seconded the motion, and the motion carried.

BOARD COUNSEL REPORT
Ms. Alley provided an update with respect to the Consent Orders offered by the Committee. Since the January meeting, fully executed Consent Orders have been entered with respect to the following licensees:

1. 16-90-W  Devender K. Batra, M.D.- On January 12, 2017, the licensee entered into a Consent Order with the Board which imposes a public reprimanded to the licensee for having actions taken against his Ohio license for conduct which formed the basis of his Ohio discipline.

2. 15-107-S  Louis W. Groves, M.D. – On February 22, 2017, the licensee entered into a Consent Order with the Board which requires that the licensee permanently cease all...
prescribing of controlled substances, shall enroll in and successfully complete ten AMA Category I continuing medical education (CME) hours from an accredited CME provider, approved in advance by the Board, on the subject of medical records and documentation. The Order also includes a provision for an annual chart review of Dr. Groves’ medical records.

3. 16-08-W Ahmed M. A. Kneifati, M.D. – On February 28, 2017, the licensee entered into a Consent Order with the Board which limits the licensee’s practice of medicine in West Virginia to noninvasive procedures and minor procedures which are consistent with limitations and restrictions placed on his practice in Pennsylvania.

4. 16-94-W William Lavery, M.D. – On February 22, 2017, the licensee entered into a Consent Order with the Board to voluntarily surrender his license to practice medicine and surgery effective February 22, 2017.

5. 16-65-W Christopher J. Murphy, M.D. – On February 22, 2017, the licensee entered into a Consent Order with the Board to permanently surrender his West Virginia medical license for violations of professional conduct standards set forth in the West Virginia Medical Practice Act.

EXECUTIVE SESSION
Dr. Upton made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Ms. Henderson. The motion carried, and the Complaint Committee entered into Executive Session to consider disciplinary matters pursuant to West Virginia Code §30-3-6.

PUBLIC SESSION  The Executive Session concluded and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS
Upon return to public session, Dr. Upton moved that the Committee take the following actions:

CLOSURES
17-03-W Majd Mahmoud Arnaout, M.D.
16-166-H Thomas Bartley Benz, M.D.
16-167-B  William Claude Bird, M.D.
16-169-T  Robert Eugene Blake, M.D.
16-147-W  Emily Rebecca Bolling, P.A.-C
16-92-W   Matthew M. Bushman, P.A.-C
16-168-B  Danny Dale Cline, P.A.-C
16-149-W  John Tate Deel, M.D.
16-163-D  Bryan Marshall Dent, P.A.-C
17-14-W   Steven Joseph Dileo, M.D.
16-135-K  Touraj Farid, M.D.
17-16-W   Justin P. Glassford, M.D.
16-161-J  Mohammad Khalid Hasan, M.D.
15-92-P   Mohamad Samah Kalou, M.D.
15-152-F  Mohamad Samah Kalou, M.D.
17-22-W   Rajai Tawfiq Khoury, M.D.
17-01-D   Charles Lye, M.D.
16-139-D  Sandra K. May, P.A.-C
16-145-H  Amy Beth Pearson, M.D.
16-84-R   Manimekalai V. Raman, M.D.
16-07-W   David Carol Shamblin, M.D.
16-103-W  Matthew Edward Simmons, M.D.
16-155-W  Patrick Alan Stone, M.D.
17-32-S   Daniel Bruce Thistlewaite, M.D.
16-37-W   Chad Christopher Turner, M.D.
16-118-M  Vishal Verma, M.D.
16-157-W  Heather Michelle Vincent, P.A.-C
16-158-W  Deleno H. Webb, III, M.D.
16-164-W  Deleno H. Webb, III, M.D.
16-159-W  Cheryl Benita Wingate, M.D.

INITIATED COMPLAINTS

17-52-W
17-53-W
17-54-W
17-55-W
17-56-W
17-57-W
17-58-W
17-59-W
17-60-W
17-61-W
17-62-W
17-63-W
17-64-W
17-65-W
17-66-W
17-67-W
17-68-W
17-69-W
17-70-W
17-71-W
17-72-W
WITHDRAWAL OF PREVIOUS INITIATED COMPLAINTS

17-04-W
17-05-W
17-06-W
17-07-W
17-19-W
17-23-W

Dr. Cain seconded the motion, and the motion carried.

Thereafter, Dr. Upton moved that the Committee make the following finding:

FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF
DISQUALIFICATION UNDER WV CODE §30-3-14

15-41-W Muhammed Samer Nasher-Alneam, M.D.
16-33-W Muhammed Samer Nasher-Alneam, M.D.
16-34-W James Edwin Prommersberger, D.P.M.

Dr. Cain seconded the motion, and the motion carried.

Joseph Anthony Jurand, M.D. previously entered into a detailed Consent Order with the Board, which imposed a stayed suspension and a five year period of probation as a result of his criminal sexual abuse of a minor. In September 2016, the Board dissolved the stay of suspension because of his violation of the terms of the Consent Order because the characteristics of his practice location were inconsistent with the practice recommendations the Board received from the Professional Renewal Center. Dr. Jurand has appealed the suspension to Circuit Court. Dr. Jurand’s license has been in has been in suspended status almost six months. Dr. Jurand has received a new report from the PRC which suggests some practice restrictions which could permit his return to practice. Based upon the PRC recommendations, Dr. Upton moved that the Complaint Committee recommend that the Board offer an Amended Consent Order to Dr. Jurand with specific terms and conditions that set forth the circumstances which would result in the re-
imposition of the stay of suspension. Such terms would include an extended term of probation, a requirement for quarterly reporting of work logs and polygraph results, a requirement that Dr. Jurand following all PRC practice recommendations, all practice restrictions which were previously in place and a further restriction for treating patients under the age of twenty-one, and a prohibition on practice if another physician is not available and on site. Dr. Cain seconded the motion, and the motion carried.

On March 12, 2017, the Complaint Committee of the Board reviewed the Change of Status Application of Steven Robert Matulis, M.D. Dr. Matulis previously requested that his license be placed in inactive status on May 15, 2016. He is now requesting that his status be changes to active. After reviewing the application, and in light of its prior determination of probable cause with respect to West Virginia Board of Medicine administrative complaint Nos. 16-46-W and 16-54-W, Dr. Cain moved that the Complaint Committee recommend to the full Board that Dr. Matulis’s Change of Status Application be denied because the Board has previously found probable cause to institute disciplinary proceedings against Dr. Matulis with respect to West Virginia Board of Medicine administrative complaint Nos. 16-46-W and 16-54-W. These administrative complaints involve serious allegations of professional misconduct, boundary violations, and patient safety concerns. A Complaint and Notice of Hearing setting these administrative matters for public hearing is being issued. Dr. Upton seconded the motion, and the motion carried.

ADJOURNMENT  There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Public Agenda

May 7, 2017

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

March 12, 2017 Meeting Minutes

I. COUNSEL’S REPORT

17-10-W John Emil Capito, M.D.
17-11-W Devin Mark Ciliberti, M.D.
17-15-W Nabeel, Ghabra, M.D.
ACO Joseph Jurand, M.D.

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints
B. New Complaints
C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Complaint Committee Meeting Minutes
May 7, 2017

A meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 7th day of May, 2017 beginning at 12:30 p.m.

The following Committee members were present:

Kishore K. Challa, M.D., Chair
Matthew Upton, M.D.
Rusty L. Cain, D.P.M.

The following Committee member was absent:

Cheryl Henderson, Esquire

The following Staff members were present:

Mark A. Spangler, Executive Director
Jamie S. Alley, Esquire
Leslie A. Thornton-Inghram, CMBI
Patrick A. Muncie
Felicia A. Bryant
Rhonda A. Dean

CALL TO ORDER
Dr. Challa called the meeting to order.

APPROVAL OF PUBLIC MINUTES
Dr. Upton made a motion to approve the minutes of March 12, 2017. Dr. Cain seconded the motion, and the motion carried.

BOARD COUNSEL REPORT
Ms. Alley provided an update with respect to the Consent Orders offered by the Committee. Since the March meeting, fully executed Consent Orders have been entered with respect to the following licensees:

1. John Emil Capito, M.D. – On May 2, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $800.00 for providing an inaccurate response to
Professional Practice Question Number Twelve on his most recent renewal application.

2. Devin Mark Ciliberti, M.D. – On April 13, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $800.00 for providing an inaccurate response to Professional Practice Question Number Twelve on his most recent renewal application.

3. Nabeel Ghabra, M.D. – On April, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $800.00 for providing an inaccurate response to Professional Practice Question Number Twelve on his most recent renewal application.

4. ACO Joseph Jurand, M.D. – ACO Joseph Jurand, M.D. – Dr. Jurand was previously under a Consent Order, beginning in 2014, which included a stayed suspension and period of probation. The Board dissolved the stay of suspension in September 2016 based upon its determination that Dr. Jurand was in violation of the terms and conditions of the 2014 Consent Order. Dr. Jurand petitioned to modify his suspension. In March 2017, an Amended Consent Order was entered that re-imposes a stay of suspension, and includes strict practice restrictions and limitations during Dr. Jurand’s period of probation. His period of probation was extended until June 30, 2020.

EXECUTIVE SESSION

Dr. Cain made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Upton. The motion carried, and the Complaint Committee entered into Executive Session to consider disciplinary matters pursuant to West Virginia Code §30-3-6.

PUBLIC SESSION

The Executive Session concluded and the Complaint Committee returned to Public Session.
COMPLAINT COMMITTEE
ACTIONS

Upon return to public session, Dr. Cain moved that the Committee take the following actions:

### CLOSURES

<table>
<thead>
<tr>
<th>Case Number</th>
<th>Name</th>
</tr>
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<tbody>
<tr>
<td>16-170-M</td>
<td>Peter Lee Ang, M.D.</td>
</tr>
<tr>
<td>16-128-W</td>
<td>Alfred Balderan, M.D.</td>
</tr>
<tr>
<td>17-47-H</td>
<td>John Mirrell Clark, M.D.</td>
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<tr>
<td>17-33-B</td>
<td>Robert Joseph Crow, Jr., M.D.</td>
</tr>
<tr>
<td>17-36-H</td>
<td>Ahmed Davae Faheem, M.D.</td>
</tr>
<tr>
<td>17-34-B</td>
<td>David Samuel Gloss, II, M.D.</td>
</tr>
<tr>
<td>17-17-W</td>
<td>Violeta Gonzalez, P.A.-C</td>
</tr>
<tr>
<td>17-43-F</td>
<td>Violeta Gonzalez, P.A.-C</td>
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<tr>
<td>17-44-B</td>
<td>Eric Shane Hopkins, M.D.</td>
</tr>
<tr>
<td>17-21-W</td>
<td>Terrence Darryl Julien, M.D.</td>
</tr>
<tr>
<td>17-35-H</td>
<td>Karunasree Kanuri, M.D.</td>
</tr>
<tr>
<td>16-172-K</td>
<td>Charles Lye, M.D.</td>
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<td>17-30-K</td>
<td>Charles Lye, M.D.</td>
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<td>17-49-N</td>
<td>Hanibal Mahdi, M.D.</td>
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<tr>
<td>17-02-C</td>
<td>Sandra K. May, P.A.-C</td>
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<tr>
<td>17-25-W</td>
<td>Russell Anthony Miller, M.D.</td>
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<tr>
<td>16-134-W</td>
<td>Vivek Pratrap Padha, M.D.</td>
</tr>
<tr>
<td>17-41-C</td>
<td>Ajay Tribhovanbhal Patel, M.D.</td>
</tr>
<tr>
<td>16-138-S</td>
<td>Robert Carl Pennington, M.D.</td>
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<tr>
<td>16-140-D</td>
<td>Robert Carl Pennington, M.D.</td>
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<td>16-165-R</td>
<td>Brian Powderly, M.D.</td>
</tr>
<tr>
<td>17-39-M</td>
<td>Amal Fostok Sakkal, M.D.</td>
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<tr>
<td>17-31-C</td>
<td>Muhammad Salman, M.D.</td>
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<tr>
<td>16-156-W</td>
<td>Adin Lim Timbayan, M.D.</td>
</tr>
<tr>
<td>17-27-W</td>
<td>Rose Onyinyechi Uradu, M.D.</td>
</tr>
<tr>
<td>16-171-J</td>
<td>Brian Roland Whyte, M.D.</td>
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</tbody>
</table>
INITIATED COMPLAINTS

17-100-W
17-101-W
17-102-W
17-103-W
17-104-W
17-105-W
17-106-W
17-107-W
17-108-W
17-109-W
17-110-W
17-111-W
17-112-W
17-113-W
17-114-W
17-115-W
17-116-W
17-117-W
17-118-W
17-119-W

WITHDRAWAL OF PREVIOUS INITIATED COMPLAINTS

17-54-W

Dr. Upton seconded the motion, and the motion carried.

ADJOURNMENT

There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
CALL TO ORDER

V. POSSIBLE COMPLAINTS TO INITIATE

Marc Jonathan Spelar, M.D.
Sarah Brooke Cash, M.D.

VI. DISCUSSION and POSSIBLE ACTION

Joseph Anthony Jurand, M.D.

*New work location request*

(Motion Required)

ADJOURNMENT
A special meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 25th day of May 2017, at 4:30 p.m.

The following Committee members were present and participated via telephone:

Kishore K. Challa, M.D., Chair
Cheryl Henderson, J.D.
Matthew Upton, M.D.
Rusty L. Cain, D.P.M.

The following Staff members were present:

Mark A. Spangler, Director
Jamie S. Alley, Esquire
Leslie A. Inghram, CMBI
Patrick A. Muncie
Rhonda A. Dean

CALL TO ORDER

Dr. Challa called the meeting to order.

EXECUTIVE SESSION

Dr. Cain made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) to discuss effecting a license as well as related information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Upton. The motion carried, and the Complaint Committee entered into Executive Session to consider matters pursuant to West Virginia Code §30-3-6 and W. Va. Code § 6-9A-4(b)(4) and (6).

PUBLIC SESSION

The Executive Session concluded and the Complaint Committee returned to Public Session.
COMPLAINT COMMITTEE

ACTIONS

Upon return to public session, Ms. Henderson moved that the Committee take the following Actions:

INITIATED COMPLAINT

17-122-W
17-123-W

Dr. Upton seconded the motion, and the motion carried.

Joseph Jurand, M.D. is currently practicing on a probationary license pursuant to an Amended Consent Order entered in March 2017. The Committee received and considered a request by Dr. Jurand to add an additional work location. Dr. Jurand has asked to add Behavioral Health Services of the Shenandoah Valley Medical System ("BHS") as a second work location. Supporting documentation was submitted by BHS, which is aware of the terms and conditions of Dr. Jurand’s probationary practice and has agreed to comply with all terms of the Amended Consent Order. Dr. Cain moved that Dr. Jurand’s request for a new work location be approved with the understanding that Dr. Jurand must fully comply with the terms and conditions of his probation at all work locations, including the maintenance of a daily log which is co-signed by another on-site physician. Ms. Henderson seconded the motion, and the Motion carried.

ADJOURNMENT

There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
Personnel Committee
Meeting Agendas and Minutes
CALL TO ORDER

Approval of Minutes:

- April 15, 2016

Agenda Items:

- AlignHR Contract
- Staffing Needs
- Evaluation Review and Recommendations

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Personnel Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 7th day of May 2017 at 10:45 am.

The following Committee members were present:

Ahmed Faheem, M.D., Chair
Reverend O. Richard Bowyer
Kishore K. Challa, M.D., F.A.C.C.

The following Staff member was present:

Mark A. Spangler, M.A

Dr. Faheem called the meeting to order. Dr. Challa moved that the minutes of the April 15, 2016 meeting be approved. Reverend Bowyer seconded, and the motion carried.

Dr. Faheem informed the Committee that as a result of the purchasing audit conducted in September 2016, the Board must bid out any further human resource services. Therefore, at the conclusion of the current contract with AlignHR their services will be re-evaluated and bid according to the West Virginia State Purchasing Division requirements.

The Committee discussed the ramification of House Bill 2359 in relation to the West Virginia Board of Medicine and the West Virginia Board of Osteopathic Medicine having the authority to share staff on an as needed basis. The Committee recognizes the significant burden that currently exists for Board of Medicine staff in fulfilling the mission of the board. Reverend Bowyer moved that all proposals for staff sharing be presented to the Committee for evaluation and feasibility. Dr. Challa seconded, and the motion carried.

The Committee reviewed the compensation analysis for the Board of Medicine as prepared by AlignHR dated May 5, 2017. Mr. Spangler discussed the details of the report and the final
annual merit and equity increase worksheet. The Committee discussed the Executive Director’s recommendations for salary increases. Following discussion, Reverend Bowyer moved that the Committee recommend that the Board adopt the Executive Director’s recommendations for salary increases. Dr. Challa seconded, and the motion carried. Dr. Challa further moved that the Committee recommend that the Board authorize Dr. Faheem to write a three month performance evaluation of Mr. Spangler and complete a formal evaluation of him in January 2018. Reverend Bowyer seconded, and the motion carried.

Having no further business to discuss, the meeting adjourned.

Ahmed D. Faheem, M.D.
Chair of the Executive/Management Committee
Call to Order

Approval of Minutes – May 16, 2016

Announcements

Committee and Staff Reports, Discussion and Action:

- Executive/Management Committee
  - Fiscal Reports / Purchasing Card Transactions
  - 2016-2017 Hearing Examiners
  - Office Updates

- Legislative Committee
  - 2016 Legislative Session
  - Proposed Legislative and Procedural Rulemaking/Revisions

- Board Attorney
  - Possible Board Action, Jose Jorge Abbud Gordinho, M.D.
  - Possible Board Action, Iraj Derakhshan, M.D.
  - Update on Pending Litigation

- Physician Assistant Committee
  - May 14, 2016 Discussion Regarding Applications
  - Licensure of Physician Assistants
  - Reinstatement of Licensure Physician Assistants
  - Consent Order Activity

- Licensure Committee
  - May 14, 2016 Appearances
  - May 14, 2016 Discussion Regarding Applications
  - Applicants for Permanent Licensure - Physicians
  - Applicants for Permanent Licensure - Podiatrists
  - Reactivation Applicants – Physicians
○ Consent Order Activity

- **Complaint Committee**
  - Closures
  - Initiated Complaints
  - Findings of Probable Cause to Substantiate Charges of Disqualification under §30-3-14
  - Authorization of Consent Orders
  - Fully Executed Consent Orders Since March 13, 2016

- **Nominating Committee**
  - Approval of July 2014 minutes
  - Nominees for the offices of President and Vice-President of the Board

*ADJOURNMENT*
WEST VIRGINIA BOARD OF MEDICINE
Board Minutes
July 11, 2016

A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 11th day of July 2016 at 9:00 a.m.

The following board members were present for the meeting:

Ahmed D. Faheem, M.D., President
R. Curtis Arnold, D.P.M., Vice President
Rahul Gupta, M.D., M.P.H., Secretary
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Kishore K. Challa, M.D.
Michael Ferrebee, M.D.
Beth Hays, M.A.
Cheryl Henderson, J.D.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
K. Dean Wright, P.A.-C.

The following board members were absent:

Carlos C. Jimenez, M.D.
Matthew Upton, M.D.

The following staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Jarnic C. Frame
Leslie A. Inghram
Dr. Faheem called the meeting to order. Dr. Rahim moved that the minutes of the May 16, 2016 Board meeting be approved. Ms. Henderson seconded, and the motion carried.

Dr. Faheem announced that the Federation of State Medical Boards (FSMB) recently released its 2016 Annual Report titled Building Value. The report examines the concept of value in several dimensions, including the value of state-based medical regulation and the value of membership in the FSMB. Copies of the FSMB Annual Report were available for those interested.

Dr. Faheem reported that the Executive/Management Committee met yesterday morning, Sunday, July 10, 2016, at which time Mr. Knittle reported that the Board continues to maintain a solid financial position. The Committee was presented with and approved the fiscal reports and purchasing card transactions for the months of May and June.

Dr. Faheem reported that the bidding process for hearing examiners has concluded, and the Board has contracted with the following three hearing examiners for the 2016-2017 fiscal year: Lewis Brewer, Esq., Jack McClung, Esq., and Hershel (Ned) Rose, Esq.

Dr. Ferreeb joined the meeting as Dr. Faheem reported that Mr. Knittle recently attended a meeting of the Interstate Medical Licensure Committee Commission in Salt Lake City, Utah. The Commission has made substantial progress, and will tentatively begin issuing Interstate Medical Licensure Compact Licenses in January 2017.

Dr. Faheem reported that with the recent flooding that devastated portions of the state, the Committee discussed the need for a plan to facilitate physician services and obtain medical supplies in the event of an emergency. It is unknown at this time, if any
public health preparedness legislation will be introduced in the upcoming legislative session.

Dr. Faheem reported that the 2016 medical doctor licensure renewal period for physicians whose last name begins with the letters “A” through “L” ended at 4:30 p.m. on June 30th. In total, 3,385 physicians renewed their medical license. The Board experienced a net gain of 87 physicians. Additionally, as of June 30, 2016, there were 894 physician assistants licensed by the Board. During the 2016 licensure renewal period, the Board absorbed $17,700 in fees associated with credit card transactions.

Dr. Faheem reported that with regard to Big Picture, the database is in place; however, additional work enhancements are needed relating to the functionality for the Board. Board staff recently worked with Big Picture and other state entities to develop a Patient Injury Compensation Fund (PICF) payment portal on the Board’s website, which is currently accessible by medical doctors applying for licensure. In January, licensees who are eligible to renew their medical license in 2017 will be able to access the PICF portal.

Dr. Faheem reported that in response to the passage of House Bill 4145 during the 2016 legislative session, relating to carrying or use of a handgun or deadly weapon, the Board has posted security and safety signage at the entrance of the board office and the board room indicating that the Board complies with the West Virginia Division of Personnel’s Workplace Security Policy. The signage further indicated that the possession of any firearm or dangerous/deadly weapon on the premises by anyone other than a duly authorized member of law enforcement while engaging in his or her official capacity is strictly prohibited.

Dr. Faheem reported that the Executive/Management Committee went into executive session to discuss personnel matters that will be reported at the end of the Board meeting.
Mr. Wright provided the report of the Physician Assistant Committee, which met on Saturday, July 9, 2016. Mr. Wright asked the Board members to review the physician assistants up for action and to advise of any conflicts. No conflicts were declared.

Mr. Wright reported that at the May 14, 2016 Board meeting, the Physician Assistant Committee recommended and the Board approved, that Jacqueline Renae Shipman-Cespedes, P.A.-C. be approved for licensure contingent upon her acceptance of a Consent Order with the following terms: (1) that any proposed practice agreement submitted by Ms. Shipman-Cespedes be reviewed by the Physician Assistant Committee; (2) that Ms. Shipman-Cespedes be required to practice under direct supervision for a minimum of six months; and (3) that Ms. Shipman-Cespedes’ supervising physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when the direct supervision requirement should be lifted. Ms. Shipman-Cespedes agreed to these terms, and entered into a Consent Order with the Board on June 3, 2016.

Mr. Wright reported that Joanne Marie Torres, P.A.-C. appeared before the Physician Assistant Committee in support of her application for physician assistant licensure. Following discussion, it was the recommendation of the Committee that Ms. Torres be approved for licensure. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

The Physician Assistant Committee recommended the following applicants be approved for Physician Assistant Licensure:

Anderkin, Emily Elizabeth
Andrews, Natasha Rae

Belabin, Jeffrey Howard
Belt, Kelly Beth
Beltowski, Denise Lyn
Blatt, Marisa Lynn
Dell'Orso, Thaddeus Haun Amadayo

Edwards, Beth Virginia

Flannagan, Karen Renea

Gindlesperger, Krisi Hay
Grimes, Michael Dana

Hanna, Peter Samir

King, Julie Mae

Mackall, Chelsea Renee
Mehall, Jamie Russell
Mellert, Ashley Ebersole
Mittal, Anne Patricia

Pivac, Derek Marcel

Saggio, Christina Marie

Watson, Hang Yu Shen

The motion of the Physician Assistant Committee, as presented by Mr. Wright, recommending licensure, carried.

Mr. Wright reported that the Committee reviewed a matter of a licensee who potentially elected not to notify the Board of a termination of a practice agreement and possibly practiced without authorization. Following discussion, the Physician Assistant Committee recommended that this matter be referred to the Complaint Committee.

Mr. Wright reported to the Board that thirty-three practice agreements were authorized during the period of May 5, 2016 through June 24, 2016. Additionally, twenty alternate supervising physicians were designated.
Ms. Hays reported that the Legislative Committee met yesterday, Sunday, July 10, 2016. She reported that House Bill 4463, permitting the practice of telemedicine, was passed during the 2016 legislative session and became effective on June 9, 2016. This law prohibits practitioners from prescribing Schedule II controlled substances to patients solely through the utilization of telemedicine technologies. The Board has received calls and written communication expressing concern related to the limitations that this law will have with regard to prescribing. Ms. Hays reported that Gary Murdock, Vice-President of External Relation for West Virginia University, addressed the Committee and voiced concerns regarding the limitations that this law presents. Despite concerns, the telemedicine regulation cannot be amended prior to the 2017 legislative session.

Ms. Hays reported that on June 14, 2016, during a special legislative session, Senate Bill 1017, authorizing the promulgation of legislative rules by miscellaneous boards and commissions, was passed. This bill included the Board’s rule relating to a license to practice medicine and/or surgery at certain state veteran’s nursing home facilities. The bill also directs the Board to promulgate an amended rule 11CSR1A, Licensing and Disciplinary Procedures: Physicians; Podiatrists, to include binge eating disorder to the list of criteria for which a physician or podiatrist may prescribe, order, dispense, administer, supply, sell or give any drug which is an amphetamine or sympathomimetic amine drug and a compound designated as a Schedule II controlled substance. The Board has proactively addressed this in its rulemaking earlier this summer.

Ms. Hays reported that at its May meeting, the Board authorized staff to move forward with the promulgation of 11CSR1A, Licensing and Disciplinary Procedures; Physicians; Podiatrists. Board staff filed a Notice of Comment Period on a Proposed Rule with the Secretary of State’s office, and received two comments. The first comment expressed support of the proposed revision to 11CSR1A, particularly the addition of binge eating disorder to the list of criteria for which physician or podiatrist may prescribe, order, dispense, administer, supply, sell or give any drug which is an amphetamine or
sympathomimetic amine drug and a compound designated as a Schedule II controlled substance. The second comment was received on behalf of the West Virginia Podiatric Medical Association, seeking to change the term “podiatry” to “the practice of podiatric medicine and surgery” and the term “podiatrist” to “podiatric physician and surgeon” globally. A copy of the proposed rule was made available to Board members for review prior to today’s meeting. The Legislative Committee recommended that the Board approve the modifications to 11CSR1A as presented, and authorize Board staff to move forward with the agency approved filing of this rule. The motion of the Legislative Committee was given by Ms. Hays, and the motion carried.

Ms. Hays reported that at its May meeting, the Board authorized staff to move forward with the promulgation of 11CSR1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants. Board staff filed a Notice of Comment Period on a Proposed Rule with the Secretary of State’s office; however, no comments were received. The Committee recommended that the Board authorize staff to move forward with the agency approved filing of this rule. The motion of the Legislative Committee was given by Ms. Hays, and the motion carried.

Ms. Hays reported that 11CSR5, Dispensing of Legend Drugs by Physicians and Podiatrists, has not been amended since 1989, and is antiquated in terms of language. Ms. Alley provided a verbal overview of the proposed amendments to this rule, which are intended to: (1) modernize the language of the rule, including the labeling and packaging requirements for drugs dispensed by a licensee of the Board; (2) establish that practitioners are only required to register with the Board if they administer or dispense controlled substances; (3) clarify, modernize and synchronize the application process for practitioners who seek to register as controlled substance dispensing practitioners; (4) incorporate eligibility requirements for registration as a controlled substance dispensing practitioner, and guidelines for the termination of such registrations; (5) establish security protocols for practitioners who administer or dispense prescription drugs, including enhanced security requirements for those who dispense controlled substances; (6) clarify
the general practice requirements which apply to all licensees who are drug dispensing practitioners; (7) clarify when a practitioner may accept unused prescription drugs from a patient for disposal; and (8) clarify the duty of a dispensing practitioner to cooperate with Board inspections and audits of a practitioner’s dispensing practice and practice sites. A copy of the proposed amended rule was made available to Board members for review prior to the meeting. Following discussion, the Committee recommended that the Board approve the revision of 11CSR5 as presented, and authorize Board staff to move forward with filing a Notice of Comment Period on a Proposed Rule with the Secretary of State’s Office. The motion of the Legislative Committee was given by Ms. Hays, and the motion carried.

Ms. Alley reported that on January 28, 2016, the Board entered a Final Order in the matter of Iraj Derakhshan, M.D., which imposed discipline, including but not limited to a three-year suspension. On February 3, 2016, Dr. Derakhshan filed an appeal of the Board’s Final Order in Kanawha County Circuit Court. Proposed Orders were due to the Court on Wednesday, June 15, 2016, and the Board is awaiting resolution of this case.

Ms. Alley reported that on January 11, 2016, the Board revoked the medical license of Shivkumar Iyer, M.D. Dr. Iyer has filed an appeal in Kanawha County Circuit Court, which has been assigned to Judge Bailey. Briefs from both parties are due later this month.

Ms. Alley reported that a writ of prohibition was filed in the Supreme Court against the Board with respect to an ongoing complaint investigation. In this case, the writ seeks to prohibit the Board from continuing its investigation. The petitioner alleges that the Board’s investigation has exceeded the statutory length. In this case, the complaining individual received a six month status report and entered into an agreement to extend the time for a final ruling until November 2016. This matter is being handled by Katherine Campbell, Esq. and Greg Foster, Esq. of the Attorney General’s office.
Ms. Alley reported that there are currently two hearings scheduled to convene in the upcoming months.

Dr. Cain delivered the report of the Licensure Committee, which met on Saturday, July 9, 2016.

William Peter Matthew Southcott, M.D., appeared before the Licensure Committee in support of his application for a permanent medical license. Following discussion, it was the recommendation of the Licensure Committee that Dr. Southcott be approved for licensure pending payment of the Patient Injury Compensation Fund (PICF) assessment fee. Dr. Cain gave the motion of the Licensure Committee, and the motion carried.

At its May 2016 meeting, the Licensure Committee reviewed and discussed the application for reactivation of a permanent medical license of Paramjit Singh, M.D., which was previously revoked by the Board on July 18, 2003. The Committee requested that Dr. Singh appear before the Licensure Committee at its July 2016 meeting. Dr. Singh appeared before the Licensure Committee in support of his application. Following discussion, the Committee recommended that the Board determine that Dr. Singh failed to meet his burden of satisfying the Board that he is qualified for licensure and deny his application for reactivation based upon its consideration of his application as a whole, including but not limited to the following facts and information:

1. In January 2004, after his West Virginia Medical License was revoked, Dr. Singh plead guilty to ninety-three felony counts in the Court of Common Pleas of Jefferson County, Ohio, in the matter of Ohio v. Paramjit Singh, Case No. 03CR46, including the following:
a. One felony count of engaging in a pattern of corrupt activity;
b. Twenty-eight felony counts of illegal processing of drugs;
c. Twenty-eight felony counts of aggravated possession of drugs;
d. Twenty-eight felony counts of aggravated trafficking of drugs;
e. Six felony counts of tampering with evidence; and
f. Two felony counts of obstructing justice.

2. As set forth in the January 9, 2004 Change of Plea and Judgment Entry of Sentence entered in association with his plea of guilty to ninety-three felony counts, Dr. Singh:

a. Knowingly obtained, possessed or used a schedule II controlled substance and did knowingly sell or offer to sell a schedule II controlled substance; and
b. Knowingly made false prescriptions and knowingly destroyed, concealed or removed medical and prescription records of your patients.

3. On January 8, 2004, Dr. Singh executed a Voluntary Surrender of his Ohio medical license which authorized the permanent revocation of his Ohio license. The State Medical Board of Ohio permanently revoked Dr. Singh's Ohio medical license as a result of his plea of guilty to ninety three felony counts in Jefferson County, Ohio. Dr. Singh is therefore permanently prohibited from practicing medicine in the state where his criminal conduct occurred.
4. During his appearance before the Licensure Committee, Dr. Singh verified that he has not engaged in the practice of medicine, in any jurisdiction, since 2003, resulting in an absence from clinical practice for a period of greater than twelve years.

The Committee further recommended that the Board find Dr. Singh unqualified for licensure as a result of his violation of the following professional conduct standards set forth in the West Virginia Medical Practice Act and the Board’s legislative rules:

1) W. Va. Code §30-3-14(c) (2) and/or W. Va. Code R. §11-1A-12.1.k, related to being found guilty of a crime in any jurisdiction, which offense is a felony, involves moral turpitude or directly relates to the practice of medicine; and/or

2) W. Va. Code §30-3-14(c) (17) and W. Va. Code R. §11-1A-12.1.g. relating to having had your license to practice medicine in any other state, territory, jurisdiction or foreign nation revoked, suspended, restricted or limited, or otherwise acting against, or has been subjected to any other disciplinary action by the licensing authority thereof, or has been denied licensure in any other state, territory, jurisdiction, or foreign nation; and/or

3) W. Va. Code §30-3-14(c)(13) prescribing, dispensing administering, mixing or otherwise preparing a prescription drug, including any controlled substance under state and federal law, other than in good faith and in a therapeutic manner in accordance with accepted medical standards and in the course of the physician’s practice; and/or

4) W. Va. Code §30-3-14(c)(17) and W. Va. Code R. §11-1A-12.1.e. relating to engaging in dishonorable, unethical or unprofessional conduct of a
character likely to deceive, defraud or harm the public or any member thereof; and/or

5) W. Va. Code §30-3-14(c) (17) and W. Va. Code R. §11-1A-12.1.j, relating to engaging in unprofessional conduct, including, but not limited to, any departure from, or failure to conform to, the standards of acceptable and prevailing medical practice, or the ethics of the medical profession, irrespective of whether or not a patient is injured thereby, or has committed any act contrary to honesty, justice or good morals, whether the same is committed in the course of his or her practice or otherwise and whether committed within or without this State; and/or

6) W. Va. Code §30-3-14(c) (17) and W. Va. Code R. §11-1A-12.2.d, relating to conduct which is calculated to bring or has the effect of bringing the medical profession into disrepute, including, but not limited to, any departure from or failure to conform to the standards of acceptable and prevailing medical or podiatric practice within the state, and any departure from or failure to conform to the current principles of medical ethics of the AMA, with or without an actual injury to a patient; and/or

7) W. Va. Code §30-3-14(c) (17) and W. Va. Code R. §11-1A-12.1.x engaging in malpractice or failed to practice medicine with that level of care, skill and treatment which is recognized by a reasonable, prudent physician engaged in the same or similar specialty as being acceptable.

The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

Don Michael Morring, Jr., M.D., appeared before the Licensure Committee in support of his application for a permanent medical license. Following discussion, it was the recommendation of the Licensure Committee that Dr. Morring be approved for
licensure pending payment of the PICF assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

At its March 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Amy Galigher Cottrell, M.D. Following discussion, the Licensure Committee recommended that the Board approve Dr. Cottrell’s application for licensure through a Consent Order limiting her practice to telemedicine. Dr. Cottrell confirmed receipt of the proposed Consent Order and requested additional time to consider. The Licensure Committee deferred action to its July 2016 meeting. Dr. Cottrell submitted a request to withdraw her application. The Licensure Committee recommended that the Board accept Dr. Cottrell’s withdrawal request. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

At its May 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Brian David Baxt, M.D. The Committee requested that Dr. Baxt appear before the Committee at its July 2016 meeting. Dr. Baxt requested to delay his appearance, and will appear before the Licensure Committee at the September 2016 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Carlos Oscar Geigel, M.D. Following discussion, the Committee requested that Dr. Geigel appear before the Committee at the September 2016 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of James Anthony Murphy, M.D. Following discussion, the Committee recommended the Dr. Murphy be given the opportunity to withdraw his application.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Frank Morrison Sutton, Jr., M.D. Following discussion, the
Committee requested that Dr. Sutton appear before the Committee at the September 2016 meeting.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Abdelwahab Alamin Suliman, M.D. Following discussion, it was the recommendation of the Licensure Committee to accept the total continuing medical hours submitted by the applicant as satisfactory completed, and to approve Dr. Suliman for licensure. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Committee reviewed and discussed the application for reactivation of the permanent medical license of Scott Lynn Schultz, M.D. Following discussion, it was the recommendation of the Licensure Committee to accept the total continuing medical hours submitted by the applicant as satisfactory completed, and to approve Dr. Schultz for licensure. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Melissa Rife Larzo, M.D. Following discussion, it was the recommendation of the Licensure Committee to approve Dr. Larzo for reactivation of licensure in inactive status. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Committee reviewed and discussed the application for a permanent medical license of Abid Bashir Darr, M.D. Following discussion, the Licensure Committee elected to give Dr. Darr the opportunity to withdraw his application.

At its May 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Syed Samiullah Kazmi, M.D. Following discussion, the Licensure Committee recommended that Dr. Kazmi be given the
opportunity to withdraw his application. Dr. Kazmi submitted a request to withdraw his application. The Committee recommended that the Board accept Dr. Kazmi’s withdrawal request. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Hina Zaman, M.D. Following discussion, it was the recommendation of the Licensure Committee that Dr. Zaman be approved for licensure pending receipt of satisfactory evidence of completion of her third year of postgraduate training and payment of the PICF assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Sarah Brooke Cash, M.D. Following discussion, the Licensure Committee requested that Dr. Sutton appear before the Committee at the September 2016 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Mark Roncalli Lo Dico, M.D. Following discussion, the Licensure Committee requested that Dr. Lo Dico appear before the Committee at the September 2016 meeting.

The Committee reviewed and discussed the application for a permanent medical license of Sassan Naderi, M.D. Following discussion, the Committee elected to place Dr. Naderi’s application on hold pending receipt of additional information.

The Licensure Committee presented a list of compliant applications, which included one-hundred fifty-nine initial medical doctor applications. Additionally, the Committee presented a list of two initial medical doctor applicants that are pending payment of the PICF fee and one medical doctor that is pending receipt of satisfactory
evidence of completion of her third year postgraduate training. Nine compliant applications for reactivation of medical doctor licensure were also presented. It was the recommendation of the Licensure Committee to approve the following applicants for licensure:

Acosta, Indrani Enid
Agor, Longinus Olewuike
Ahn, Janice Seulgy
AlAwad, Feras Abdullah
Al-Faham, Zaid K M
Ali, Suleiman
Alkhaimy, Haytham
Alkhouli, Mohamad Adnan
Alvi, Mansour Isalou
Alwan, Dären
Arguelles, Eric
Arthurs, Erica Lynn

Barth, Rebeka
Beltagy, Abdelrahman Fouad
Bender, Jennifer Ann
Bender-Heine, Adam
Bharrara, Niteesh
Bhatt, Shaun Muhammad Zaki
Bhushan, Bharath Panchamarri
Bonda, Sri Lakshmi Kala
Brozanski, Beverly Sobchak

Cantillo, Joaquín J.
Celestine, Charlise Khalisha
Cervantes, Jose Luis
Chan, Jonathan James Wanglun
Chandrasekhar, Kaarthik Srinivasan
Choe, Jessica Shin
Chopra, Anish
Clark, Jr., Larry Edward
Collins, Kristina Michelle
Cox, Kelly LaVar
Craig, Kristen Marie
Crockett, Tierra Nicole
Cumberledge, Jeremy David
Davidson, Duncan Ben
Davis, Devon Lynn
de Elia, Carolina Belen
Deol, Kamal Kaur
Dexter, Stephen Eugene
Dihowm, Fatma Mehemed
DiLeo, Steven Joseph
Di Poce, James Edward
Dix, Ebony Monifa
Dragon, Shane Richard
Duru, Uzoma Bruno

Edson, Steven Bryan
Ellison, Sarah Elizabeth
Ewing, Christopher Anthony

Fairchild, Su
Field, James Conrad
Fisher, Taylor Lane
Fojas, Augusto Paras
Foreman, Theresa Marguerite
Frazier, Sarah Jane

Gangireddy, Venu Gopala Reddy
Garlapati, Srikanth
Glance, Ryan Robert
Gratton, James Arthur
Grow, Joel LeRoy
Gutierrez, Jennifer Sur

Haddad, Faris Jadan
Haile, Robel
Hajiran, Ali John
Hand, Suzanne M.
Harper, Matthew B.
Harrington-Foster, Nathan Timothy John
Hassan, Muhammad
Hatfield, Mandy Nichole
Heiraty, Payam
Higgins, Luke James
Hodapp, Matthew Charles
Hodroge, SammySamir
Humerick, Madison
Hurley, Jr., Alfred Chamberlain
Indukuri, Chaitanya
Isakov, Daniela Giulia

Jacques, Lina
Johnson, Jessica Elizabeth
Jolis, Timothy Winston
Juersivich, Adam Paul
Juskovich, Joy Jeannine

Kaiser, Loren Renee
Katner, Theodore Lawrence
Katsevman, Gennadiy Aleksandrovich
Kelly, David C.
Kendler, Seth Harold
Kersteter, Matthew Michael
Ketema, Tsion Alisa
Khalsa, Maninder
Kidd, Kacie Marie
King, Joseph Mark
King, Miranda Lynn
Kingsbury, II, James Michael
Krafft, Matthew Richard
Kravtsov, Vladimir Dmitrievich

Lanoix, Richard
Lee, John Ming-Yi
Lenaghan, Patrick Neal
Lenz, Jackson Scott
Leung, Alexander
Limbu, Susang Nina
LoPinto, Melissa
Lyle, Cara Ann
Lynch, Joseph Dominic

Macian, Diana Maria
Mannan, Sunjay Kumar
Marino, Jr., Philip Anthony
Mathews, Molly Robinson
Mauriello, Paul Michael
Mott, Elizabeth Kelly
Mrad, Luay
Murphy, Charles William
Nagib, Michael Issac
Nanda, Gaurav
Nawar, Nariman Atif
Nazzal, Munier M. S.
Nelson, Barbara Jean
Nguyen, Khanh Lebao
Nicoleau, Christine

Oami, Shimon
Oliver, Philip Wayne

Passerby, Sally Alsaban
Peck, Christy Ann
Peshek, Ramona Kay
Przyszłak, Andrzej Janusz

Ramlogan, Sandhya Rhea
Ramos, Lina Teresa
Raskin, Russell Wayne
Rickard, Tara Michelle
Robbins, Mark Kenneth
Russell, Joshua Allen

Sanabria, Juan Ramone
Scabhill, Michael Dominic
Seeliger, Nicholas Edward
Sharp, Steven Michael
Shaw, Fawwaz Ridwan
Siddoway, Donald Ray
Silverberg, Benjamin Andrew
Slater, Brian Kristoffer
Sloyer, Daniel Aaron
Stanazai, Khalid Shafaq
Stanley, Jeffrey Peterson
Stokes, III, William Alvo
St. Royal, Leslie Alexander
Sussman, Arlene
Sweitzer, Donald Edward

Ta, Donald Nguyen
Thongsri, Roshin
Trentham, Jr., Charles R.
Tulu, Hunde Sado
Valley, Robert Nelson
VanCuran, Keith William
Velasco, Rodrigo Ernesto

Walch, Charles Andrew
Williams, Shanicka N.
Worley, Jr., Clarence MacDonald

Xie, Jianwu

Yadiki, Bhanu Prakash

Ziolkowski, Timothy Jon

APPLICANTS FOR PERMANENT LICENSURE – Physicians approved pending receipt of the PICF Assessment Fee

Lartevi, Kumapley Kofi
Sundaraman, Michael Anand

APPLICANTS FOR PERMANENT LICENSURE – Physician approved pending satisfactory receipt of completion of PGY 3

Modi, Hrishabh Chinu

REACTIVATION APPLICANTS WHOSE LICENSE HAS NOT BEEN ACTIVE FOR MORE THAN ONE YEAR – Physicians

Alaan, Kristina Cortes
Ang-Rabanes, Michael Bacani
Cain, Richard Edward
Crennan, Joan Marie
DiFilippo, William
Fiego, Richard L.
Kasturi, Vellore G.
Wilson, Jr., John David
Worrell, Scott Phillip

Dr. Cain asked the Board members if there were any conflicts, and no conflicts were declared. The Licensure Committee recommended that these applicants be granted
original and/or reactivated licenses by the Board. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

Dr. Challa provided the following report pursuant to the July 10, 2016 meeting of the Complaint Committee.

**CLOSURES**

<table>
<thead>
<tr>
<th>Reference</th>
<th>Name</th>
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<tbody>
<tr>
<td>16-35-W</td>
<td>Alan Harry Rohrer, M.D.</td>
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<tr>
<td>16-14-P</td>
<td>Sushil Mitter Sethi, M.D.</td>
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<td>16-31-W</td>
<td>Richard Osbourne Booth, M.D.</td>
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<td>16-06-W</td>
<td>Richard Ford Carter, M.D.</td>
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<td>15-120-G</td>
<td>George Costin, M.D.</td>
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<td>15-31-C</td>
<td>Iraj Derakhshan, M.D.</td>
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<td>Dan Lucian Dumitru, M.D.</td>
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<td>15-168-S</td>
<td>J. Jorge A. Gordinho, M.D.</td>
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<td>15-153-G</td>
<td>John Herbert King, M.D.</td>
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<td>16-04-W</td>
<td>Frank Rivas, M.D.</td>
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<td>15-43-W</td>
<td>Nikolas N. Soumelidis, M.D.</td>
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<td>16-38-W</td>
<td>John Richard Wohlwend, M.D.</td>
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<td>Roderick Allen Young, II, M.D.</td>
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<td>16-24-P</td>
<td>Thomas Robert Adamski, M.D.</td>
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<td>16-12-S</td>
<td>Steven Albert Arzt, M.D.</td>
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<td>16-28-U</td>
<td>Michael Boustany, M.D.</td>
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<td>16-27-H</td>
<td>Leszek Jerzy Fiotowski, M.D.</td>
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<td>16-20-C</td>
<td>Lily Ferrer Jacob, M.D.</td>
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<td>16-49-F</td>
<td>Todd Allan Lares, M.D.</td>
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<td>16-23-F</td>
<td>Julie Kathryn McCammon, M.D.</td>
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<td>16-45-C</td>
<td>Muhammad Samer Nasher-Alneam, M.D.</td>
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<td>16-48-R</td>
<td>Albert James Paine, M.D.</td>
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<td>16-47-B</td>
<td>Michael Shramowiat, M.D.</td>
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<td>16-44-T</td>
<td>Eleanor Alice Smith, M.D.</td>
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<td>16-26-V</td>
<td>Robert Brian Wade, M.D.</td>
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INITIATED COMPLAINTS

16-89-W
16-90-W
16-91-W
16-92-W
16-93-W
16-94-W
16-95-W
16-96-W
16-97-W
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16-100-W
16-101-W
16-102-W
16-103-W
16-104-W
16-105-W
16-106-W
16-107-W
16-108-W

FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14

15-71-W Raymond Omar Rushden, M.D.

CONSENT ORDERS

Dr. Challa requested that the Board authorize the Complaint Committee to move forward with offering two Consent Orders and/or Amended Consent Orders in ongoing Complaint Committee matters. The motion of the Complaint Committee was given by Dr. Challa, and the motion carried.

FULLY EXECUTED CONSENT ORDERS

22
Dr. Challa reported that the following Consent Orders have been entered since May 15, 2016.

On June 14, 2016, Gorli Harish, M.D. entered into a Consent Order with the Board which imposed a fine in the amount of $4,875 and an administrative fee of $100.00 for failing to complete 48.75 hours of his required continuing medical education requirements for the period of July 1, 2012 through June 30, 2014, and for his inaccurate certification that he had completed the same. The licensee is also required to complete 48.75 additional hours of CME to ameliorate his deficit.

On June 17, 2016, Dallas Aaron Smith, Jr., M.D. entered into a Consent Order with the Board which issued a public reprimand for having action (in the form of a reprimand) taken against his Virginia medical license.

Dr. Challa reported that on May 16, 2016, the Board and Jamie Leann Hall-Jasper, D.P.M. voluntarily entered into a Consent Order to permit Dr. Hall-Jasper to obtain any and all necessary medical treatment for her well-being and to ensure that she is fit to return to the practice of podiatry, and to protect the public. Pursuant to the Consent Order, the Board has received independent medical verification that, to a reasonable degree of medical certainty, Dr. Hall-Jasper presently possesses the capacity to perform her duties as a podiatrist, and that any issues which may have formed the basis for concern regarding her fitness to practice are currently resolved. Based upon this information, the Committee recommends that the Board enter an Order lifting the suspension imposed by the May 16, 2016 Consent Order, and authorize Dr. Hall-Jasper to return to the active practice of podiatric medicine in West Virginia. The motion of the Complaint Committee was given by Dr. Challa, and the motion carried.

Ms. Hay reported that the Nominating Committee met on June 21, 2016 to
develop a slate of nominees for the offices of President and Vice President for presentation at today’s meeting. The Committee’s agreed upon slate of nominees are Ahmed Daver Faheem, M.D. for a second term as President, and Kishore K. Challa, M.D. for Vice President. Ms. Hays turned the meeting over to Dr. Faheem to poll for additional nominations. No additional nomination were presented. Ms. Hays moved that the nominations be closed. Dr. Arnold seconded, and the motion carried. By acclamation, Dr. Faheem was re-elected to a second term as President, and Dr. Challa was elected as Vice President.

Dr. Faheem announced that Dr. Ferreebee has taken a position with West Virginia University, and will be resigning from the Board effective August 1, 2016. Dr. Faheem acknowledged Dr. Ferreebee’s many contributions to the Board throughout his ten-year term, and thanked him for his years of services.

Dr. Faheem announced that Mr. Knittle will be resigning as Executive Director of the Board effective December 30, 2016. Following Dr. Faheem’s reading aloud of Mr. Knittle’s resignation letter, Reverend Bowyer moved to accept Mr. Knittle’s resignation. Dr. Ferreebee seconded, and the motion carried.

In response to the Mr. Knittle’s resignation, Dr. Faheem announced that an Ad Hoc Search Committee will be established to pursue candidates to fill the upcoming vacant Executive Director position. Committee membership is as follows:

Ahmed Faheem, M.D., Chair;
Kishore K. Challa, M.D.;
R. Curtis Arnold, D.P.M.;
Reverend O. Richard Bowyer; and
Rahul Gupta, M.D., M.P.H.

Dr. Faheem announced that Mr. Knittle will serve as a consultant for the Committee, and
all board members will be involved in the selection process.

There being no further business to consider, the meeting adjourned.

Ahmed D. Faheem, M.D.  
President

Rahul Gupta, M.D., M.P.H  
Secretary
Call to Order

Legislative Rulemaking

- 11CSR5 – Board of Medicine Rules for Dispensing of Legend Drugs by Practitioners

Adjournment
WEST VIRGINIA BOARD OF MEDICINE
Special Board Meeting Minutes
August 22, 2016

A special meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 22nd day of August 2016 at 4:30 p.m.

The following board members were present for the meeting:

Rahul Gupta, M.D., M.P.H., Secretary
Ashish Sheth, M.D.

The following board members attended via teleconference:

Ahmed D. Faheem, M.D., President
Kishore K. Challa, M.D., Vice President
R. Curtis Arnold, D.P.M.
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Beth Hays, M.A.
Cheryl Henderson, J.D.
Matthew Upton, M.D.
K. Dean Wright, P.A.-C.

The following board members were absent:

Carlos C. Jimenez, M.D.
Mustafa Rahim, M.D.

The following staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Jamie C. Frame
Dr. Faheem called the meeting to order and announced that the purpose of today's meeting is to consider and review the comments that were received with regard to the Board's proposed rule, 11 CSR 5, Dispensing of Legend Drugs by Practitioners. Prior to today's meeting, a copy of each of the fifteen comments that were received was made available to Board members for review.

Ms. Alley reported that on July 12, 2016, board staff filed a Notice of Comment Period on a Proposed Rule, 11 CSR 5. The Notice established a thirty-day comment period on the proposed rule, which concluded at 4:30 p.m. on August 11, 2016. During the comment period, the Board received fifteen written comments from the following individuals/entities:

<table>
<thead>
<tr>
<th>Commenter</th>
<th>Date Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  Gerry Stover, WVAFP</td>
<td>July 20, 2016</td>
</tr>
<tr>
<td>2  West Virginia Academy of Family Physicians</td>
<td>July 27, 2016</td>
</tr>
<tr>
<td>3  Wassim Saikali, M.D.</td>
<td>August 5, 2016</td>
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<tr>
<td>4  U.S. Myint, M.D.</td>
<td>August 5, 2016</td>
</tr>
<tr>
<td>5  Mark A. Spitzer, M.D. and Kamila Spitzer, M.D.</td>
<td>August 5, 2016</td>
</tr>
<tr>
<td>6  Stephen M. Cohen, MD, MBA, FACS, FASCRS</td>
<td>August 5, 2016</td>
</tr>
<tr>
<td>7  Matthew Page Jones, MD</td>
<td>August 6, 2016</td>
</tr>
<tr>
<td>8  Eric Bonnem, MD</td>
<td>August 9, 2016</td>
</tr>
<tr>
<td>9  Belington Community Medical Services Association, Inc.</td>
<td>August 10, 2016</td>
</tr>
<tr>
<td>10 West Virginia State Medical Association</td>
<td>August 10, 2016</td>
</tr>
<tr>
<td>12 HID Global</td>
<td>August 11, 2016</td>
</tr>
<tr>
<td>13 Michael Rezaian, M.D.</td>
<td>August 11, 2016</td>
</tr>
<tr>
<td>14 MedExpress Urgent Care, Inc.</td>
<td>August 11, 2016</td>
</tr>
<tr>
<td>15 Terrence Reidy, MD, MPH</td>
<td>August 11, 2016</td>
</tr>
</tbody>
</table>

Three commenters submitted comments, which support and/or approve of the proposed amendments to 11 CSR 5, and do not identify any proposed modifications. One additional commenter, after seeking clarification regarding the application of the rule to emergency department and ambulatory surgical centers (11 CSR 5 is intended to apply only to office-based practice) expressed approval of the proposed amendments.
Ms. Alley reported that one commenter remarked that the term “legend drug” is antiquated and unnecessary. The commenter suggested that the Board replace the term legend drug with “prescription drug,” which is a more familiar term for most practitioners. Following discussion, Dr. Challa moved that the Board strike the term “legend drug” from the definition section and replace it with the term “prescription drug” defined as “a drug that may be prescribed, administered or dispensed under federal or state law only pursuant to the prescription of an authorized prescriber. Prescription drugs are also referred to as legend drugs.” Dr. Challa further moved that the term legend drug be changed to prescription drug globally. Reverend Bowyer seconded, and the motion carried.

Ms. Alley reported that one commenter requested clarification regarding the practice settings to which 11 CSR 5 is applicable. While proposed subsection 3.2 explicitly excludes dispensing or administering medications in an inpatient setting, it was not clear to the commenter whether the rule applied to the practice of administering in emergency departments and/or ambulatory surgical centers. Following discussion, Reverend Bowyer moved that subsection 3.2 be modified to read as follows:

3.2. Every practitioner who administers any controlled substance to a patient under his or her care in an office based setting within West Virginia shall first register with the Board as a registered controlled substance dispensing practitioner. A separate registration is required for each and every practice location where the practitioner administers controlled substances. This registration requirement does not apply to practitioners who administer controlled substances exclusively to patients who are receiving inpatient health care services at a hospital or other inpatient health care facility, a hospital-based emergency department, or an ambulatory surgical center.

Ms. Hays seconded, and the motion carried.

Ms. Alley reported that the currently enacted version of 11 CSR 5 requires all dispensing practitioners to register with the Board, regardless of whether or not the
practitioner dispenses a controlled substance or a non-controlled substance unless he or she: (1) only administers, and does not dispense, non-controlled substances; (2) only dispenses free professional samples; or (3) only dispenses legend drugs as part of services provided by a free clinic or a state authorized Medicaid, family planning, maternal and child health or early and periodic screening, diagnosis and treatment program. All other office based dispensing and administering activity currently requires a dispensing registration.

The proposed rule simplifies the criteria by requiring registration by any practitioner who administers or dispenses controlled substances in an office-based practice setting, including free samples of controlled substances. Practitioners who exclusively administer or dispense non-controlled substances would not be required to register, however they would have to comport their practice to the guidelines established in the rule. Four commenters offered comments on the criteria regarding who must register as a registered controlled substance dispensing practitioner, suggesting that practitioners should not be required to register if they dispense schedule V controlled substances only. One of the commenters also suggested registration not be required for administering schedule IV or V drugs.

Following discussion, the Board did not act to change the criteria regarding which practitioners must register as controlled substance dispensing practitioners. However, based upon these comments, Dr. Arnold moved that the Board modify the application requirements for registration as a controlled substance dispensing practitioner by inserting “if required to do so by law,” to 3.3.c., so that it reads as follows:

3.3.c. Verification by the applicant that he or she is currently registered to access the West Virginia Controlled Substance Monitoring Program (“WVCSMP”), if required to be so registered by law, and that he or she understands his or her obligation to report the dispensing of controlled substances to the WVCSMP; and
Dr. Gupta seconded, and the motion carried.

Ms. Alley reported that the currently enacted version of 11 CSR 5 establishes that “dispensing physicians may dispense drugs to their own patients but not fill prescriptions written by other physicians or podiatrists.” This dispensing limitation is also incorporated into the proposed rule.

One commenter suggested that “it is unclear whether this provision would prevent a physician from filling prescriptions written by physician assistants.” The commenter suggested a revision to section 5.1 “that would permit drug dispensing physicians to fill prescriptions written by a physician assistant under a physician supervision that practices in the same location as the dispensing physician.” This commenter raised a similar concern regarding the language of subsection 5.5.

Following discussion, Reverend Bowyer moved that the Board make no changes to the proposed amendments based upon the comments received. Ms. Hays seconded, and the motion carried. Reverend Bowyer left the meeting at this time.

Ms. Alley reported that the proposed rule includes language regarding the security of a practitioner’s dispensing inventory, including new requirements for the safekeeping of controlled substances.

One commenter noted that while “well intentioned, this change would add unnecessary complexity to the practice of dispensing practitioners, while doing little to enhance the security of controlled substances.” Specifically, the commenter highlighted concerns that this rule change would prohibit nurses who are working with dispensing physicians from accessing controlled substances, and that the use of actual safes versus locked cabinets for securing controlled substances is impractical. The commenter proposed that the language be modified to require storage of controlled substances in a
"separately locked, climate controlled area with only the controlled substance dispensing practitioner(s) and/or their professionally licensed designee having the access code or key."

Following discussion, Ms. Hays moved that the Board amend 6.4 to allow for controlled substances to be stored in a separately locked "safe or cabinet." Ms. Hays further moved that the Board make no changes to the language limiting the access code or key to registered controlled substance dispensing practitioners. Dr. Gupta seconded, and the motion carried.

Ms. Alley reported that one commenter identified a typographical error in subsection 6.11. The internal reference in that section should, as the commenter mentioned, refer to subsection 6.9 rather than subsection 6.8. Dr. Upton moved that the Board modify subsection 6.11 to refer to subsection 6.9 rather than 6.8. Dr. Cain seconded, and the motion carried.

Ms. Alley reported that consistent with federal law, section eight of the Board's proposed rule prohibits practitioners from accepting unused or unwanted controlled substances from or on behalf of patients. It also prohibits licensees of this Board from the reuse/re-dispensing of returned non-controlled substances.

The Board received five comments regarding this section. Specifically, the commenters objected to the prohibition on reuse of returned or surrendered non-controlled substances as set forth in subsection 8.9. These comments universally reflect a desire to assist patients who cannot afford or otherwise obtain authorization for expensive non-controlled substance medications, and to work within an imperfect system beleaguered by insurance coverage and preauthorization issues and, in certain situations, medication shortages.

Ms. Alley reported to the Board that currently there is no state law in West Virginia which expressly authorizes physicians to dispense, administer or otherwise reuse
returned or surrendered drugs. Under very limited circumstances, Board of Pharmacy rules permit a pharmacist to accept a returned non-controlled substance for purposes other than destruction. Specifically, the returned drugs must be in a manufacturer’s original, sealed and visibly tamperproof container, or in extemporaneously prepared unit does packaging which is returned to the pharmacy by an institution. All such drugs must be identified as to lot and control number and expiration date. W. Va. Code R. §15-1-12.1. Presumably, before redispensing such medications, they are checked by a licensed pharmacist for misbranding and adulteration.

Ms. Alley went on to report that there is a growing trend towards establishing state-based (non-controlled substance) prescription drug donation programs, some of which are specific to cancer drugs. Most of these programs are administered and regulated through either the specific state’s Board of Pharmacy and/or the state’s Department of Health. Most of state drug donation programs, (1) establish strict criteria for what drugs may be donated; (2) identify whether donations will be accepted from institutions and/or from individuals; (3) identify and require registration of who may accept such donations; (4) require donated drugs to be inspected by a pharmacist for adulteration and misbranding prior to redispensing; (5) enumerate medications which may not be donated (such controlled substances and medications which require refrigeration or a controlled temperature environment); (6) establish criteria for eligibility to receive donated medications; and (7) provide immunity for participating practitioners.

Currently, West Virginia does not have any legislation in effect which authorizes a prescription drug repository or donation program. The creation of such a program is the province of the Legislature, and would require participation and regulation by entities other than the Board of Medicine. In the absence of a legislatively created prescription drug donation program, the casual reuse of patient donated medications (including medications which require refrigeration) as suggested and described by the commenters is not supported by any existing West Virginia law.
Following considerable time spent reviewing and considering the comments regarding 8.9, Dr. Gupta moved that the Board modify subsection 8.9 to read as follows:

8.9. A practitioner may not dispense, administer or reuse any returned or surrendered drug unless such dispensing, administering or reuse occurs pursuant to a prescription drug donation program established by this state.

Dr. Sheth seconded, and the motion carried.

Ms. Alley reported that one commenter indicated that he “could not find clarification/exemption for the use of analgesics when doing a procedure or therapeutic joint injection.” As written, the proposed rule does not make use-based distinctions. If a drug is administered by a practitioner to a patient, the practitioner must comply with the rules appropriate to the drug, and must be registered with the Board if the drug is a controlled substance. Following discussion, no changes were made to the proposed rule as a result of this comment.

Following significant review and discussion of the fifteen comments received, Mr. Wright moved that the Board authorize staff to incorporate the above-mentioned modifications in 11 CSR 5, and move forward with the Agency Approved Filing of the Rule. Ms. Hays seconded, and the motion carried.

There being no further business to consider, the meeting adjourned.

Ahmed D. Faheem, M.D.  Rahul Gupta, M.D., M.P.H
President              Secretary
Call to Order

Approval of Minutes

- July 11, 2016 Board Meeting Minutes
- August 22, 2016 Special Board Meeting Minutes

Announcements

Committee and Staff Reports, Discussion and Action:

- Board Attorney
  Paramjit Singh, M.D. (action upon licensure application)
- Physician Assistant Committee
- Licensure Committee
- Complaint Committee
- Nominating Committee

ADJOURNMENT
A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 12th day of September 2016 at 9:00 a.m.

The following Board members were present for the meeting:

Ahmed D. Faheem, M.D., President
R. Curtis Arnold, D.P.M.
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Michael Ferrebee, M.D.
Beth Hays, M.A.
Cheryl Henderson, J.D.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
Matthew Upton, M.D.
K. Dean Wright, P.A.-C.

The following Board member attended via teleconference:

Rahul Gupta, M.D., M.P.H., Secretary

The following Board members were absent:

Kishore K. Challa, M.D., F.A.C.C., Vice President
Carlos C. Jimenez, M.D.
The following staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Jamie C. Frame
Leslie A. Inghram
Ryan Moore

Dr. Faheem called the meeting to order. Reverend Bowyer moved that the minutes of the July 11, 2016 Board meeting be approved. Ms. Hays seconded, and the motion carried. Dr. Cain moved that the minutes of the August 22, 2016 special Board meeting be approved. Mr. Wright seconded, and the motion carried.

Dr. Faheem announced that in July, Board staff filed the Board’s Notice of Agency Approval of a Proposed Rule and Filing with the Legislative Rule-Making Review Committee (LRMRC) for proposed rules 11CSR1A, Licensing and Disciplinary Procedures: Physicians; Podiatrists, and 11CSR1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants. Following LRMRC review, minor modifications were made to both of these rules, and on September 1, 2016, staff filed modified versions of the rules with the Secretary of State’s Office.

Dr. Faheem announced that with regard to 11CSR5, Dispensing of Prescription Drugs by Practitioners, staff have filed Notice of Agency Approval of a Proposed Rule and Filing with the LRMRC, and are presently awaiting the Committee’s comments and/or suggested modifications.

Dr. Faheem recognized and congratulated Dr. Gupta on being named President of the West Virginia State Medical Association.
Mr. Knittle recognized and congratulated Dr. Faheem as recipient of the 2016 Robert L. Ghiz, M.D. award.

Dr. Faheem next announced that the Board membership terms for Dr. Jimenez and Dr. Arnold expire on September 30, 2016. Both members are welcome to remain on the Board until a successor is appointed by the Governor.

Dr. Faheem welcomed Ryan Moore as the new Receptionist/Administrative Office Assistant for the Board. Following introduction, Mr. Moore left the meeting room.

Dr. Faheem announced that the Legislative Committee and the Executive / Management Committee did not meet in September.

Ms. Alley reported that in January 2016, the Board revoked the medical license of Shivkumar Iyer, M.D. Dr. Iyer filed an appeal in Kanawha County Circuit Court. Briefs were filed by both parties in July and August, and proposed Orders were submitted in late August as well.

Ms. Alley reported that a hearing is scheduled for September 16, 2016 in the matter of Diane Shafer, M.D. The Hearing Examiner's Findings of Fact, Conclusions of Law and Recommended Decision will be available for the Board's consideration at a future meeting.

Ms. Alley reported that at the July 11, 2016 meeting, the Board accepted the recommendation of the Licensure Committee, and voted to deny Paramjit Singh, M.D.'s application for reactivation of his previously revoked license to practice medicine and surgery in West Virginia. After receiving notification regarding the Board's decision not to grant reactivation of his previously revoked license, Dr. Singh requested an
administrative hearing. The Board issued a timely Notice of Hearing in this matter. Dr. Singh subsequently withdrew his request for a hearing, rendering the convening of a hearing unnecessary. Prior to today’s meeting, a draft Order Denying Application for Reactivation of Previously Revoked License to Practice Medicine and Surgery in West Virginia was made available to board members for review. Following discussion, Dr. Arnold moved that the Board refuse to grant Dr. Singh a reactivated license to practice medicine and surgery in this state and issue an Order Denying Application for Reactivation of Previously Revoked License to Practice Medicine and Surgery in West Virginia. Reverend Bowyer seconded, and the motion carried.

Ms. Alley reported that a hearing in the matter of *West Virginia Board of Medicine, Petitioner, v. Deleno H. Webb, III, M.D., Respondent*, is scheduled to convene on November 2-3, 2016. The respondent has filed a request for continuance with regard to this matter.

Ms. Alley reported that it is likely there will be a hearing scheduled for mid-December.

Mr. Wright provided the report of the Physician Assistant Committee, which met on Saturday, September 10, 2016. The Physician Assistant Committee recommended the following applicants be approved for Physician Assistant Licensure:

Alden, Margaret Jane
Aston, Ryan Benjamin
Boggs, Linda Rita
Bosner, Lauren Marie
Campbell, Andrea Nicole
Casto, Anthony Wayne
Durkin, Allison Virginia
Ford, Chad A.
Kuzman, Michael Hilton
Liddle, Meredith Caroline
McKinney, Charles Darrell
Meighen, Benjamin John
Porter, Polly Ann
Stein, John Hunter
Stunja, Mary Anne
Sutphin, Mara Wright
Williams, Martha Marie

Mr. Wright declared a conflict with regard to applicant Mara Wright Sutphin, P.A.-C., and left the meeting room. The Board voted to approve Mara Wright Sutphin, P.A.-C. for licensure. Thereafter, Mr. Wright returned to the meeting room. No additional conflicts were declared. The Physician Assistant Committee recommended that all remaining applicants be granted licenses by the Board. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that the Committee reviewed and discussed the application and proposed practice agreement for Kimberly Elaine Connor, P.A.-C. Following discussion, the Committee recommended that Ms. Conner be approved for licensure contingent upon her acceptance of a Consent Order with the following terms: (1) that any proposed practice agreement submitted by Ms. Conner be reviewed by the Physician Assistant Committee prior to authorization; (2) that Ms. Conner be required to practice under direct supervision for a minimum of six months; and (3) that Ms. Conner’s supervising physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when the direct supervision requirement should be lifted. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that the Committee reviewed and discussed the application for physician assistant licensure of Carol Marie Williams, P.A.-C. Following discussion, the Physician Assistant Committee requested that Ms. Williams appear before the Committee at its November 2016 meeting.
Mr. Wright reported that the Committee reviewed and discussed a matter involving potential professional misconduct of a licensee. Following discussion, the Committee elected to refer this matter to the Complaint Committee.

Mr. Wright reported that the Committee reviewed and provisionally approved two practice agreements.

Mr. Wright reported to the Board that sixty-seven practice agreements were authorized during the period of June 25, 2016 through September 9, 2016. Additionally, forty-seven alternate supervising physicians were designated.

Mr. Wright reported that the Physician Assistant Coordinator, Amy Callihan-Young, has been out of the office for an extended period of time. He acknowledged the Licensure and Certification Unit for their diligent work in Ms. Young’s absence.

Dr. Cain delivered the report of the Licensure Committee, which met on Saturday, September 10, 2016.

Donald Carl Fidler, M.D. appeared before the Licensure Committee in support of his application for reactivation of his permanent medical license. Following discussion, it was the recommendation of the Licensure Committee to accept the total continuing medical hours submitted by the applicant as satisfactory completed, and to approve Dr. Fidler for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

Sarah Brooke Cash, M.D. appeared before the Licensure Committee in support of her application for a permanent medical license. Following discussion, it was the
recommendation of the Committee that Dr. Cash be approved for licensure. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

Frank Morrison Sutton, Jr., M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. Following discussion, it was the recommendation of the Committee that Dr. Sutton be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

Mark Roncalli LoDico, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. Following discussion, it was the recommendation of the Committee that Dr. LoDico be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

Kamrooz Sanii, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. Following discussion, it was the recommendation of the Committee that Dr. Sanii be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

Carlos Oscar Geigel, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. Following discussion, it was the recommendation of the Committee that Dr. Geigel be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

Immanuel Dickson Amissah, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. Following discussion, it was
the recommendation of the Committee that Dr. Amissah be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

Robert Horton Brewer, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. Following discussion, it was the recommendation of the Committee that Dr. Brewer be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Stephen McNeil Coarsey, M.D. Following discussion, the Committee elected to place Dr. Coarsey's application on hold pending receipt of additional information.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Faiz Mohammed Behsudi, M.D. Following discussion, it was the recommendation of the Licensure Committee to accept the total continuing medical education hours submitted by the applicant as satisfactory completed, and to approve Dr. Behsudi for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical licensure of Ahmed Soliman Behairy, M.D. Following discussion, it was the recommendation of the Committee to accept his medical education as satisfactory verified, and approved Dr. Behairy for licensure, pending payment of the mandatory Patient Injury Compensation Fund assessment fee, based on the following factors: (1) his medical school verification has been unable to be received from the Ain Shams University Faculty of Medicine in Egypt, a country currently in civil unrest; (2) primary
source verification was not available from other state boards; and (3) Dr. Behairy has ECFMG certification. He also has six years of ACGME accredited training, Board certification, active licenses in two other states and more than twenty years of practice in the United States. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

At its May 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Brian David Baxt, M.D. The Committee requested that Dr. Baxt appear before the Committee at its July 2016 meeting. Dr. Baxt requested to delay his appearance, and was scheduled to appear at the September 10, 2016 meeting. In lieu of appearing before the Committee, Dr. Baxt submitted a request to withdraw his application. The Committee recommended that the Board accept Dr. Baxt’s withdrawal request. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Committee reviewed and discussed the application for a permanent medical license of Abid Bashir Darr, M.D. Following discussion, the Committee elected to place Dr. Darr’s application on hold pending receipt of additional information.

At its July 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of James Anthony Murphy, M.D. Following discussion, the Licensure Committee recommended that Dr. Murphy be given the opportunity to withdraw his application. Dr. Murphy submitted a request to withdraw his application. The Committee recommended that the Board accept Dr. Murphy’s withdrawal request. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.
The Licensure Committee reviewed and discussed the application for a permanent medical license of Amro Al-Astal, M.D. Following discussion, the Committee requested that Dr. Al-Astal appear before the Licensure Committee at its November 2016 meeting.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Joel David Shiffler, M.D. Following discussion, the Committee requested that Dr. Shiffler appear before the Licensure Committee at its November 2016 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Savita Sunil Naik, M.D. Following discussion, it was the recommendation of the Licensure Committee that Dr. Naik be approved for licensure pending receipt of satisfactory evidence of completion of her third year of postgraduate training and payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Jessica Athalia Henry, M.D. Following discussion, the Committee requested that Dr. Henry appear before the Licensure Committee at its November 2016 meeting.

The Committee reviewed and discussed the application for reactivation of the permanent medical license of Marina Mikhailovna Ravich, M.D. Following discussion, it was the recommendation of the Licensure Committee to accept the total continuing medical education hours submitted by the applicant as satisfactory completed, and to approve Dr. Ravich for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.
The Committee reviewed and discussed the application for reactivation of the permanent medical license of Jeremy Joel Corbett, M.D. Following discussion, it was the recommendation of the Licensure Committee to accept the total continuing medical education hours submitted by the applicant as satisfactory completed, and to approve Dr. Corbett for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee presented a list of compliant applications, which included one hundred and one initial medical doctor applications. Additionally, the Committee presented a list of four initial medical doctor applicants that are pending payment of the mandatory Patient Injury Compensation Fund assessment fee. Seven compliant applications for reactivation of medical doctor licensure and two podiatric physician applications were also presented. It was the recommendation of the Licensure Committee to approve the following applicants for licensure:

**APPLICANTS FOR PERMANENT LICENSURE- Physicians**

Abraham, Anitha Thomas  
Ahmed, Masih Uddin  
Ali, Abbas Syed  
Alqahtani, Fahad S.  
Aziz, Kany Salah  
Bailey, Ariel Lynn  
Barba, Jose Paras  
Bhatnagar, rishi  
Bissler, John Joseph  
Brunker, Patricia Ann Ramaley  
Bunnell, Susan Lynn  
Burrus, Tamika Marquitta  
Bussain, Anne Hearn  
Chang, Enoch H.  
Chang, Johanna Moscardon  
Cheng, Elaine  
Christopher, Andrew  
Chung, Jeffson Cahi-Hsien  
Conway, Collin James  
Cross, Sara Anne
Culp, Jane Ann
Deng, Min
Desai, Khirenkumar I.
Dodds Hogan, Danika Adria
Duke, Duane Stopp
Ears, James Patrick
Edwards, Rachel Elizabeth
Ezeala, Yvonne Nneka
Fox, Danita Renelsa
Friedmann, Craig Henry
Frielng, Gretchen Williams
Gan, Fang-Yun
Goh, King soon
Gokhale, Sumita
Goldman, Natalia Rodriguez
Griffin, John David
Grove, Christopher Allen
Hafez, Maria
Hammer, Maxim Daniel
Henry, Charles Stephen
Hensley, Brian Michael
Herbig, Peter Karl
Hibbard, Kevin Michael
Hughes, Lisa Beth
Iqbal, Anwar
Jadhav, Ashutosh Prahadkar
Kallas, Sarah Jo Burton
Kenmuir, Cynthia Lynn
Kibirova, Albina
Klug, Rebecca Lynn
Klodney, Michael Spencer
Kritz, Tracy Anne
Laccheo, Ikuko
Lilly, Brandon Keith
Lot, Lucy Joyce
Mancusi-Ungaro, Peter Curt
Mantine, Laura M.
McCluskey, Kevin Michael
Miller, Gary stuart
Miller, Robin Kate
Misra, Sutanu
Mittal, Vikrant
Moiduddin, Nasser
Molyneaux, Bradley John
Morrison, Christopher Andrew
Morton-Eggleston, Emma Brown
Moszkowicz, Arie I.
Navia, Ramiro Oswaldo
Niceler, Brock James
Niner, Jr., Joseph Anthony
Patel, Nick Rohit
Perry, John Wesley
Perry, Michael William
Phillips-Lee, Misha Janelle
Raybuck, Bryan D.
Rocha, Marcelo de Avilez
Rodriguez Galvis, Claudia Yasmin
Rosenstein, Maury Michael
Rosenthal, Ian Matthew
Runkana, Ashok
Schosheim, John Paul
Schultes, Glenn James
Shahbodagh, Siavash David
Shepet, Kevin Harris
Simon, Michael Bradley
Singh, Abhijai
Smith, Hunter Alexander
Smith, Steven Ray
Soder, Angela June
Starr, Matthew Todd
Stecher, Robert Palmer
Stephens, Benjamin Hutton
Tabi, Ayuk Eric
Tainsh, Cynthia Shearn
Taylor, Christopher Thomas
Trites, Paul Nathan
Turnes, Patrick Allen
Vajapey, Gettanjali
Walz, Elizabeth Terese
Winslow, Caroiline Yancey
Ysla, Francis Medina

APPLICANTS FOR PERMANENT LICENSURE – Physicians approved pending receipt of the Patient Injury Compensation Fund assessment fee

Menard, Mary Kathryn
Newberry, Michael
Oliveira, Celia Regina
Singh, Shailendra

REACTIVATION APPLICANTS WHOSE LICENSE HAS NOT BEEN ACTIVE
FOR MORE THAN ONE YEAR – Physicians

Byerly, Mariella Moes
Caruso, John Robert
Echterling, Susan c.
Mohan, Niraj
Mullens, Kevin Daniel
Presley, Michael William
Sullican, Jr., Lawrence Xavier

APPLICANTS FOR PERMANENT LICENSURE – Podiatric Physicians

Khan, Asma Nasir
Petkovic, Barbara Lynn

Dr. Cain asked the Board members if there were any conflicts, and no conflicts were declared. The Licensure Committee recommended that these applicants be granted original and/or reactivated licenses by the Board. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

In the absence of Dr. Challa, Dr. Arnold chaired the September 11, 2016 Complaint Committee meeting. Dr. Arnold reported that a special meeting of the Complaint Committee was held on August 2, 2016, at which time complaint number 16-113-W was initiated. With regard to the September 11, 2016 meeting, Dr. Arnold provided the following report:

CLOSURES

16-29-W    Jeffery Floyd Addison, M.D.
16-71-A    Jeffery Floyd Addison, M.D.
16-60-W    Eric Bonnem, M.D.
16-70-P Prudencio Chu Corro, M.D.
16-16-B Stephen David Durrenberger, M.D.
16-76-C Warren Lee Grace, M.D.
15-119-E Dale Steven Herman, D.P.M.
16-58-B Roshan Ally Hussain, M.D.
16-61-W Matthew Page Jones, M.D.
15-28-V Brian Stephen Love, M.D.
15-40-W Brian Stephen Love, M.D.
16-96-W Donald Hastings Michels, M.D.
16-59-N Dustin Edward Robinson, M.D.
16-102-W Velayudhan Sahadevan, M.D.
16-78-M Rupali Nitin Sangrampurkar, M.D.
15-165-W Rodney F. Sempirek, P.A.-C
16-83-A Michael Shramowiat, M.D.
16-79-P Jennifer Anne Sivak-Callcott, M.D.
15-105-W Denise Coral Smyth, M.D.
16-68-W Aris Querol Urbanes, M.D.
16-80-H Johnny George Walker, M.D.
16-106-W John William Wyllie, M.D.
16-77-H Eduardo Daniel Zamora, M.D.

INITIATED COMPLAINTS

16-128-W
16-129-W
16-130-W
16-131-W
16-132-W
16-133-W
16-134-W

CONSENT ORDERS

Dr. Arnold requested that the Board authorize the Complaint Committee to move forward with offering two Consent Orders and/or Amended Consent Orders in ongoing Complaint Committee matters. The motion of the Complaint Committee was given by Dr. Arnold, and the motion carried.
FULLY EXECUTED CONSENT ORDERS

Dr. Arnold reported that the following Consent Order has been entered since July 10, 2016.

On July 11, 2016, Vernon Ray Stanley, M.D. entered into a Consent Order with the Board, which imposed a public reprimand in association with his medical recordkeeping while practicing medicine at the Hope Clinic and a civil fine in the amount of $1,000.00. Dr. Stanley is also restricted from treating patients for chronic pain or practicing medicine at any practice location where patients are treated for chronic pain.

Dr. Arnold reported that the Complaint Committee is currently conducting an investigation in connection with very serious allegations against a particular physician referenced to as Physician A. Physician A appeared before the Complaint Committee yesterday, September 11, 2016. Based upon Physician A’s demeanor, confusing behavior and responses to questions posed to the physician by the Committee members, the Committee unanimously agreed that there are concerns regarding the mental and physical health and well-being of Physician A. In connection with its current investigation, and pursuant to W. Va. §30-3-14(f), the Complaint Committee requests that the Board authorize the issuance of an Order requiring Physician A to submit to a complete mental and physical examination, by a physician or physicians approved by the Board. The following Complaint Committee members were conflicted from voting and left the meeting room: Dr. Arnold, Ms. Henderson and Dr. Upton. Following discussion, with a quorum of the Board present and voting, the Board ratified the Complaint Committee’s request to authorize the issuance of an Order requiring Physician A to submit to a complete mental and physical examination by a physician or physicians approved by the Board. Thereafter Dr. Arnold, Ms. Henderson and Dr. Upton returned to the meeting room.
Dr. Arnold reported that on June 30, 2014, the Board and Joseph Anthony Jurand, M.D. voluntarily entered into a Consent Order, which required Dr. Jurand to limit his patient population to exclude minors and certain other patients. It also required Dr. Jurand to follow practice recommendations established by the Professional Renewal Center. One of the Professional Renewal Center practice recommendations provided that Dr. Jurand not work in a private practice. Dr. Jurand has been working as an employed physician in a Martinsburg addiction clinic. On August 24, 2016, the second physician at this location resigned, and Dr. Jurand is now the only physician on site. Prior to that, despite assertions in the summer of 2015 by Dr. Jurand that the second physician was going to be at the clinic full-time, the second physician was not present full-time. The Complaint Committee recommended that the Board find Dr. Jurand in violation of his Consent Order, and moved that the Board dissolve the stay of suspension, effective September 30, 2016, which would allow adequate notification to be given to his patients. The Board received and reviewed the documentation relied upon by the Committee in making its recommendation. Thereafter, the motion of the Complaint Committee, which was given by Dr. Arnold, carried.

Prior to today’s meeting, copies of the July 1, 2014 and June 21, 2016 Nominating Committee Minutes were made available to Board members for review. Ms. Hays reported that the Nominating Committee generally only meets once every two years, delaying approval of the minutes. The Nominating Committee recommends that the Board approve the July 1, 2014 minutes, as well as the June 21, 2016 minutes. The motion of the Nominating Committee was presented by Ms. Hayes, and the motion carried.
There being no further business to consider, Reverend Bowyer moved that the meeting be adjourned. Ms. Hays seconded, and the motion carried.

Ahmed D. Faheem, M.D.
President

Rahul Gupta, M.D., M.P.H
Secretary
Call to Order

Approval of Minutes

- September 12, 2016

Announcements

Committee and Staff Reports, Discussion and Action:

- Legislative Committee
- Executive/Management Committee
- Board Attorney
- Physician Assistant Committee
- Licensure Committee
- Complaint Committee

ADJOURNMENT
A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 14th day of November 2016 at 9:00 a.m.

The following Board members were present for the meeting:

Ahmed D. Faheem, M.D., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
R. Curtis Arnold, D.P.M.
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Harry Duncan, M.D.
Cheryl Henderson, J.D.
Carlos Jimenez, M.D.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
Matthew Upton, M.D.
K. Dean Wright, P.A.-C.

The following Board members were absent:

Rahul Gupta, M.D., M.P.H., Secretary
Beth Hays, M.A.
David Mullins, M.D.

The following staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Jamie C. Frame
Leslie A. Inghram
Dr. Faheem called the meeting to order and extended a warm welcome to Dr. Duncan who was appointed as a member of the Board in September as a successor to Michael Ferrebee, M.D. Dr. Arnold moved that the minutes of the September 12, 2016 Board meeting be approved. Reverend Bowyer seconded, and the motion carried.

Dr. Faheem announced that the Board term of Michael Ferrebee, M.D. expired on September 30, 2015; however, Dr. Ferrebee remained on the Board through July 2016. In recognition of his dedication to the mission of the Board and his many contributions over the years, the Board will present Dr. Ferrebee with a plaque.

Dr. Faheem announced that in September, and in addition to the appointment of Dr. Duncan, Governor Tomblin appointed David A. Mullins, M.D. to the Board of Medicine. Dr. Mullins is a general surgeon who practices in Princeton; he succeeds Kenneth Nanners, M.D.

Dr. Faheem announced that in October, Pennsylvania became the 18th state to join the Interstate Medical Licensure Compact. The Interstate Medical Licensure Compact Commission continues to progress, and anticipates that the expedited licensure process will be available to qualifying physicians as early as January 2017.

Dr. Faheem announced that the Board’s newsletter is scheduled to be released on December 14, 2016.

Dr. Faheem announced that there will be a special board meeting held on Thursday, December 1, 2016 at 4:30 p.m. to finalize the selection of an Executive Director.

Dr. Faheem announced that in recognition Mr. Knittle’s dedication and contributions to the Board throughout the years, a farewell dinner is planned for the
evening of Saturday, January 7, 2017. Further information regarding this event will be provided to members in the coming weeks. Board members expressed their sincere appreciation to Mr. Knittle.

In the absence of Ms. Hays, Dr. Faheem chaired the Legislative Committee meeting yesterday, Sunday, November 13, 2016 and provided the report of the Committee.

Dr. Faheem reported that the Board’s proposed legislative rules 11CSR1A, Licensing and Disciplinary Procedures: Physicians; Podiatric Physicians and Surgeons, 11CSR1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants, and 11CSR5, Board of Medicine Rules for Dispensing of Prescription Drugs by Practitioners, have been promulgated, undergone a public comment period, and have been reviewed by the Legislative Rule-Making Review Committee. Non-substantive changes were made, and a modified version of each rule has been submitted to the Secretary of State’s Office.

Dr. Faheem reported that on behalf of the Board of Medicine and in response to the West Virginia Board of Examiners for Registered Professional Nurses’ proposed revision of 19 CSR 8, Limited Prescriptive Authority for Nurses in Advances Care, Mr. Knittle submitted comments regarding concerns in lifting the limitation on the prescribing of benzodiazepines. The Committee will continue to monitor and express ongoing concerns regarding this revision during the upcoming legislative session.

Dr. Faheem reported that the following topics may be addressed during the 2017 legislative session: amendments to §30-3-13a. Telemedicine Practice; Requirements; Exceptions; Definitions; Rule-Making; marijuana legalization; establishment of a statewide drug repository program; board restructuring; and sweeping of special revenue
accounts.

Dr. Faheem reported that moving forward the Board may need to hire a part-time employee to assist with legislative matters.

Dr. Faheem reported that the Executive/Management Committee met yesterday morning, Sunday, November 13, 2016, at which time Mr. Knittle reported that the Board continues to maintain a solid financial position. The Committee was presented with and approved the fiscal reports and purchasing card transactions for the months of July, August, September and October.

Dr. Faheem reported that the Committee reviewed the following proposed schedule of 2017 Board meeting dates:

January 9, 2017
March 13, 2017
May 8, 2017
July 10, 2017
September 11, 2017
November 13, 2017

Reverend Bowyer moved that the 2017 Board meeting dates be approved as presented. Dr. Upton seconded, and the motion carried.

Dr. Faheem reported that the Board’s policy titled Data 2000 and Treatment of Opioid Addiction in the Medical Office, which was adopted by the Board in September 2013, is currently inconsistent with federal law. In August 2016, changes were made to the federal regulation which permits practitioners who have been certified by the Substance Abuse and Mental Health Services Administration for at least one year to provide medication assisted treatment for opioid use disorder for up to 100. The changes
permit a practitioner to request a subsequent increase for up to a maximum patient load of 275. Following discussion, the Committee recommended that the Board withdraw the current policy on Data 2000 and Treatment of Opioid Addiction in the Medical Office, and replace it with the following:

It is the policy of the West Virginia Board of Medicine that physicians who engage in the treatment of opioid addiction and/or substance use disorder in a medical office setting shall ensure that they are and remain in compliance with all applicable state and federal laws. Physicians who engage in the office based treatment of substance use disorders with medication assistance, such as buprenorphine, must be familiar with all current state and federal requirements for the office based use of any and all such medications, including but not limited to 41 C.F.R. Part 8, Subpart F.

Following review, Mr. Wright moved that the current policy on Data 2000 and Treatment of Opioid Addiction in the Medical Office be withdrawn and replaced with the language presented to the Board (above). Dr. Arnold seconded, and the motion carried.

Dr. Faheem reported that the Board’s Position Statement on Telemedicine was adopted in November 2014. This statement closely resembles, but is not identical to W. Va. Code §30-3-13a., regarding telemedicine practice; requirements; exceptions; definitions; and rule-making, which was enacted during the 2016 legislative session. Following discussion, Reverend Bowyer moved that the Board withdraw its Position Statement on Telemedicine as moot. Dr. Cain seconded, and the motion carried.

Dr. Faheem reported that the following committees exist, but are not currently utilized: Ad Hoc Americans with Disabilities Act Committee; Corporate Practice of Medicine Committee; and Professional Liability Committee. During the Executive / Management Committee meeting yesterday these committees were retired, but may be reconstituted in the future if needed.
Dr. Faheem reported that several changes have occurred with regard to personnel. Ms. Amy Young, who served as the Physician Assistant Coordinator, is no longer employed by the Board. Following Ms. Young’s departure, Sheree Thompson, Supervisor of Licensing, Certification and Renewals, will staff the Physician Assistant Committee meeting. Ryan Moore, who previously held the Administrative Assistant/Receptionist position with the Board, has assumed the position of Physician Assistant Licensure Analyst. The Administrative Office Assistant/Receptionist position is currently vacant.

Dr. Faheem reported that it is anticipated that as of January 1, 2017 the West Virginia Board of Examiners for Registered Professional Nurses will no longer be housed at 101 Dee Drive, leaving the space currently occupied by the RN Board available for lease.

Dr. Faheem reported that in response to legislation passed during the 2016 legislative session, staff members have been working to implement requirements regarding controlled substance monitoring program certification, collection of the mandatory patient injury compensation fund fee and criminal history record checks.

Ms. Alley reported that the matter of Shivkumar Iyer, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent, is set for oral argument in Kanawha County Circuit Court on December 9, 2016. This matter is being handled by Greg Foster, Esq. of the Attorney General’s office.

Ms. Alley reported that with regard to the matter of O.H., M.D., Petitioner, v. West Virginia Board of Medicine, Respondent, the West Virginia Supreme Court of Appeals issued an opinion affirming that the Board was in compliance with §30-1-5(c) in
handling the complaint. The mandate will issue 30 days after the opinion was published unless a request for reconsideration is filed. When the mandate issues, the Board will be able to continue its work on the underlying administrative complaint.

Ms. Alley reported that in late September, William Cunningham, appearing pro se, filed a petition for judicial review in the Circuit Court of Wood County (16-P-145) asking the Court to review a closure decision related to a complaint he filed with the Board against a former provider. The Board filed a Motion to Dismiss the petition in early October. Thereafter, Mr. Cunningham agreed to an Agreed Order of Dismissal. The proposed order has been presented to the judge for consideration, and the Board is awaiting action by the Court.

Ms. Alley reported that in 2014, the Board entered into a Consent Order with Joseph Anthony Jurand, M.D. The Consent Order imposed a stayed suspension and a five year period of probation with terms and conditions, including a requirement that Dr. Jurand be evaluated by the Professional Renewal Center and comport with any practice recommendations they made. At the September meeting, the Board voted to dissolve the stay of suspension based upon its determination that Dr. Jurand had violated the terms of his Consent Order. Dr. Jurand has filed a Petition for Appeal in the Circuit Court of Jefferson County on two grounds: (1) the existence of additional or new evidence; and (2) allegations that the Board Order violated Dr. Jurand’s due process rights. Under the Administrative Procedure Act (APA), Dr. Jurand asked for an evidentiary hearing in the Circuit Court to consider his new evidence. The Board filed a response to the petition on Friday, November 4, 2016 asking the court to affirm the Board’s Order, and deny that the new evidence was material to the Board’s determination. The Board further contended that there were no due process violations, and that the APA did not apply, so an evidentiary hearing was not proper. On Thursday, November 10, 2016, the Court set an evidentiary hearing for Friday, December 9, 2016.
Dr. Jimenez joined the meeting as Ms. Alley reported that a licensure denial hearing was held on September 16, 2016. Briefing concludes on Friday, November 18, 2016, at which point this matter will be ripe for the hearing examiner to issue a recommended decision for the Board’s consideration, potentially at the January 2017 Board meeting.

Ms. Alley reported that there are two disciplinary hearings scheduled for December of this year.

Mr. Wright provided the report of the Physician Assistant Committee, which met on Saturday, November 13, 2016.

Mr. Wright reported that at the Board meeting on September 12, 2016, the Physician Assistant Committee recommended, and the Board approved, that Kimberly Elaine Connor, P.A.-C. be approved for licensure contingent upon her acceptance of a Consent Order with the following terms: (1) that any proposed practice agreement submitted by Ms. Connor must be reviewed by the Physician Assistant Committee; (2) that Ms. Connor practice under direct supervision for a minimum of six months; and (3) that Ms. Connor’s supervising physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when the direct supervision requirement should be lifted. Ms. Connor agreed to these terms, and entered into a Consent Order with the Board on September 27, 2016.

Mr. Wright reported that Carol Marie Williams, P.A.-C., appeared before the Committee in support of her application for Physician Assistant Licensure. Following discussion, it was the recommendation of the Committee that Ms. Williams be approved for licensure and her practice agreement authorized with core duties only. If Ms. Williams continues to seek advanced duties she will submit the appropriate logs (with a
signed verification) of procedures completed on bona fide patients under personal supervision of the supervising physician to the Physician Assistant Committee for review prior to authorization. In addition, she must submit a signed and notarized statement that she has read the Physician Assistant Practice act and Rule 11 CSR1B. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

The Physician Assistant Committee recommended the following applicants be approved for Physician Assistant Licensure:

Bryson, Lance
Cook, Kaitlyn Elizabeth
Devabhakthuni, Ravi Chandra
Flury, Gregory Alan
Hafer, Rebecca Louise
Harrison, Richard Allen
Humphry, Kirsten
Lovin, Kathleen Ann
Lucas, Landyn Alizabeth
Maynard, Matthew James
Paugh, Amanda Marie
Pauley, Frances Nicole
Robinson, Kelly Ann
Rush, Kaleb Paul
Shaver, Lynne Alice
Sison, Julieta
Shillenburg, Wendi Sue
Taylor, Jennifer Nicole
Workman, Kelsey R.
Reverend Bowyer declared a conflict with regard to applicant Ravi Chandra Devabakhthuni, P.A.-C., and left the meeting room. Thereafter, Mr. Wright moved that this applicant be approved for licensure, and the Board voted to approve Mr. Devabakhthuni for licensure. Thereafter, Reverend Bowyer returned to the meeting room. Dr. Arnold and Dr. Challa declared a conflict with regard to applicant Frances Nicole Pauley, P.A.-C., and left the meeting room. Thereafter, Mr. Wright moved that this applicant be approved for licensure, and the Board voted to approve Ms. Pauley for licensure. Thereafter, Dr. Arnold and Dr. Challa returned to the meeting room. There being no addition conflicts declared, the Physician Assistant Committee recommended that the remaining applicants be granted licenses by the Board. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that the Physician Assistant Committee reviewed the quarterly status reports submitted pursuant to the Consent Order of Jack Thomas Doty, III, P.A.-C., which Mr. Doty entered with the Board on April 27, 2016. Mr. Doty was restricted to direct supervision for a minimum period of six months. Mr. Doty’s supervising physician has recommended that the restriction be lifted. The Physician Assistant Committee was in agreement that Mr. Doty be released from his Consent Order.

Mr. Wright reported that the Physician Assistant Committee reviewed the current process of Board staff verifying supervision at school-based health centers.

Mr. Wright reported that the Physician Assistant Committee reviewed the current practice of submitting logs for approval of advanced duties. Following discussion, the Committee decided that the Board contact the physician assistant programs at the colleges that the majority of the current physician assistant licensees attended regarding logs being made available for advanced duties for its program’s graduates during their education.
Mr. Wright reported that the Physician Assistant Committee reviewed a matter involving potential professional misconduct of a licensee. Following discussion, the Committee elected to refer this matter to the Complaint Committee.

Mr. Wright reported that Board staff have authorized that fifty-five (55) practice agreements for the period of September 10, 2016 to November 10, 2016. Additionally, forty-one (41) alternate supervising physicians were designated.

Dr. Cain delivered the report of the Licensure Committee, which met on Saturday, November 12, 2016.

Jessica Athalia Henry, M.D. appeared before the Licensure Committee in support of her application for a permanent medical license. It was the recommendation of the Licensure Committee that Dr. Henry be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

Mark Samaan, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. It was the recommendation of the Licensure Committee that Dr. Samaan be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

Christopher Michael Hill, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. It was the recommendation of the Committee that Dr. Hill be approved for licensure. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.
Imran Farooqi, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. It was the recommendation of the Committee that Dr. Farooqi be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

At its September 2016 meeting, the Licensure Committee reviewed and discussed the application for activation of the permanent medical license of Joel David Shiffler, M.D., which was previously revoked by the Board on July 15, 2009. Dr. Shiffler was requested to appear before the Licensure Committee at its November meeting. Dr. Shiffler appeared before the Licensure Committee in support of his application. Effective July 15, 2009, Dr. Shiffler’s West Virginia medical license was revoked by the Board based upon his non-compliance with the term and conditions of his February 2008 Amended Consent Order. Based upon patient complaints, and as a result of Complaint Committee investigations, Dr. Shiffler entered into a Consent Order with the Board which imposed a stayed suspension and required him to have a clinical practice and skills evaluation by CPEP for offenses including self-prescribing controlled substances, other prescribing offenses and allegations that his practice did not meet the standard of care. After CPEP evaluated Dr. Shiffler it recommended that he “retrain for a period of time in a residency or residency-like setting,” and noted that with the Board’s approval, Dr. Shiffler could retrain in a non-residency setting with “full supervision while updating his knowledge base.” An Amended Consent Order followed these recommendations. Dr. Shiffler’s license was ultimately revoked by the Board for his failure to find a preceptor and his associated violation of the terms of his Amended Consent Order. Copies of each of these Orders, along with the Circuit Court Orders affirming the revocation were made available to members to review at today’s meeting.

Pursuant to W. Va. Code §30-3-14(o), “[a] physician...whose license is limited or surrendered or against whom other action is taken under this subsection may, at
reasonable intervals, petition for removal of any restriction or limitation on or for reinstatement of his or her license to practice medicine and surgery[.]”

During Dr. Shiffler’s appearance before the Licensure Committee, Dr. Shiffler was given the opportunity to address his qualifications for relicensure, and a thorough discussion occurred.

The Licensure Committee recommended that the Board make a preliminary determination of probable denial based upon the following:

1. The Board’s consideration of the facts and circumstances which formed the basis of the Orders reviewed by the Board including Dr. Shiffler’s Amended Consent Order and Revocation Order.

2. The results and recommendations emanating from Dr. Shiffler's evaluation by the Center for Personalized Education for Physicians [“CPEP”] in 2007. Upon evaluating Dr. Shiffler, CPEP’s September 6, 2007 Assessment Report recommended that Dr. Shiffler “retrain for a period of time in a residency or residency-like setting,” and noted that with the Board’s approval, Dr. Shiffler could retrain in a non-residency setting with “full supervision while updating his knowledge base.”

3. During Dr. Shiffler’s appearance before the Licensure Committee on November 12, 2016, Dr. Shiffler verified that he has not engaged in any retraining in a residency or residency-like setting since CPEP issued its Assessment Report in September 2007.

4. During Dr. Shiffler’s appearance before the Licensure Committee on November 12, 2016, he verified that he has not engaged in any retraining in a non-residency setting with full supervision since CPEP issued its Assessment Report in September 2007.

5. Dr. Shiffler has failed to ameliorate or rehabilitate his non-compliance with the terms of his Amended Consent Order and has taken no steps, which are consistent with the 2007 CPEP report, to rehabilitate his practice skills and fund of medical knowledge.

6. During Dr. Shiffler’s appearance before the Licensure Committee on November 12, 2016, he also verified that he has not engaged in the practice of medicine, in any jurisdiction, since his July 15, 2009 revocation, resulting in an absence from clinical practice for a period of greater than seven years and four months.
The Committee further recommended that the Board find that Dr. Shiffler has failed to meet his burden of satisfying the Board that he is qualified for licensure as required by W. Va. Code R. §11-1A-4.12 (2007), and that under all of the circumstances, it would not protect the public health, interest, safety and welfare to grant Dr. Shiffler a license to practice medicine in the state of West Virginia.

In addition to Dr. Shiffler’s lengthy absence from clinical practice, and his failure to follow through with the CPEP recommendations in violation of his Amended Consent Order and thereafter, the Committee recommended that the Board conclude that Dr. Shiffler is unqualified for licensure pursuant to any statutory basis set forth as the basis for discipline in Dr. Shiffler’s Amended Consent Order and pursuant to the following professional conduct standards set forth in the West Virginia Medical Practice Act and the Board’s legislative rules:

W. Va. Code §30-3-14(c) (20) relating to professional incompetence; or
W. Va. Code §30-3-14(c) (17) and W. Va. Code R. §11-1A-12.1.i. relating to demonstrating a lack of professional competence to practice medicine with a reasonable degree of skill or safety for patients; and/or
W. Va. Code §30-3-14(c)(17) and W. Va. Code R. §11-1A-12.1.x, relating to engaging in malpractice or failure to practice medicine with that level of care, skill and treatment which is recognized by a reasonable, prudent physician engaged in the same or similar specialty as being acceptable.

The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Sassan Naderi, M.D. The Committee reported that it will request that Dr. Naderi appear before the Licensure Committee at its January 2017 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Michael Hosny Gabriel, M.D. The Committee reported that it will
request that Dr. Gabriel appear before the Licensure Committee at its January 2017 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Amro Al-Astal, M.D. It was the recommendation of the Licensure Committee that Dr. Al-Astal be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Carmen Lisa Anderson, M.D. It was the recommendation of the Licensure Committee to accept the total continuing medical education hours submitted by the applicant as satisfactory completed, and to approve Dr. Anderson for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Juan Manuel D’Brot, M.D. It was the recommendation of the Licensure Committee to accept the total continuing medical education hours submitted by the applicant as satisfactory completed, and to approve Dr. D’Brot for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reported that Paul Webber Burke, Jr., M.D. is scheduled to appear before the Licensure Committee in January 2017.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Stephen McNeil Coarsey, M.D. It was the recommendation of the Licensure Committee that Dr. Coarsey be approved for licensure pending payment of the
mandatory Patient Injury Compensation Fund assessment fee. The motion of the
Licensure Committee was given by Dr. Cain, and the motion carried.

At its July 2016 meeting, the Licensure Committee reviewed and discussed the
application for a permanent medical license of Abid Bashir Darr, M.D. and determined to
take no further action upon his application at this time, pending additional
 correspondence.

The FSMB notified the Board that it is no longer going to provide copies of
ECFMG certificates in the FCVS packet prepared for licensure applicants, and instead
will provide a status report. If the Board wants the applicant to submit a certificate copy
it will have to receive it from the applicant. It has been Board practice to require copies
of valid ECFMG certificates for evidence of fulfilling the requirements of the
Educational Commission for Foreign Medical Graduates certification. The Licensure
Committee reported to the Board that it has elected to accept either a copy of the ECFMG
certificate or a status report for fulfillment of this application requirement.

The Licensure Committee presented a list of compliant applications, which
included seventy-nine medical doctor applications, two complaint applications for
reactivation of medical doctor licensure and two podiatric physician applications. In
addition, three initial medical doctor applicants are pending payment of the mandatory
Patient Injury Compensation Fund assessment fee. It was the recommendation of the
Licensure Committee to approve the following applicants for licensure:

**APPLICANTS FOR PERMANENT LICENSURE - Physicians**

Barghouthi, Nadia Thair
Barman, Rajdip
Beckum, Kathleen Martin
Bergen, Deborah Ruth
Bernal, Oscar Guillermo
Bromer, Jason Gabriel
Brown, Brian John
Bushen, Oluma Yoseph
Cassano, Charvi Ashok
Chung, Lily ShinShil
Clough, Thomas Edward Jr.
Danielson, Laura Marie
Darville, Candice Cheryl
DeZastro, Timothy Gerard
Feinberg, Judith
Ghim, Michael Youngshik
Goldszmidt, Adrian Javier
Han, Steve Woo Chul
Henkel, David Michael
Horner, Cynthia Pfeiffer
Hsu, Jack Ming
Hussain, Yessar Mufeed
Isla, Edward Charles
Israel, Joshua A.
Jackson, III, Ollie Joseph
Jagait, Harvinder Singh
Jaiswal, Shikha
Jones, Kendall Maurice
Jovin, Tudor Gheorghe
Kaler, Lawrence William
Kanjwal, Mohammad Khalil
Khachemoune, Amor
Kolodney, Joanna Amy
Kwakye, Kwabena Adomako
Langlieb, Alan Mark
Lewis, Paul Wesley
Lona, Adrienne
Lucas Day, Kimberly Ann
Malhotra, Vikram
Maroch, Vikram
Mayne, Jennifer Chenault
McCollum, Mark Oldham
McCubbin, Mark Daniel
McKay, Kristopher M.
Mehlman, Karyl Norcross
Metzler, Michael David
Mohammed, Benhur Bushara
Muhlauer, Helen Gertrude
Nelson, Lindsey Allan
Olson, Jennifer Elizabeth
Porter, Fernando Antonio
Powers, Tonya Kim
Price, Craig Charles
Pryor, II, Howard Irwin
Qazi, Aisha N.
Rommel, Bethany Marie
Saconn, Paul Anthony
Sarraj, Amrou
Schaefer, Jamie Lea
Shah, Saqib Mian
Shahrour, Yasser
Singh, Paramvir
Sinning, Kristin Melissa
Siripurapu, Prasad Rajendra
Song, Samuel Sungwon
Stamilio, David M.
Stepanian, Marshall William
Stewart, Virginia Annette
Thangudu, Pavan Kumar
Turner, Ryan Coddington
Ulene, Valerie Gail
Vereb, Margaret Jeanne
Vitto, Anthony
Wechsler, Lawrence Richard
Wilson, John Travis
Wong, Alexander Wyman
Wu, Tzu-Ching
Zehner, Joseph Baker
Zhong, Wen

APPLICANTS FOR PERMANENT LICENSURE – Physicians approved pending receipt of the Patient Injury Compensation Fund assessment fee

Holly, Dale Crawford
Pincavitch, Jami Diamond
Van, Phillip Lee

REACTIVATION APPLICANTS WHOSE LICENSE HAS NOT BEEN ACTIVE FOR MORE THAN ONE YEAR – Physicians

Dinsmore, John Evans
Sarker, Chita Ranjan
APPLICANTS FOR PERMANENT LICENSURE – Podiatric Physicians

Evangelista, Allan
Gaspar, Philip Anthony

Dr. Cain asked the Board members if there were any conflicts, and no conflicts were declared. The Licensure Committee recommended that these applicants be granted original and/or reactivated licenses by the Board. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

Dr. Challa reported on the actions of the Complaint Committee pursuant to its meeting on November 13, 2016.

CLOSURES

16-74-R    David A. Anderson, D.P.M.
16-87-E    Esam Nuri Baryun, M.D.
16-91-W    Jennifer Brooke Boudrea, M.D.
16-117-R    Richard Graham Bowman, M.D.
16-72-M    Kevin Eggleston, M.D.
16-57-S    Edward Joseph Grey, M.D.
16-81-B    Alvaro Rafael Gutierrez, M.D.
16-56-N    Curtis Wayne Harrison, M.D.
16-132-W    Muhammad Yasier Kanawati, M.D.
16-75-P    Shahnoor Ali Khan, M.D.
16-114-B    Michael Vincent Korona, M.D.
16-86-V    Tarun Mohan Kumar, M.D.
16-133-W    Kathleen June Martin, M.D.
16-03-W    Wilhelm Delano Meriwether, M.D.
16-97-W    Anthony Joseph Minotti, M.D.
16-112-S    Anand Donald Mishra, M.D.
16121-L    Abraham Spiro Mitias, M.D.
16-99-W    Stephen Charles Myers, M.D.
16-100-W    Michael Scott Mynes, M.D.
16-125-G    Basil Paul Papadimitriou, M.D.
16-101-W    Randall Watson Peterson, M.D.
16-108-W    Peter Matthew Reuss, M.D.
16-82-W  Leon Ronen, M.D.
16-111-R  Amal Fostok Sakkal, M.D.
16-109-J  Oluymemisi Reuben Sangodeyi, M.D.
16-88-Z  Robert Dale Santrock, M.D.
16-73-M  Christopher Cleveland Skaggs, M.D.
16-67-W  Chadwick Ray Smith, M.D.
16-104-W  Jennifer Marie Smith, M.D.
16-105-W  Kyle Mitchell Smith, M.D.
16-85-D  Ramesh Thimmiah, M.D.
16-115-M  Christopher Tipton, P.A.-C
16-55-N  Fred Patrick Tzystuck, M.D.
16-119-R  Richard Martin Vaglienti, M.D.

INITIATED COMPLAINTS
16-146-W
16-147-W
16-148-W
16-149-W
16-150-W
16-151-W
16-152-W
16-153-W
16-154-W
16-155-W
16-156-W
16-157-W
16-158-W
16-159-W
16-160-W

FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF
DISQUALIFICATION UNDER WV CODE §30-3-14

15-96-W  Mitchell Simon Finkel, M.D.
16-19-H   Mitchell Simon Finkel, M.D.
15-107-S  Louis William Groves, M.D.
16-46-W  Steven Robert Matulis, M.D.
CONSENT ORDERS

Dr. Challa requested that the Board authorize the Complaint Committee to move forward with offering twelve Consent Orders and/or Amended Consent Orders in ongoing Complaint Committee matters. The motion of the Complaint Committee was given by Dr. Challa, and the motion carried.

FULLY EXECUTED CONSENT ORDERS

Dr. Challa reported that the following Consent Orders have been entered since September 11, 2016.

John Dylan Davis, M.D. entered into a Consent Order with the Board to resolve a complaint related to the inadvertent removal of waste medications from the premises of his employer/hospital. Dr. Davis self-reported this incident to the Board, and the Consent Order imposed a public reprimand.

On April 28, 2016, Eugenio Aldea Menez, M.D. was arrested and charged with fifteen counts of delivery of a Schedule II narcotic. Effective October 24, 2016, Dr. Menez entered into a Consent Order permanently surrendering his medical license.

Dr. Faheem announced that in September 2016, the Board term of Carlos Jimenez, M.D. expired. Dr. Jimenez has served on the Physician Assistant and Licensure Committee as well as several Ad Hoc Committees during his two term tenure on the Board. In recognition of his commitment to the Board and his years of service, Dr. Faheem presented Dr. Jimenez with a plaque.

Dr. Faheem recognized Mr. Knittle and thanked him for his exemplary leadership
throughout the years.

There being no further business to consider, Reverend Bowyer moved that the meeting be adjourned. Ms. Henderson seconded, and the motion carried.

Ahmed D. Faheem, M.D.
President

Rahul Gupta, M.D., M.P.H
Secretary
Call to Order

- Personnel matters
- Potential disciplinary matters related to licensees

Adjournment
A special meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 1st day of December 2016 at 4:30 p.m.

The following Board members were present for the meeting:

R. Curtis Arnold, D.P.M.
Harry E. Duncan, M.D.
David A. Mullins, M.D.

The following Board members attended the meeting via teleconference:

Ahmed D. Faheem, M.D., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Cheryl Henderson, J.D.
Mustafa Rahim, M.D.
Matthew Upton, M.D.
K. Dean Wright, P.A.-C.

The following Board members were absent:

Rahul Gupta, M.D., M.P.H., Secretary
Beth Hays, M.A.
Mustafa Rahim, M.D.
Asish P. Sheth, M.D.

The following staff members were present:

Robert C. Knittle
Jamie S. Alley, Esq.
Jamie C. Frame
Dr. Faheem called the meeting to order. Dr. Arnold moved that the Board enter into executive session to discuss personnel matters pursuant to W. Va. Code §6-9A-4(b)(2)(A). Dr. Duncan seconded, and the motion carried. Mr. Knittle, Ms. Alley and Ms. Frame left the meeting room at this time. The public session recessed, and an executive session commenced. Once the executive session concluded, the Board reconvened in public session. Mr. Knittle, Ms. Alley and Ms. Frame returned to the meeting room when the public session resumed.

Dr. Challa moved that the Board accept the recommendation of the Search Committee and offer the position of Executive Director of the Board of Medicine to Mark Spangler at the recommended salary. Dr. Arnold seconded, and the motion carried.

Dr. Cain moved that Ms. Alley’s job title be changed from Board Attorney to Deputy Director / General Counsel. Ms. Henderson seconded, and the motion carried.

Dr. Faheem reminded the Board that in addition to assisting with the Board of Medicine Newsletter, moving forward, Andrew Wessels will serve as the Communication Officer for the Board assisting with both public and governmental communications on a part-time basis.

Dr. Challa provided, and the Board received, the following report pursuant to the November 30, 2016 special meeting of the Complaint Committee.

**INITIATED COMPLAINTS**

16-164-W
FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14(c)

14-89-S Omar Khalid Hasan, M.D.

CONSENT ORDERS

Dr. Challa requested that the Board authorize the Complaint Committee to move forward with offering one Consent Order in an unspecified ongoing Complaint Committee matter. The motion of the Complaint Committee was given by Dr. Challa, and the motion carried.

There being no further business to consider, Ms. Henderson moved that the meeting be adjourned. Dr. Upton seconded, and the motion carried.

Ahmed D. Faheem, M.D.
President

Rahul Gupta, M.D., M.P.H
Secretary

ADJOURNMENT
Call to Order

Approval of Minutes

- November 14, 2016
- December 1, 2016

Announcements

Committee and Staff Reports, Discussion and Action:

- Recommended Decision and/or Possible Board Action
  - Diana Elain Shafer, M.D.
- Legislative Committee
- Executive/Management Committee
- Board Attorney
- Physician Assistant Committee
- Licensure Committee
- Complaint Committee

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE

Board Minutes

January 9, 2017

A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 9th day of January 2017 at 9:00 a.m.

The following Board members were present for the meeting:

Ahmed D. Faheem, M.D., President
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Harry Duncan, M.D.
Beth Hays, M.A.
Cheryl Henderson, J.D.
Carrie Lakin, D.P.M.
David Mullins, M.D.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
Wes Steele, M.D.
Matthew Upton, M.D.
K. Dean Wright, P.A.-C.

The following Board members were absent:

Kishore K. Challa, M.D., F.A.C.C., Vice President
Rahul Gupta, M.D., M.P.H., Secretary

The following Staff members were present:

Jamie S. Alley, Esq.
Jamie C. Frame
Leslie A. Inghram
Deena Stone

The following counsel from the West Virginia Attorney General’s Office was present:

Katherine Campbell, Esq.
With a quorum of the Board present and participating, Dr. Faheem called the meeting to order and announced that Ms. Campbell would be advising the Board in the matter of Diane Elain Shafer, M.D.

Dr. Rahim moved that the Board enter into executive session for the purpose of receiving legal advice. Dr. Upton seconded, and the motion carried. Ms. Alley, Ms. Stone and guests left the meeting room at this time.

The Board re-entered public session. Ms. Alley, Ms. Stone and guests returned to the meeting room. Dr. Rahim moved that the Board accept the Hearing Examiner’s Recommended Findings of Fact and Conclusions of Law with the following non-substantive modifications:

(a) modify the Recommended Findings of Fact item numbered 46 by striking the word, “Grievant” and the inserting in lieu thereof and adopting the following language, “Dr. Shafer.”

(b) modify the Recommended Findings of Fact item numbered 75 by adding a citation to the record as follows “R Ex 2 at BOM30.”

(c) modify the Recommended Conclusions of Law item numbered 51 by striking the following citation “W. Va. Code §30-3-14(c)” and inserting in lieu thereof and adopting the correct citation as “W. Va. Code §30-3-14(c)(17).”

Mr. Wright seconded, and the motion carried. Dr. Duncan moved that the motion be amended to include that the application for licensure to practice medicine and surgery in the state of West Virginia of Diane Elain Shafer, M.D. is denied. Dr. Upton seconded, and the motion carried. Ms. Campbell left the meeting at this time.
Dr. Rahim moved that the minutes of the November 14, 2016 meeting be approved. Dr. Sheth seconded, and the motion carried. Reverend Bowyer moved that the minutes of the December 1, 2016 meeting be approved. Dr. Cain seconded, and the motion carried.

Dr. Faheem announced that the Workgroup on the FSMB’s Model Policy for the Use of Opioid Analgesics in the Treatment of Chronic Pain has completed its draft policy titled Guidelines for the Chronic Use of Opioid Analgesics. The Committee has reviewed the draft policy and does not have any concerns. A copy of the draft policy was made available for all Board members to review. If any Board members have proposed comments, please contact Jamie Alley. The deadline for comments to be submitted is January 30, 2017.

Dr. Faheem welcomed Carrie Lakin, D.P.M., a Podiatrist from Charleston, and Wes Steele, M.D., a Pediatrician from Fairmont, to the Board. Following appointment of these members, the Board now has a full complement of members.

Dr. Faheem announced that the Board term of Curtis Arnold, D.P.M. expired on September 30, 2016; however, Dr. Arnold remained on the Board through December. In recognition of his more than ten years of service and leadership, including serving as Vice President of the Board and Chairman of the Complaint Committee, the Board has ordered a plaque for Dr. Arnold. The Board wishes Dr. Arnold the best in his future endeavors.

Dr. Faheem welcomed Deena Stone. Ms. Stone joined the Board as the Receptionist/Administrative Office Assistant in November.
Dr. Faheem next welcomed Mark Spangler as the incoming Executive Director. Mr. Spangler will officially assume this position on January 23, 2017. After introductions, Ms. Stone left the meeting room.

Dr. Faheem announced that the Federation of State Medical Boards annual meeting will be held April 20th-22nd in Fort Worth Texas. The Federation is offering twelve public member scholarships which are available on a first come first serve basis. The deadline to apply for these scholarships is February 1, 2017. Dr. Faheem asked for a show of hands of any members who are interested in attending the meeting. Reverend Bowyer, Ms. Hays and Mr. Wright signified their interest in attending the meeting.

Dr. Faheem announced that all members should have received a notice from the West Virginia Ethics Commission regarding submission of financial disclosures, and reminded members that the deadline for filing disclosures is February 1, 2017.

Dr. Faheem reported that the Executive/Management Committee met yesterday morning, Sunday, January 8, 2017, at which time the Committee was presented with and approved the fiscal reports and purchasing card transactions for the month of November 2016.

Dr. Faheem next reported that at the July 2015 meeting, the Executive/Management Committee received the initial findings of the purchasing card audit for the period of January 1, 2013 to December 31, 2014. The recommended findings of the auditor included: (1) further breakout of office supplies for purchasing card approval; (2) further specification of purchasing card approval in the Executive/Management Committee minutes; and (3) a sign-in sheet to document committee member attendance at meetings. The Committee found that the Board’s current practice was acceptable and took no action. The Board recently received the final
audit report, and that there were no changes with regard to the findings.

Dr. Faheem reported that the Gubernatorial Inauguration will be held in Charleston on Monday January 16, 2017, at 1:00 p.m. Governor-elect Jim Justice has announced that G. Nicholas Casey, Esquire will serve as his Chief of Staff. The Board looks forward to working with Governor Justice, Mr. Casey and the entire administration.

Dr. Faheem reported that the Interstate Medical Licensure Compact Commission (IMLCC) continues to progress, and anticipates the expedited licensure process will be available to qualifying applicants soon, and perhaps as early as January 20, 2017. Dr. Faheem inquired as to whether any Board members would be interested in serving upon the IMLCC. No members expressed an interest. Reverend Bowyer moved that the Board appoint Mark Spangler, incoming Executive Director, to serve as the Board’s voting representative and Commissioner upon the Interstate Medical Licensure Compact Commission effective January 23, 2017. Dr. Rahim seconded, and the motion carried.

Dr. Faheem reported that Leslie Inghram, Supervisor of the Investigation and Complaint Unit has been asked by her colleagues at the Drug Enforcement Administration (DEA) to represent the Board of Medicine as its Stakeholder in the new initiative DEA360 program, so she will be ably representing the Board in that capacity.

Dr. Faheem reported that the Board was notified of changes to the Drug Enforcement Administration (DEA) registration renewal process. One of the changes is that the agency will now send only one renewal notice to a registrant, approximately 65 days prior to the expiration date, and no further reminders to renew the DEA registration will be sent. Board staff will continue to monitor changes to the DEA registration renewal process and will report any update to the Board.
Dr. Faheem reported that the Board has previously discussed hiring a part-time Communications Officer and a full-time Board Attorney, however, no official action has been taken regarding these positions. There are currently budgetary issues affecting the Board’s ability to proceed immediately. Following discussion, Dr. Cain moved that the Board hire a part-time Communications Officer and a full-time Board Attorney following resolution of the current budgetary constraints. Ms. Hays seconded, and the motion carried.

Dr. Faheem reported that the West Virginia Board of Examiners for Registered Professional Nurses (RN Board) had planned to move their office from its current location at 101 Dee Drive to a new location prior to January 1, 2017. The Board had previously elected to pursue leasing the additional office space beginning on January 1, 2017, however, the RN Board has not yet moved. The Board will pursue leasing the space as soon as it becomes available.

Dr. Faheem reported that Big Picture has not yet provided the Board with a usable historical licensee report, annual report documents or a completed physician assistant renewal application, and has not provided Board staff with updates as requested. Scott Wilkinson, the Board’s Information Systems Coordinator, anticipates that Big Picture will be able to provide a functional physician assistant renewal application prior to when physician assistant renewals begin on February 8, 2017. Moving forward, the Board will need to address our working relationship with Big Picture.

Dr. Faheem reported that Board staff are working with Lenny Hannigan of AlignHR to revise the Board’s Orientation and Reference Manual.

Ms. Hays reported that the Legislative Committee met yesterday, Sunday, January 8, 2017. During the 2017 legislative session, the Committee will hold meeting on the
following dates:

Thursday, February 23, 2017  5:30 p.m.
Sunday, March 12, 2017      10:00 a.m.
Thursday, March 23, 2017    5:30 p.m.
Tuesday, April 4, 2017      5:30 p.m.

The Committee recommended that the Board delegate authority to the Legislative Committee to act on behalf of the Board as necessary to respond to legislative matters at these meetings and any other special meetings, which become necessary during the 2017 legislative session. The motion of the Legislative Committee was given by Ms. Hays, and the motion carried.

Ms. Hays reported that prior to his retirement, Mr. Knittle and Diana Shepard, Executive Director of the West Virginia Board of Osteopathic Medicine, met with Delegate Howell and legislative staff to discuss, in part, the Atlanta Journal-Constitution series of articles on state responses to physician sexual misconduct. One item discussed was public confusion regarding which practitioners are licensed by the Board of Medicine as opposed to other Boards, including the Board of Osteopathic Medicine. As a result of this meeting, and in an effort to better assist the public in obtaining information about their healthcare practitioners, the Board of Medicine has modified our homepage to specify the categories of licenses and certificates that are issued by our Board. Additionally, the Board’s homepage provides a link to the West Virginia Board of Osteopathic Medicine website to facilitate access. The current statutory schemes establishing the time frame for investigating and resolving complaints, summary disciplinary proceedings and the ability to permanently revoke a license, as set forth in W. Va. Code §30-1-5(c) and W. Va. Code §30-3-14(k), were also discussed. Delegate Howell and legislative staff were supportive of the Board of Medicine’s proposed language in 11 CSR 1A relating to confidentiality of the complaint and investigation process as well as the ability to cooperation with other state and federal
law enforcement agencies. No action was taken with regard to these items, but any or all of these items may be the subject of legislation during the 2017 legislative session.

Ms. Hays reported that the following topics may be addressed during the 2017 legislative session: sweeping of special revenue accounts; statewide drug repository program; and amendments to telemedicine legislation.

Ms. Alley reported that the oral argument in the matter of Shivkumar Iyer, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent, was held in Kanawha County Circuit Court on December 9, 2016. The Board is awaiting an Order from the Court with regard to this matter. This matter is being handled by Greg Foster, Esq. of the Attorney General’s office.

Ms. Alley reported that in late September, William Cunningham, appearing pro se, filed a petition for judicial review in the Circuit Court of Wood County (16-P-145) asking the Court to review a closure decision related to a complaint filed with the Board against a former provider. The Board filed a Motion to Dismiss the petition in early October. Thereafter, Mr. Cunningham agreed to an Agreed Order of Dismissal. The proposed order was presented to the judge for consideration, and an Order dismissing the petition has been entered by the Court.

Ms. Alley reported that in 2014, the Board entered into a Consent Order with Joseph Anthony Jurand, M.D. The Consent Order imposed a stayed suspension and a five year period of probation with terms and conditions, including a requirement that Dr. Jurand be evaluated by the Professional Renewal Center and comport with any practice recommendations they made. At the September meeting, the Board voted to dissolve the stay of suspension based upon its determination that he had violated the terms of his Consent Order. Dr. Jurand filed a Petition for Appeal in the Circuit Court of Jefferson
County on two grounds: (1) the existence of additional or new evidence; and (2) allegations that the Board Order violated Dr. Jurand’s due process rights. Under the Administrative Procedure Act (APA), Dr. Jurand asked for an evidentiary hearing in the Circuit Court to consider his new evidence. The Board filed a response to the petition on Friday November 4, 2016, asking the court to affirm the Board’s Order, and deny that the new evidence was material to the Board’s determination. The Board further contended that there were no due process violations, and that the APA did not apply. The Court set an evidentiary hearing for Friday, December 9, 2016. At the hearing, Dr. Jurand made an oral Motion for a Continuance, and based upon pre-hearing discussions, the Board joined in the motion. The hearing has been rescheduled for April 20, 2017.

Ms. Alley reported that there were two disciplinary hearings scheduled for December 2016. The first hearing was scheduled for December 7-8, 2016 in the matter of Deleno H. Webb, III, M.D. An update with regard to this matter will be provided by the Complaint Committee later this morning. The second hearing was scheduled for February 1-2, 2017. The respondent filed a Motion for Continuance. The Motion for Continuance was granted, and the hearing has been rescheduled for April 25-28, 2017.

Ms. Alley reported that the matter of Joel David Shiffler, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent, is scheduled for February 13, 2017.

Ms. Alley reported that the Board anticipates several hearings will be held this spring.

Mr. Wright provided the report of the Physician Assistant Committee, which met on Saturday, January 7, 2017.
Mr. Wright asked Board members to review the list of physician assistants up for action and to advise of any conflicts. No conflicts were declared.

The Physician Assistant Committee recommended the following applicants be approved for Physician Assistant Licensure:

Isaac H. Edmonds, P.A.-C.
Aaron Scott Holly, P.A.-C.
Nicholas William Splitt, P.A.-C.
Anne Clair Mix, P.A.-C.

The Physician Assistant Committee recommended that the applicants be granted licenses by the Board. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that Jacqueline Renae Shipman-Cespedes, P.A.-C. entered into a Consent Order with the Board on June 3, 2016, which restricted her practice as a physician assistant to direct supervision for a minimum period of six months. Ms. Shipman-Cespedes’ supervising physician has submitted two quarterly reports as required, and has recommended lifting the restriction of direct supervision. The Committee recommended that Ms. Shipman-Cespedes be released from her Consent Order through a Board Order. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that the Committee reviewed and discussed a letter from St. Mary’s Medical Center seeking a written opinion regarding co-signing requirements. Board staff will draft a letter of explanation to St. Mary’s on behalf of the Physician Assistant Committee.
Mr. Wright reported that at its November 2016 meeting the Physician Assistant Committee directed staff to prepare and send letters to Physician Assistant Programs from whom most of the currently licensed physician assistants are graduates, recommending that physician assistant students keep logs of advanced procedures completed during clinical training as these logs may assist licensees when requesting advanced duties upon beginning practice.

Mr. Wright reported that Board staff updated the Committee on the preparation for physician assistant licensure renewal for the 2017 renewal cycle.

Mr. Wright provided the Board with an update regarding the practice agreements which were authorized during the period of November 14, 2016 through January 6, 2017, and alternate supervising physicians which were designated.

Dr. Cain delivered the report of the Licensure Committee, which met on Saturday, January 7, 2017.

Paul Weber Burke, Jr., M.D. appeared before the Licensure Committee pursuant to his Amended Consent Order of April 16, 2014. No action was required of the Committee in association with his appearance. Dr. Burke’s next appearance before the Licensure Committee will occur in January 2018.

Rod Ali Hojat, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. It was the recommendation of the Committee that Dr. Hojat be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.
Michael Hosny Gabriel, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. It was the recommendation of the Committee that Dr. Gabriel be given the opportunity to withdraw his application.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Claudieu Cristian Faraon-Pogaceanu, M.D. It was the recommendation of the Committee that Dr. Faraon-Pogaceanu be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Sassan Naderi, M.D. The Committee requested that Dr. Naderi appear before the Licensure Committee at its March 2017 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Mark Anthony Salvaggio, M.D. The Committee requested that Dr. Salvaggio appear before the Licensure Committee at its March 2017 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Edward Chaum, M.D. It was the recommendation of the Committee that Dr. Chaum be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Victor Miguel Camacho, M.D. It was the recommendation of the Committee that Dr. Camacho be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.
The Licensure Committee reviewed and discussed the application for a permanent medical license of Ian Roderick Graham, M.D. The Committee requested that Dr. Graham appear before the Licensure Committee at its March 2017 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Leon Philip Jacob, M.D. It was the recommendation of the Committee that Dr. Jacob be given the opportunity to withdraw his application.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Whitaker Michael Smith, M.D. It was the recommendation of the Committee to accept the total continuing medical education hours submitted by the applicant, and to approve Dr. Smith for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Lawrence John Jedlicka, M.D. The Committee requested that Dr. Jedlicka appear before the Licensure Committee at its March 2017 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Melissa Lea Morton-Fishman, M.D. The Committee requested that Dr. Morton-Fishman appear before the Licensure Committee at its March 2017 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Lesli Marie Carney, M.D. It was the recommendation of the Committee that Dr. Carney be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.
The Licensure Committee reviewed and discussed the application for a permanent medical license of George Maurice Charron, M.D. It was the recommendation of the Committee that Dr. Charron be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Mark Nolan Hill, M.D. It was the recommendation of the Committee that Dr. Hill be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed a request to modify the wording on pediatric wallet cards submitted by Allan Evangelista, D.P.M. Board staff will respond on behalf of the Committee to notify Dr. Evangelista that pending amendments to the Board’s legislative rule, Series 1A, will be considered by the Legislature this session. The amendments include a change in nomenclature which will, if passed, permit modification of future documents to reference DPM licensees as podiatric physicians.

The Licensure Committee reviewed information on potential modifications to the policy on review of applicant malpractice claims. It was determined to table the discussion to the March 2017 meeting, pending additional information from staff.

Dr. Cain reiterated the status of the Interstate Medical Licensure Compact’s progress and possible “go live” date of January 20, 2017.

Sara Kirsten Rasmussen, M.D. was granted a license at the July 11, 2016 Board meeting, however her name inadvertently did not appear on the Licensure Committee’s list of applicants for permanent licensure and therefore she was not named in the minutes.
Faris Jadan Haddad, M.D. was on the list of applicants for permanent licensure which was approved at the July 11, 2016 Board meeting, however, he declined to complete the licensure process and was not issued a license. The Licensure Committee recommended that the January 2017 meeting minutes reflect that Dr. Rasmussen met the requirements for licensure and was issued a license on July 11, 2016, and that Dr. Haddad was approved for licensure on July 11, 2016, but was not issued a license. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed three applications for Collaborative Pharmacy Practice Agreements. It was the recommendation of the Committee that Application 2 be approved, and Applications 1 and 3 be approved pending receipt of additional information.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Muhammad Asad Mirza, M.D. It was the recommendation of the Committee that Dr. Mirza be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Wamiq Sohail Sultan, M.D. It was the recommendation of the Committee that Dr. Sultan be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Jahnavi Srivastava, M.D. It was the recommendation of the Licensure Committee to accept the total continuing medical education hours submitted by the applicant, and to approve Dr. Srivastava for reactivation of licensure
pending receipt of satisfactory evidence that the required number of continuing medical education hours are within Dr. Srivastava’s specialty. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Tahira Masood, M.D. It was the recommendation of the Licensure Committee to accept the total continuing medical education hours submitted by the applicant, and to approve Dr. Masood for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee presented a list of compliant applications, which included fifty-seven (57) initial medical doctor applications, one initial podiatrist application, one reactivation of medical license application and one medical doctor application pending payment of the mandatory Patient Injury Compensation Fund assessment fee. It was the recommendation of the Licensure Committee to approve the following applicants for licensure:

**APPLICANTS FOR PERMANENT LICENSURE- Physicians**

Abascal, Aliana Michelle  
Abbas, Ghulam  
Abu Sukheila, Ramy Mahmoud  
Adkins, David Alan  
Ahmad, Mirza Nayyar Daud  
Basel, David Alan  
Bhutia, Namgyal Dorjee  
Bijjula, Ragneel Reddy  
Boquet, Mark James  
Brewer, Zachary Seth  
Brodsky, Sergey  
Brogden, Stephanie  
Chang, Theodore Sean  
Choi, Lorraine  
Dietrich, Stephen Leslie  
Dukes, Seth  
Espinoza, Salvador


Foster, Toby Eugene
Ganesh, Shanti Portia
Garcia, Gwenalyn Gail Capistrano
Haider, Sajjad
Hemminger, Jessica Ann
Horwath, Ewald
Johnson, Sharita Nicolle
Kaps, Christopher Jonathan
Kazienko, Brian Thomas
Kedia, Shiksha
Kelminson, Stephen Bruce
Kints, Geertruida
Kouch, Michael
Lane, Debra Ann
Leftin, Howard Irwin
Macdonald, Paul Henry
Mehta, Rajesh Kumar
Merati, Kambiz
Miller, Tim Alan
Nadarajah, Dhashaini
Naturale, Richard Timothy
Pallavi, Ranjita
Ponnusamy, Karthikeyan Ettigounder
Ramirez, Caludia Patricia
Rothschild, Bruce Max
Schubach, Gregg David
Seymaeve, Carl A.
Sharabi, Abdelsalam
Shy, Joseph Cameron
Simpson, Megan McGinley
Singh, Supreet
Subedi, Bishnu Hari
Syed, Tanvir Uddin
Teomete, Uygar
Venbrux, Nuchanart
Vengrow, Michael
Walker, Sidney Patton
Yacoub, Shirley Bassam
Zalzal, Habib George
Zaraket, Hanna
APPLICANT FOR PERMANENT LICENSURE – Physician approved pending receipt of the Patient Injury Compensation Fund assessment fee

Webb, Arthur Lawson

REACTIVATION APPLICANT WHOSE LICENSE HAS NOT BEEN ACTIVE FOR MORE THAN ONE YEAR – Physician

Juneja, Manie

APPLICANT FOR PERMANENT LICENSURE – Podiatrist

Giaimo, Scott Jason

Dr. Cain asked the Board members if there were any conflicts, and no conflicts were declared. The Licensure Committee recommended that these applicants be granted original and/or reactivated licenses by the Board. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.

The Licensure Committee was advised that one initial medical doctor applicant has not paid the mandatory Patient Injury Compensation Fund assessment fee after approval for licensure pending payment of the Patient Injury Compensation Fund assessment fee was granted in November 2016. Board staff will follow-up with the applicant via certified mail regarding nonpayment of the Patient Injury Compensation Fund assessment fee. Moving forward, the Committee recommends that approval of licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee be limited to the interval between meetings, and if an applicant fails to follow through with payment prior to the next meeting, the application must be presented to the Committee for further action. The motion of the Licensure Committee was given by Dr. Cain, and the motion carried.
In the absence of Dr. Challa, Dr. Upton provided the report of the Complaint Committee, which met on Sunday, January 8, 2017.

**CLOSURES**

- 16-01-W Majester N. Abdul-Jalil, M.D.
- 16-116-F Frederick David Adams, M.D.
- 16-122-W Michael Scott Beasley, M.D.
- 16-124-A William Claude Bird, M.D.
- 16-110-B Nohl Arthur Braun, M.D.
- 16-162-D Michael Howard Chancey, M.D.
- 16-123-W G. Stephen Dawson, II, M.D.
- 16-144-H Kara Lynn Gillespie, P.A.-C
- 16-142-M Hassan Arshad Jafary, M.D.
- 16-137-S Mehran Khajavi, M.D.
- 16-126-O Anthony Adolphus McFarlane, M.D.
- 16-127-R Stephan Robert Paul, M.D.
- 16-143-C Leela Vadrevu Raju, M.D.
- 16-136-H Ahmed Moudar Sakkal, M.D.
- 16-120-L Heather Michelle Skeens, M.D.
- 16-141-C Timothy Lawrence Thistlewaite, M.D.

**INITIATED COMPLAINTS**

- 17-03-W
- 17-04-W
- 17-05-W
- 17-06-W
- 17-07-W
- 17-08-W
- 17-09-W
- 17-10-W
- 17-11-W
- 17-12-W
- 17-13-W
- 17-14-W
- 17-15-W
- 17-16-W
- 17-17-W
- 17-18-W
- 17-19-W
17-20-W
17-21-W
17-22-W
17-23-W
17-24-W
17-25-W
17-26-W
17-27-W
17-28-W

FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF
DISQUALIFICATION UNDER WV CODE §30-3-14

16-25-H    Yasar Aksoy, M.D.
16-113-W    Yasar Aksoy, M.D.

CONSENT ORDERS

Dr. Upton requested that the Board authorize the Complaint Committee to move forward with offering four Consent Orders and/or Amended Consent Orders in ongoing Complaint Committee matters. The motion of the Complaint Committee was given by Dr. Upton, and the motion carried.

FULLY EXECUTED CONSENT ORDERS

Dr. Upton reported that the following Consent Orders have been entered since November 13, 2016.

16-50-S - Thair Ali Barghouthi, M.D. – On December 29, 2016, the licensee entered into a Consent Order with the Board which imposed a public reprimand to the licensee for delegating professional responsibilities related to nuclear medicine stress test scans to a person Dr. Barghouthi knew, or had reason to know, was not qualified or licensed to perform the delegated acts.
16-93-W - Ranga Chelva Krishna, M.D. - On January 8, 2017, the licensee entered into a Consent Order with the Board which imposed a public reprimand for having action taken against his New York and Pennsylvania medical licenses and for failing to disclose his felony tax fraud conviction on his 2012 reinstatement application and a civil fine in the amount of $1,000.

16-95-W - James Ethan Lowe, P.A.-C. - On January 8, 2017, the licensee entered into a Consent Order with the Board which imposed a civil fine in the amount of $500.00 for failing to notify the Board of the termination of his practice agreement with his supervising physician.

16-98-W - James P. Morgan, M.D.- On January 8, 2017, the licensee entered into a Consent Order with the Board which imposed a public reprimand to the licensee for having action taken against his Virginia license, and for the conduct which was the basis for the Virginia discipline.

16-66-W - Jason Charles Brinkman Reutter, M.D. - On January 8, 2017, the licensee entered into a Consent Order with the Board which imposed a civil fine in the amount of $5,000.00 for practicing medicine pursuant to an inactive status license.

15-141-W - Charles Lee Rosen, M.D. - On January 8, 2017, the licensee entered into a Consent Order with the Board which imposed a public reprimand for failing to disclose his two week suspension from practice by West Virginia University in association with his license renewal application.

All Consent Orders are available on the Board's website.
A public hearing was scheduled on December 7-8, 2016 in the matter of Deleno H. Webb, III, M.D. upon Complaint Nos. 14-69-W and 15-15-W. Two days before the public hearing Dr. Webb agreed to the voluntary surrender of his medical license in lieu of proceeding to hearing. The public hearing was continued to permit the Board to consider the proposed Consent Order. A copy of the Consent Order was made available for members to review. The Complaint Committee recommended that the Board accept Dr. Webb’s surrender of license as set forth in the Consent Order. The motion of the Complaint Committee was given by Dr. Upton, and the motion carried.

There being no further business to consider, Ms. Henderson moved that the meeting be adjourned. Ms. Hays seconded, and the motion carried.

Ahmed D. Faheem, M.D.
President

Rahul Gupta, M.D., M.P.H
Secretary
Call to Order

Approval of Minutes

- January 9, 2017

Announcements

Committee and Staff Reports, Discussion and Action:

- Executive/Management Committee
- Legislative Committee
- Board Attorney
- Physician Assistant Committee
- Licensure Committee
- Complaint Committee

ADJOURNMENT
A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 13th day of March 2017 at 9:00 a.m.

The following Board members were present for the meeting:

Ahmed D. Faheem, M.D., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
Rahul Gupta, M.D., M.P.H., Secretary
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Harry Duncan, M.D.
Beth Hays, M.A.
Cheryl Henderson, J.D.
Carrie Lakin, D.P.M.
David Mullins, M.D.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
Wes Steele, M.D.
Matthew Upton, M.D.
K. Dean Wright, P.A.-C.

The following Staff members were present:

Mark A. Spangler
Jamie S. Alley, Esq.
Jamie C. Frame
Leslie A. Thornton-Inghram

Dr. Faheem called the meeting to order. Dr. Cain moved that the minutes of the January 9, 2017 meeting be approved. Reverend Bowyer seconded, and the motion carried.
Dr. Faheem introduced and welcomed Felicia Bryant. Ms. Bryant joined the Investigation, Complaints and Compliance Unit on March 6, 2017.

Dr. Faheem announced that following today’s meeting, Mike Hall of Photografix will be onsite taking photographs of Board and Staff members for use in future Board of Medicine communications.

Dr. Faheem announced that the Board’s former Executive Director, Robert Knittle, has been selected to receive the 2017 Federation of State Medical Boards (FSMB) Distinguished Service Award. This award recognizes individuals who have demonstrated the highest level of service, commitment and contribution to the FSMB, advancing the profession of medical licensure and discipline and strengthening public protection. The award will be presented to Mr. Knittle at the upcoming FSMB Annual Meeting in Fort Worth, Texas, on Saturday, April 22, 2017.

Dr. Faheem announced that Mr. Wright has received national recognition as a Distinguished Fellow of the American Academy of Physician Assistants (AAPA) due to his outstanding contributions to patient care and the physician assistant profession during his 37 year career.

Dr. Faheem reported that the Executive/Management Committee met yesterday morning, Sunday, March 12, 2017, at which time the Committee was presented with and approved the fiscal reports and purchasing card transactions for the months of December 2016 and January 2017.

Dr. Faheem reported that the West Virginia Purchasing Division contends that the Board’s contract for human resources and communication services is invalid and will need to be put out for bid. Mr. Spangler will continue to work with the Purchasing
Division to resolve this matter.

Dr. Faheem reported that the Committee considered a letter submitted by Dr. Gupta, as the State Health Officer, requesting that the Board of Medicine, as well as other health-related boards and agencies, consider requiring annual tobacco cessation continuing education. Board staff will follow-up with the Licensure Committee regarding this matter.

Dr. Faheem reported that the Interstate Medical Licensure Compact Commission (IMLCC) anticipated being able to accept and process applications for Interstate Medical Licensure Compact (IMLC) licenses beginning in January 2017. However, eight states which have joined the IMLCC have been issued letters from the Federal Bureau of Investigations indicating that they are not currently authorized to received criminal history record check results in association with IMLC licensure. Therefore, the Commission has delayed accepting applications for IMLC licensure.

Dr. Faheem reported that the West Virginia Board of Examiners for Registered Professional Nurses (RN Board) vacated from their office location at 101 Dee Drive in February 2017. The Board of Medicine has begun leasing this space, and renovations will commence in the near future.

Dr. Faheem reported that Big Picture has completed the requested modifications with regard to the physician assistant licensure renewal application and the associated resource. Mr. Spangler is currently work with Daniel Albertson, Chief Executive Officer, to reconcile finances and assess the Board's working relationship with Big Picture.

Dr. Faheem reported that Board staff continue to work with Lenny Hannigan of AlignHR to revise the Board's Orientation and Reference Manual.
Ms. Hays reported that the Legislative Committee met yesterday, Sunday, March 12, 2017, at which time Mr. Spangler reported on the following bills:

Senate Bill 129, 130 and 131, as well as House Bill 2264, 2265 and 2266, which are the Board of Medicine proposed legislative rule bills relating to licensure and drug dispensing. There has been no activity with regard to the senate bills since introduction. The house bills have passed House Health and Human Resources Committee with a technical amendment to the sunset provision language for rule uniformity, and have been bundled in a rule bill which now moves to House Judiciary Committee.

Senate Bill 4, allowing licensed professionals to donate time to care for indigent and needy in a clinical setting. As introduced, this bill would have permitted a physician to obtain up to ten continuing medical education (CME) hours in exchange for providing volunteer medical services to eligible indigent or needy patients. The CME component has been removed, and the bill now moves to Senate Judiciary Committee.

Senate Bill 253, relating to licensing requirements for physicians and osteopathic physicians in West Virginia. This bill modifies the provision of the Medical Practice Act which requires applicants to demonstrate an ability to communicate in English language. The language in this bill is consistent with the Board’s current practice. There has been no activity with regard to this bill since introduction.

Senate Bill 390 and House Bill 2509, relating to the practice of telemedicine. At its February 23, 2017 meeting, the Committee voted to support Senate Bill 390 due to the specificity provided in this bill which identifies the age group and the diagnosis for which prescribing is permitted. There has been no activity with regard to Senate Bill 390 since introduction. House Bill 2509 has passed the House with an amendment which prohibits the telemedicine prescription of any controlled substance narcotic in any Schedule (II-V), but allows the prescribing of other Schedule II drugs. The Committee supports the
limitations in Senate Bill 390, and encourages that they be included in House Bill 2509.

House Bill 2423, relating to criminal offense of therapeutic deception. This bill amends the crime of therapeutic deception to apply to physicians as well as psychotherapists. The Committee is in support of this bill.

House Bill 2502, relating to reciprocity of occupational licenses with other states. This bill creates a new section in the general statute that requires licensure reciprocity. The bill was amended in House Government Organization Committee to exclude any profession which has entered into an interstate compact. Board staff will continue to monitor this bill.

House Bill 2628, relating generally to the powers and duties of the Board of Medicine and the Board of Osteopathic Medicine. This bill includes language which permits the Board to deny an initial license or the reissuance of a license if a licensee/applicant has been convicted of a felony and permits revocation for any period of time, up to the life of the licensee, which is reasonable and necessary. Additionally, the bill requires the Board to report criminal activity to law enforcement. At its February 23, 2017 meeting, the Committee voted to support this bill. The bill has passed the House and now moves to Senate Judiciary Committee.

House Bill 2630, authorizing the Board of Medicine and the Board of Osteopathic Medicine to share staff. A provision currently exists in the general statute which permits the sharing of administrative staff between Boards. At its February 23, 2017, the Committee opposes this bill.

House Bill 2631, relating to time standards for disposition of complaint proceedings. This bill provides that the time period for final ruling in discipline cases can be tolled for any delay requested or caused by or on behalf of the accused. The
Committee supports this bill. The bill has passed House Government Organization Committee and now moves to House Judiciary Committee.

Mr. Spangler reported on Senate Bill 347 and House Bill 2753, relating to the modernization of the Physician Assistant Practice Act. These bills modify various provisions of the Physician Assistant Practice Act, including adding a second physician assistant to member to the Board of Medicine, changing the term supervision to collaborating, modifying prescriptive authority, removing the requirement that licensees be certified by the National Commission on Certification of Physician Assistants (NCCPA) at the time of renewal, altering the manner in which physician assistants are reimbursed and granting global signature authority. The Committee supports these bills, but advocates that licensees maintain continuous NCCPA certification and hold the NCCPA to a set time frame for which they will implement core knowledge examinations. The Committee also supports the addition of members to the Board of Medicine in a proportional manner.

Senate Bill 2844, relating to provisions applicable to military members and their spouses. This bill waives the licensing requirements for veterans and their family members. The Committee opposes this bill due to safety concerns.

Senate Bill 560, creating a medical malpractice peer review panel by the Board of Medicine to review medical malpractice and medical malpractice related claims. The Committee opposes this bill due to technical reasons.

Dr. Gupta provided the Committee with an overview of Senate Bill 418, which is the Governor’s bill, relating to Comprehensive Substance Use Reduction Act. Some provisions of this bill include: rulemaking authority to the Department of Health and Human Resources (DHHR) for clean syringe exchange programs; creation of the Office of Drug Control Policy (ODCP) within DHHR under the direction of the Secretary and
State Health Officer; moves the Poison Control Center as a division of ODCP; protects law enforcement and first responders from needle-stick injuries; and moves the Controlled Substance Monitoring Program (CSMP) to the ODCP.

Ms. Alley reported that on February 17, 2017, the Kanawha County Circuit Court issued an Order Denying Appeal of the Board’s Final Order in the matter of Shivkumar Iyer, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent. This matter is being handled by Greg Foster, Esq. of the Attorney General’s office.

Ms. Alley reported that in January 2017, the Board issued a Final Order, denying the application for licensure to practice medicine and surgery in the state of West Virginia, in the matter of Diane Elain Shafer, M.D. Dr. Shafer has filed a Petition in Mingo County Circuit Court to Appeal the Board’s Final Order.

Ms. Alley reported that there was a public hearing held in March 2017 with regard to a provisionally denied application for reactivation of licensure to practice medicine and surgery in the state of West Virginia.

Ms. Alley reported upcoming hearings are scheduled for the following dates: April 25-28, 2017; May 2, 2017; June 7-8, 2017; and June 26-28, 2017. One of these matters is being handled by the Attorney General’s office.

Ms. Alley reported that in 2014, the Board entered into a Consent Order with Joseph Anthony Jurand, M.D. The Consent Order imposed a stayed suspension and a five year period of probation with terms and conditions, including a requirement that Dr. Jurand be evaluated by the Professional Renewal Center and comport with any practice recommendations they made. At the September meeting, the Board voted to dissolve the stay of suspension based upon its determination that he had violated the terms of his
Consent Order. Dr. Jurand filed a Petition for Appeal in the Circuit Court of Jefferson County on two grounds: (1) the existence of additional or new evidence; and (2) allegations that the Board Order violated Dr. Jurand’s due process rights. A December 2016 hearing upon the petition was rescheduled for the spring.

Mr. Wright provided the report of the Physician Assistant Committee, which met on Saturday, March 11, 2017.

Mr. Wright reported that Jack Thomas Doty, III, P.A.-C. entered into a Consent Order with the Board on April 27, 2016, which restricted his practice as a physician assistant to direct supervision for a minimum period of six months. At its November 2016 meeting, the Physician Assistant Committee reviewed the two required quarterly reports and the recommendation to lift the restriction of direct supervision submitted by Mr. Doty’s supervising physician. In concurrence with the supervising physician’s report, the Committee recommended Mr. Doty be released from his Consent Order. Mr. Doty was notified via certified letter on November 14, 2016, that the Board terminated his Consent Order effective immediately.

Mr. Wright reported that Jacqueline Renae Shipman-Cespedes, P.A-C. entered into a Consent Order with the Board on June 3, 2016, which restricted her practice as a physician assistant to direct supervision for a minimum period of six months. At its January 2017 meeting, the Physician Assistant Committee reviewed the two required quarterly reports and the recommendation to lift the restriction of direct supervision submitted by Ms. Shipman-Cespedes' supervising physician. In concurrence with the supervising physician’s report, the Committee recommended Ms. Shipman-Cespedes be released from her Consent Order. An Order terminating Ms. Shipman-Cespedes’ Consent Order was entered on January 12, 2017.
Mr. Wright asked Board members to review the list of physician assistants up for action and to advise of any conflicts. No conflicts were declared.

The Physician Assistant Committee recommended the following applicants be approved for Physician Assistant Licensure:

- Laura Elizabeth Booner, P.A.-C.
- Candice Marie Cameron, P.A.-C.
- Zachary Kent Douglas, P.A.-C.
- Jodi R. Gottardi, P.A.-C.
- Megan Leigh Lingenfelter, P.A.-C.
- Michael Darrell McMillion, P.A.-C.
- Stephen Lee McQueen, P.A.-C.
- Suzanne Leslie Mundy, P.A.-C.
- Kevin Michael Oberg, P.A.-C.
- Lisa Dawn Paitsel, P.A.-C.
- Kylie Perkins Risendal, P.A.-C.
- Elaine Marie Smith, P.A.-C.
- Kristopher Leroy Smith, P.A.-C.
- Tina Louise Spence, P.A.-C.

The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Dr. Rahim declared a conflict with regard to Jessica Faye Dunkley, P.A.-C. and left the meeting room at this time. Mr. Wright reported that the Committee reviewed and discussed the application for physician assistant licensure of Jessica Faye Dunkley, P.A.-C. It was the recommendation of the Licensure Committee that Ms. Dunkley be approved for physician assistant licensure through a Consent Order with the following terms: (1) that any practice agreement submitted, other than core duties, must be reviewed by the Physician Assistant Committee prior to authorization; (2) that Ms. Dunkley practice under direct supervision for a minimum of six months; and (3) that Ms. Dunkley’s supervising physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when direct supervision should be lifted. The
motion of the Committee was given by Mr. Wright, and the motion carried. Dr. Rahim returned to the meeting room at this time.

Mr. Wright reported that the Committee reviewed and discussed the application for reactivation of licensure of Jacob Martin Short, P.A.-C. The Committee will request that Mr. Short appear before the Committee at its May 2017 meeting.

Mr. Wright reported that the Committee reviewed and discussed the reinstatement of licensure application of Patrick Alan Hager, P.A.-C. It was the recommendation of the Licensure Committee that Mr. Hager be approved for reinstatement of physician assistant licensure. The motion of the Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that James Michael Lackey, P.A.-C. entered into a Consent Order with the Board on January 4, 2016, which restricts his practice as a physician assistant to direct supervision for a minimum period of seven hundred and twenty documented work hours and requires quarterly reports from his supervising physician for a minimum of a two-year probationary period. Mr. Lackey’s supervisor submitted the required quarterly report, documentation of the seven hundred and twenty work hours completed, a recommendation to lift the direct supervision requirement, and a proposed practice agreement which would include the delegation of prescribing privileges. The Committee will notify Mr. Lackey via letter that the restriction for direct supervision has been lifted, and approve the proposed practice agreement submitted requesting prescription privileges pending receipt of modification required by the Physician Assistant Committee.

Mr. Wright reported that the Physician Assistant Committee reviewed and discussed inquiries that have been made to Board staff and to the Committee Chair concerning the signatory requirement on the Verification of Education form. The
Committee will continue to use the current verification form and accept signatory verification with accompanying official seal from the applicant's awarding school.

Mr. Wright reported that the Committee reviewed and discussed the inquiry of a licensee regarding whether she would be able to practice telemedicine as a licensed physician assistant, and if so, would it require a change in her current authorized practice agreement. The Committee determined that the practice of telemedicine by a physician assistant, at a minimum, would need to be delineated in the proposed practice agreement and be limited to the supervising physicians scope of practice. All practice agreements proposing the practice of telemedicine will be considered by the Physician Assistant Committee prior to authorization.

Mr. Wright reported that Board staff provided an update and the Physician Assistant Committee discussed proposed legislation of three bills pending during the 2017 legislative session which seek to modify the Physician Assistants Practice Act.

Mr. Wright reported that licensure renewal began for the 947 currently licensed physician assistants on Wednesday, February 8, 2017 and continues through March 31, 2017. As of March 10, 2017, 455 applications have been processed and 50 additional applications have been submitted. Renewal continues through March 31, 2017.

Mr. Wright reported that Board staff authorized 80 practice agreements for the period of January 9, 2017 to March 10, 2017.

Dr. Rahim delivered the report of the Licensure Committee, which met on Saturday, March 11, 2017.
Shailinder Jit Singh, M.D. appeared before the Licensure Committee in support of his application for an extraordinary circumstances medical license. The Committee recommended that Dr. Singh be approved for licensure pursuant to WV Code §30-3-10(e) based on the following findings:

1) The applicant has exceptional education, training and practice credentials, including:
   a. Serving as a pediatric surgeon and pediatric urologist, including service as an attending physician, in England for greater than sixteen years;
   b. Serving as Program Director for Pediatric Surgery at University Hospital Queen’s Medical Center in Nottingham;
   c. Establishing the Bastow Clinical Investigative Unit in Pediatric Gastrointestinal Physiology at Nottingham University Hospitals, which has produced pioneering research on pelvic ultrasound and gastric emptying studies;
   d. Serving as an attending pediatric surgeon and pediatric urologist at Children’s National Medical Center in Washington, D.C., where he maintains a license;
   e. Fellow of Royal College of Surgeons of Ireland and the Royal College of Surgeons in England; and
   f. Documented research experience in gastric emptying and pelvic ultrasound.

2) The applicant’s practice in the state would be beneficial to the public welfare by providing access to pediatric surgery and
pediatric urology in West Virginia, two specialties for which there is a current and significant unmet need in this state.

3) The applicant’s specialized surgical training and current research aims to diminish the occurrence of liver failure in pediatric patients with certain congenital intestinal conditions and disorders.

4) The applicant’s education and training occurred outside of the United States and are not, standing alone, substantially equivalent to the requirements of licensure in this state, the totality of his education, training and practice credentials are substantially equivalent to the requirements of licensure established in W. Va. Code §30-3-10(f).

5) The applicant received greater than twelve years of postgraduate training outside of the United States and its territories, including substantial training in pediatric surgery and pediatric urology.

6) The applicant has no discipline which would render him ineligible for an extraordinary circumstances license.

7) The applicant is eligible for a restricted license in extraordinary circumstances.

The Committee further recommended that Dr. Singh be approved for a restricted license limited according to practice location at West Virginia University Hospitals, 1 Medical Center Drive, Morgantown, West Virginia, and that the applicant’s license be restricted to the practice of pediatric surgery, pediatric urology and related research activities. Following an overview of extraordinary circumstances licensure requirements, the motion of the Committee was given by Dr. Rahim, and the motion carried with the statutorily required three-fourths majority of the membership of the Board. The Board adopted the recommended findings, practice location and practice limitation of the Licensure Committee without modification and granted an extraordinary circumstances license to this applicant.
Lawrence John Jedlicka, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. It was the recommendation of the Committee that Dr. Jedlicka be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

Mark Anthony Salvaggio, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. It was the recommendation of the Committee that Dr. Salvaggio be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

Melissa Lea Morton-Fishman, M.D. appeared before the Licensure Committee in support of her application for a permanent medical license. It was the recommendation of the Committee that Dr. Morton-Fishman be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

At its July 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Sassan Naderi, M.D. Dr. Naderi’s application was placed on hold pending receipt of additional information from a third-party source, however, the information requested will not be provided by the third party. After discussion at its November 2017 meeting, the Committee requested Dr. Naderi’s appearance at its January 2017 meeting. Dr. Naderi was unable to attend the January meeting. The Committee requested his appearance at its March 2017 meeting. Dr. Naderi did not appear nor explain his absence. No action was taken by the Licensure Committee. Dr. Naderi’s application will expire on April 28, 2017, due to not having been completed within one year from receipt.

14
The Licensure Committee reviewed and discussed the application for a permanent medical license of Niv Ad, M.D. Dr. Ad was unable to appear at the March 2017 meeting in support of his application. The Licensure Committee will request that Dr. Ad appear before the Committee at its May 2017 meeting if he wishes to continue to pursue licensure.

Behrooz Tohidi, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. It was the recommendation of the Committee that Dr. Tohidi be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Jeremy Alan Herschler, M.D. The Licensure Committee will request that Dr. Herschler appear before the Committee at its May 2017 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Bassem Ragheb George, M.D. It was the recommendation of the Licensure Committee to accept the medical education as satisfactorily verified and approve Dr. George for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Yahia Homsi, M.D. The Licensure Committee will request that Dr. Homsi appear before the Committee at its May 2017 meeting.
The Licensure Committee reviewed and discussed the application for a permanent medical license of David Lamont Nielson, M.D. It was the recommendation of the Committee that Dr. Nielson be approved for licensure. The motion of the Licensure Committee was given by Dr. Nielson, and the motion carried.

The Licensure Committee reviewed and discussed a request submitted by Takashi Murashita, M.D. to modify the practice location of his extraordinary circumstances license to include the location of Camden Clark Medical Center in Parkersburg, West Virginia. Because the request did not provide sufficient evidence to support a modification of the practice location of his license, the Committee declined to take action on his request. Dr. Murashita may submit additional information for the Committee’s review if he desires.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Codrin Eugene Iacob, M.D. It was the recommendation of the Committee that Dr. Iacob be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Saeed Fatenejad, M.D. The Licensure Committee will request that Dr. Fatenejad appear before the Committee at its May 2017 meeting.

The Licensure Committee reviewed and discussed the application for reactivation of permanent licensure of Shilpa Arun Kadam, M.D. It was the recommendation of the Committee to accept the total continuing medical education hours submitted by the applicant, and to approve Dr. Kadam for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.
The Licensure Committee reviewed and discussed the application for reactivation of permanent licensure of Daniel Resnick, M.D. It was the recommendation of the Committee to accept the total continuing medical education hours submitted by the applicant, and to approve Dr. Resnick for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of permanent licensure of Douglas Scott Tice, M.D. It was the recommendation of the Committee to accept the total continuing medical education hours submitted by the applicant, and to approve Dr. Tice for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

At its November 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Michael Hosny Gabriel, M.D. Dr. Gabriel appeared before the Committee at its January 2017 meeting. Following his appearance, it was the consensus of the Licensure Committee that Dr. Gabriel be given the opportunity to withdraw his licensure application. Dr. Gabriel has submitted a request to withdraw his application. It was the recommendation of the Licensure Committee to accept Dr. Gabriel’s request to withdraw his application. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

At its January 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Leon Philip Jacob, M.D. It was the consensus of the Licensure Committee that Dr. Jacob be given the opportunity to withdraw his application. Dr. Jacob has submitted a request to withdraw his application. It was the recommendation of the Licensure Committee to accept Dr. Jacob’s request to withdraw his application. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.
At its September 2016 meeting, the Licensure Committee reviewed and discussed the application for a permanent license of Stephen McNeil Coarsey, M.D. At that time, the Licensure Committee requested additional information be provided for review. Dr. Coarsey submitted the requested additional information, and at its November 2016 meeting, the Committee recommended that Dr. Coarsey be approval for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. As of the January 2017 meeting Dr. Coarsey had not paid the fee to allow for licensure. The Committee recommended that Dr. Coarsey be notified via certified letter that if the fee remained unpaid his application would be brought before the Committee for action at its March 2017 meeting. Dr. Coarsey responded that he does not want to pursue licensure at this time. It was the recommendation of the Committee to accept Dr. Coarsey’s request to withdraw his application. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

At its January 2017 meeting the Licensure Committee reviewed and discussed the application for a permanent medical license of Muhammad Asad Mirza, M.D. At that time, the Committee recommended that Dr. Mirza be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. When Dr. Mirza was notified of the approval of his application and the need to pay the assessment fee he submitted a request to withdraw his application. It was the recommendation of the Licensure Committee to accept Dr. Mirza’s request to withdraw his application. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of permanent licensure of James Gordon Cain, M.D. It was the recommendation of the Committee to accept the total continuing medical education hours submitted by the applicant, and to approve Dr. Cain for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.
The Licensure Committee reviewed and discussed the application for reactivation of permanent licensure of Kimberly Ann Bruno-de la Mata, M.D. It was the recommendation of the Committee to accept the total continuing medical education hours submitted by the applicant, and to approve Dr. Bruno-de la Mata for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Kerren Harry Elder, M.D. It was the recommendation of the Committee that Dr. Elder be approved for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of George Robert Smith, M.D. It was the recommendation of the Committee to accept the postgraduate training as satisfactorily verified, and to approve Dr. Smith for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of permanent licensure of Kimberly Ann Bruno-de la Mata, M.D. It was the recommendation of the Committee to accept the total continuing medical education hours submitted by the applicant, and to approve Dr. Bruno-de la Mata for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of permanent licensure of Lawrence Alan Cooperstein, M.D. It was the recommendation of the Committee to accept the total continuing medical education hours submitted by the
applicant, and to approve Dr. Cooperstein for reactivation of licensure. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Chi-Kin Ng, M.D. It was the recommendation of the Committee to accept the postgraduate training as satisfactorily verified and approve Dr. Ng for licensure pending payment of the mandatory Patient Injury Compensation Fund assessment fee. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Connie Michell Dela’O, M.D. The Licensure Committee will request that Dr. Dela’O appear before the Committee at its May 2017 meeting.

The Licensure Committee reviewed information regarding potential modifications to the policy on review of applicant malpractice claims. It was determined that no changes were required to the staff’s current practice, and no action was taken by the Committee.

Dr. Rahim reported that there are four potential applicants for a Limited License to Practice Medicine and Surgery at Certain State Veterans Nursing Home Facilities pursuant to W. Va. Code §30-3-11b and 11CSR11. Board staff will begin drafting a Veteran’s Nursing Home Facility License application form.

The Licensure Committee presented a list of compliant applications, which included ninety-one (591 initial medical doctor applications, one initial podiatrist application, one reactivation of medical license application, and one medical doctor application pending payment of the mandatory Patient Injury Compensation Fund
assessment fee. It was the recommendation of the Licensure Committee to approve the following applicants for licensure:

**APPLICANTS FOR PERMANENT LICENSURE - Physicians**

Akram, Yasir  
Allampati, Sanath Kumar  
Anderson, Peter William  
Arnone, Vincent John  
Astome, Walter Jorge  
Badawi, Mohamad Hayssam  
Bagchi, Arindam  
Baghshomali, Sanam  
Bailey, Lin Hsu  
Baralt, Diana Maria  
Barhorst, Brian Randall  
Barnard, II, John Taylor  
Borkon, Matthew Jacob  
Chang, Sidney Tan  
Chu, Jeffrey Ting-Yuan  
Cotoi, Daniel  
Crimson, Heidi Ream  
DeLong, Peter Ade  
Dhumak, Vipal Jayendranath  
DiCiro, Dominic Theodore  
DiPoco, Jason Marc  
Dimachkie, Ziad  
Dohar, Sheena Ann  
Farjo, Peter David  
Fei, Naomi H.  
Fogha, Evan Padinga  
Forte, Michael J.  
Franklin, Mark Nicholas  
Garber, Alan Craig  
Goel, Harsh  
Goldberg, Richard Miles  
Goldhardt, II, Timothy Paul  
Goldstein, Baruch Bernard  
Gumber, Ramnika Iqbal Singh  
Harris, Benjamin Logan  
Hatfield, Nathan Randall  
Hess, Clayton Burnett  
Hu, Lulin
Huff, Nicholas Owen
Inkollu, Sashi Kiran
Ivy, Cathleen Ann
Justice, Charles Matthew
Kaseer, Bahaa Aldeen
Klein, Jonathan Tzvi
Koff, Matthew Douglas
Kowalska, Agnieszka
Kubiczek, Piotr Antoni
Labus, Andrea Michelle
Laird, Dennis
LoDico, Matthew Jean-Paul
Malphrus, Amy Denise
Mandadi, Subhadra
Miller, Samuel Douglas
Minc, Samantha Danielle
Mor, Nadav
Moreland, Margaret Wynne
Nadasdy, Tibor
Narayan, Dwayne Avanish
Naumova, Nadia Nikolaeva
Panbehí, Bahram
Patel, Karina
Patel, Pratik Kumar Popatlal
Potolicchio, Jr., Samuel Joseph
Pulluru, Harish
Raheja, Divisha
Rajagopalan, Swarma
Rassias, Athos John
Reddy, Sirisha Pasham
Renck, Gregory Richard
Santos, Arvin Lopez
Satoskar, Anjali Abhay
Sengupta, Partho Pratim
Shang, Eric Kouwei
Shao, Charles Yanping
Shives, Lisa J.
Shulman, Joshua Alexander
Singh, Richa
Snodgrass, Natalie Jean
Stern, Augustus Graham
Tanner, Jerry Wayne
Tanner, Stacy
Tarakji, Mark Elias
Testani, Jr., Mario  
Thompson, III, Alvin Dewitt  
Tretter, Justin Thomas  
Valavoor, Shahul Hameed  
Vargo, IV, John Austin  
Wagner, Richard Otto  
Walker, Barbara Alice  
Wei, Kavita Kakkad  
West, Fay Bernadette  
Wynn, Tanya Renee

**REACTIVATION APPLICANTS WHOSE LICENSE HAS NOT BEEN ACTIVE FOR MORE THAN ONE YEAR – Physicians**

Cummings, Kelly Frances  
de la Mata, Mariano  
Mercer, Christopher William

**APPLICANT FOR PERMANENT LICENSURE – Podiatrist**

Michael, Jennifer Erin

**APPLICANT FOR PERMANENT LICENSURE  Physician approved pending receipt of the Patient Injury Compensation Fund assessment fee**

Sinha, Rahul Prasad

Dr. Rahim asked the Board members if there were any conflicts, and no conflicts were declared. The Licensure Committee recommended that these applicants be granted original and/or reactivated licenses by the Board. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

Dr. Challa provided the report of the Complaint Committee, which met on Sunday, March 12, 2017.

**CLOSURES**

17-03-W  Majd Mahmoud Arnaout, M.D.
16-166-H Thomas Bartley Benz, M.D.
16-167-B William Claude Bird, M.D.
16-169-T Robert Eugene Blake, M.D.
16-147-W Emily Rebecca Bolling, P.A.-C
16-92-W Matthew M. Bushman, P.A.-C
16-168-B Danny Dale Cline, P.A.-C
16-149-W John Tate Deel, M.D.
16-163-D Bryan Marshall Dent, P.A.-C
17-14-W Steven Joseph Dileo, M.D.
16-135-K Touraj Farid, M.D.
17-16-W Justin P. Glassford, M.D.
16-161-J Mohammad Khalid Hasan, M.D.
15-92-P Mohamad Samah Kalou, M.D.
15-152-F Mohamad Samah Kalou, M.D.
17-22-W Rajai Tawfiq Khoury, M.D.
17-01-D Charles Lye, M.D.
16-139-D Sandra K. May, P.A.-C
16-145-H Amy Beth Pearson, M.D.
16-84-R Manimekalai V. Raman, M.D.
16-07-W David Carol Shamblin, M.D.
16-103-W Matthew Edward Simmons, M.D.
16-155-W Patrick Alan Stone, M.D.
17-32-S Daniel Bruce Thistlewattie, M.D.
16-37-W Chad Christopher Turner, M.D.
16-118-M Vishal Verma, M.D.
16-157-W Heather Michelle Vincent, P.A.-C
16-158-W Deleno H. Webb, II, M.D.
16-164-W Deleno H. Webb, II, M.D.
16-159-W Cheryl Benita Wingate, M.D.

INITIATED COMPLAINTS

17-52-W
17-53-W
17-54-W
17-55-W
17-56-W
17-57-W
17-58-W
17-59-W
17-60-W
17-61-W
WITHDRAWAL OF PREVIOUS INITIATED COMPLAINTS

17-04-W
17-05-W
17-06-W
17-07-W
17-19-W
17-23-W

FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14

15-41-W        Muhammed Samer Nasher-Alneam, M.D.
CONSENT ORDERS

Dr. Challa requested that the Board authorize the Complaint Committee to move forward with offering nine Consent Orders and/or Amended Consent Orders in ongoing Complaint Committee matters. The motion of the Complaint Committee was given by Dr. Challa, and the motion carried.

FULLY EXECUTED CONSENT ORDERS

Dr. Challa reported that the following Consent Orders have been entered since January 8, 2017.

16-90-W  Devender K. Batra, M.D. - On January 12, 2017, the licensee entered into a Consent Order with the Board which imposes a public reprimand to the licensee for having actions taken against his Ohio license for conduct which formed the basis of his Ohio discipline.

15-107-S  Louis W. Groves, M.D. – On February 22, 2017, the licensee entered into a Consent Order with the Board which requires that the licensee permanently cease all prescribing of controlled substances, shall enroll in and successfully complete ten AMA Category I continuing medical education (CME) hours from an accredited CME provider, approved in advance by the Board, on the subject of medical records and documentation. The Order also includes a provision for an annual chart review of Dr. Groves’ medical records.

16-08-W  Ahmed M. A. Kneifati, M.D. – On February 28, 2017, the licensee entered into a Consent Order with the Board which limits the licensee’s practice of medicine in West Virginia to noninvasive procedures and minor procedures which are consistent with limitations and restrictions placed on his practice in Pennsylvania.
16-94-W  William Lavery, M.D. – On February 22, 2017, the licensee entered into a Consent Order with the Board to voluntarily surrender his license to practice medicine and surgery effective February 22, 2017.

16-65-W  Christopher J. Murphy, M.D. – On February 22, 2017, the licensee entered into a Consent Order with the Board to permanently surrender his West Virginia medical license for violations of professional conduct standards set forth in the West Virginia Medical Practice Act.

All Consent Orders are available on the Board’s website.

Dr. Challa reported that on or about April 16, 2013, Joseph A. Jurand, M.D. was indicted in the Circuit Court of Jefferson County, West Virginia, on two felony counts of third degree sexual assault and one misdemeanor count of third degree sexual abuse. Dr. Jurand entered into a detailed Consent Order with the Board, which imposed a stayed suspension and a five year period of probation as a result of his conduct. In September 2016, the Board dissolved the stay of suspension because of his violation of the terms of the Consent Order. Essentially, the characteristics of his practice location were inconsistent with the practice recommendations the Board received from the Professional Renewal Center. Dr. Jurand’s license has been in suspended status for almost six months. Dr. Jurand has received a new report from the Professional Renewal Center which suggested some practice restrictions which could permit his return to practice. Based upon the Professional Renewal Center recommendations, Complaint Committee recommend that the Board offer an Amended Consent Order to Dr. Jurand with specific terms and conditions that set forth the circumstances which would result in the re-imposition of the stay of suspension. Such terms would include an extended term of probation, a requirement for quarterly reporting of work logs and polygraph results, a requirement that Dr. Jurand following all Professional Renewal Center practice recommendations, all practice restrictions which were previously in place and a further restriction for treating patients under the age of twenty-one, and a prohibition on practice
if another physician is not available and on site. The motion of the Complaint Committee was given by Dr. Challa, and the motion carried.

Dr. Duncan declared a conflict with regard to Steven R. Matulis, M.D., and left the meeting room at this time. Dr. Challa reported that effective May 16, 2016, and pursuant to a written request from Steven R. Matulis, M.D. of May 15, 2016, Dr. Matulis’ license to practice medicine and surgery in West Virginia was converted from active status to inactive status. A physician holding an inactive status West Virginia medical license may not practice medicine and surgery in this state.

On July 26, 2016, the West Virginia Board of Medicine received Dr. Matulis’ Application for Change of Status of West Virginia Medical License from Inactive to Active. Dr. Matulis’ application, including supporting documentation was completed on or about August 15, 2016, and was scheduled to be reviewed by the Board at its September 2016 meeting cycle.

On September 11, 2016, Dr. Matulis requested, in writing, that the Board defer action upon his Change of Status Application until the next scheduled meeting cycle. Through counsel, Dr. Matulis submitted subsequent requests to defer action upon his Change of Status Application on November 9, 2016 and January 3, 2017. Having received no further deferral requests, Dr. Matulis’ Change of Status Application was ripe for consideration and action during the Board’s March 2017 meeting cycle.

Pursuant to W. Va. Code §30-3-12(k):

An inactive license may be converted by the board to an active license upon a written request by the licensee to the board that:

1. Accounts for his or her period of inactivity to the satisfaction of the board; and
2. Submits written documentation of participation in and successful completion of a minimum of fifty hours of continuing medical or podiatric education satisfactory to the board, as appropriate to the particular license, during each preceding two-year period.

Additionally, the Board may deny an application for license, or other authorization to practice medicine and surgery, if the application has been adjudged by the Board as unqualified for any of the reasons set forth in the West Virginia Medical Practice Act or the Board’s legislative rules. W. Va. Code §30-3-14(c).

On March 12, 2017, the Complaint Committee of the Board reviewed Dr. Matulis’ Change of Status Application. The Complaint Committee recommends to the Board that Dr. Matulis’ Change of Status Application be denied because the Board has previously found probable cause to institute disciplinary proceedings against Dr. Matulis with respect to West Virginia Board of Medicine administrative complaint Nos. 16-46-W and 16-54-W. These administrative complaints involve serious allegations of professional misconduct, boundary violations, and patient safety concerns. A Complaint and Notice of Hearing setting these administrative matters for public hearing is in the process of being issued. The motion of the Complaint Committee denying Dr. Matulis’ Change of Status Application was given by Dr. Challa, and the motion carried. Dr. Duncan returned to the meeting room at this time.

There being no further business to consider, Dr. Challa moved that the meeting be adjourned. Dr. Upton seconded, and the motion carried.

Ahmed D. Faheem, M.D.  
President

Rahul Gupta, M.D., M.P.H  
Secretary
CALL TO ORDER

Approval of Minutes

- March 13, 2017

Announcements

Committee and Staff Reports, Discussion and Action:

- Executive/Management Committee
- Personnel Committee
- Legislative Committee
- Board Attorney
- Physician Assistant Committee
- Licensure Committee
- Complaint Committee

ADJOURNMENT
A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 8th day of May 2017 at 9:00 a.m.

The following Board members were present for the meeting:

Ahmed D. Faheem, M.D., President  
Kishore K. Challa, M.D., F.A.C.C., Vice President  
Rahul Gupta, M.D., M.P.H., Secretary  
Reverend O. Richard Bowyer  
Rusty Cain, D.P.M.  
Harry Duncan, M.D.  
Cheryl Henderson, J.D.  
Carrie Lakin, D.P.M.  
David Mullins, M.D.  
Mustafa Rahim, M.D.  
Ashish Sheth, M.D.  
Wes Steele, M.D.  
Matthew Upton, M.D.  
K. Dean Wright, P.A.-C.

The following Board member was absent:

Beth Hays, M.A.

The following Staff members were present:

Mark A. Spangler, M.A.  
Jamie S. Alley, Esq.  
Jamie C. Frame  
Leslie A. Thornton-Inghram, CMBI

Dr. Faheem called the meeting to order. Dr. Rahim moved that the minutes of the March 13, 2017 meeting be approved. Dr. Cain seconded, and the motion carried.
Dr. Faheem announced that there are two matters for which the Board may need to hold a special meeting between today, May 8, 2017, and the July 10, 2017 Board meeting. The first matter pertains to authorizing Board staff to file a Notice of a Public Hearing or Comment Period on a Proposed Rule with the Secretary of State’s office. The second matter is consideration of the hearing Examiner’s Proposed Findings of Fact, Conclusions of Law and Recommended Decision with regard to hearings that recently concluded, and which will be ripe for decision prior to the July meeting. Dr. Faheem scheduled a special meeting of the Board for Monday, June 19, 2017 at 4:30 p.m.

Dr. Faheem announced that several board and staff members recently attended the Federation of State Medical Boards (FSMB) annual meeting in Fort Worth, Texas. The Board’s former Executive Director, Robert C. Knittle, was selected to receive the 2017 FSMB Distinguished Service Award; however, Mr. Knittle unable to attend the meeting, therefore Dr. Faheem accepted the award on Mr. Knittle’s behalf. Mr. Knittle was also the recipient of the Administrators in Medicine Doug Cerf Executive Director Award for his distinguished service.

Dr. Faheem reported that the Executive/Management Committee met yesterday morning, Sunday, May 7, 2017, at which time the Committee was presented with and approved the fiscal reports and purchasing card transactions for the months of March and April 2017.

Dr. Faheem reported that Big Picture has not followed through with their commitment to address concerns and provide the level of service that the Board expects. Renewals for medical doctors (M-Z), podiatric physicians, Professional Limited Liability Companies and drug dispensing registrations began on May 3, 2017. Despite months of notice, Big Picture was unable to provide accurate and usable on-line renewal applications, resulting in utilization of paper applications until several remaining problems are corrected.
Due to the unsatisfactory service that Big Picture has provided, the Committee recommended that the Board authorize Mr. Spangler to begin looking for a new database vendor and move forward with initiating the bidding process. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that the Committee reviewed a letter submitted to the Board which indicates that PEIA has partnered with iSelectMD physicians to provide telehealth services to all PEIA members for non-emergent medical conditions. An iSelectMD physician will recommend a treatment plan and, when appropriate, prescribe medication via telephone. The Committee and Mr. Spangler will follow-up with Ted Cheatham, Director of PEIA, to ensure that this process is in full compliance with the telemedicine provisions in W. Va. Code §30-3-13a.

Dr. Faheem reported that the Board has begun leasing the office space previously occupied by the West Virginia Board of Registered Professional Nurses, and that renovations have commenced.

Dr. Faheem reported that the Board’s spending authority in relation to personnel has been increased to cover additional needed staff in the 2018 budget. The Executive Director will analyze the agency’s needs and hire additional staff accordingly.

Dr. Faheem reported that he and Mr. Spangler would like to hold a special board meeting in the fall dedicated to discussing strategic planning.

Dr. Faheem reported that physician assistant licensure renewals ended on March 31, 2017. Of the 965 physician assistants eligible to renew, 839 renewed their license and 128 allowed their license to expire. These numbers are consistent with prior physician assistant renewals.
Dr. Faheem moved that the Board accept and ratify the report of the Executive / Management Committee. The motion carried.

Dr. Faheem reported that the Personnel Committee met yesterday, Sunday, May 7, 2017, at which time Dr. Faheem announced to the Committee that as a result of the purchasing card audit conducted in September 2016 the Board must bid out any future human resource services.

Dr. Faheem reported that the Committee discussed the ramification of House Bill 2359 regarding the West Virginia Board of Medicine and the West Virginia Board of Osteopathic Medicine having the authority to share staff on an as needed basis. The Committee recognizes the significant burden that currently exists for Board of Medicine staff in fulfilling the duty and mission of the Board; therefore, the Committee recommended that the Board require all proposals for staff sharing be presented to the Personnel Committee for evaluation and feasibility. The motion of Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that the Committee reviewed the compensation analysis for the Board as prepared by AlignHR dated May 5, 2017. The Committee discussed the details of the report, the final annual merit and equity increase worksheet, and the Executive Director’s recommendation for salary increases. The Committee recommended that the Board adopt the Executive Director’s recommendations for salary increases for fiscal year 2018 upon a schedule to be determined at Mr. Spangler’s discretion. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Due to the fact that Mr. Spangler has only been employed by the Board of Medicine for a short period, the Committee moved that the Board authorize Dr. Faheem to write a three month performance evaluation of Mr. Spangler and complete a formal evaluation of him in January 2018. The motion of the Committee was given by Dr. Faheem, and the
motion carried.

Dr. Faheem moved that the Board accept and ratify the report of the Personnel Committee. The motion carried.

In the absence of Ms. Hays, Dr. Faheem chaired the Legislative Committee meeting yesterday, Sunday, May 7, 2017.

Dr. Faheem reported that the Board’s legislative rules 11 CSR 1A, Licensing and Disciplinary Procedures for Physicians and Podiatric Physicians; 11 CSR 1B, Licensure, disciplinary and Complaint Procedures, and Continuing Education for Physician Assistants, and 11 CSR 5,Dispensing of Prescription Drugs by Practitioners, have completed the legislative process and have been signed by the Governor.

Dr. Faheem reported that the following bills, which were monitored by the Committee, have completed the legislative process and have been signed by the Governor: Senate Bill 4, allowing licensed professionals to donate time to care for indigent and needy; Senate Bill 386, creating the West Virginia Medical Cannabis Act; Senate Bill 398, creating the Emergency Volunteer Health Practitioners Act; House Bill 2359, relating to offenses and penalties for practicing osteopathic medicine (this bill authorizes the Board of Medicine and the Board of Osteopathic Medicine to share staff); House Bill 2628, relating to the powers and duties of the Board of Medicine and the Board of Osteopathic Medicine; House Bill 2631, relating to time standards for disposition of complaint proceedings; and House Bill 2833, specifying content for inclusion in annual reports.

Dr. Faheem reported that the following bills have completed the legislative process, but were vetoed by the Governor: Senate Bill 347, relating to modernization of the Physician Assistants Practice Act; and House Bill 2446, requiring executive branch
agencies maintain a website that contains specific information.

Dr. Faheem reported that House Bill 2301, relating to direct primary care, was passed during the 2017 legislative session and provides, but does not require, rule-making authority for the Board. The Committee recommended that the Board defer drafting a rule relating to direct primary care at this time. The motion of the Legislative Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that the Committee revisited its rule-making authority pursuant to the telemedicine law. The Committee recommended that the Board authorize staff to begin researching and preliminarily drafting telemedicine rules with the goal of promulgating rules in the spring of 2018 for consideration by the legislature during the 2019 legislative session. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that 11 CSR 6, *Continuing Education for Physicians and Podiatrists*, and 11 CSR 10, *Practitioner Requirements for Accessing the West Virginia Controlled Substances Monitoring Program Database*, were last updated in 2013. The Committee recommended that the Board authorize staff to revise 11 CSR 6 and 11 CSR 10 for promulgation during the 2018 legislative session. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported on potential legislative goals for 2018, which include: changing the evidence burden in disciplinary matters from clear and convincing to preponderance of evidence, so that the Board of Medicine language and the Board of Osteopathic Medicine language align; changing the timeframe associated with summary proceedings from fifteen days to thirty days, and providing that the hearing can occur before a hearing examiner, rather than the Board; modernizing the time standards for disposition in cases which relate to death and/or overprescribing; waiving certain training
requirements for board certified applicants; allowing Board of Medicine investigators to carry weapons; possible consolidation of the Board of Medicine and the Board of Osteopathic Medicine; and modernization of the Physician Assistants Practice Act. The Committee recommended that the Board authorize staff to explore the matters identified as potential legislative goals for 2018. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem moved that the Board accept and ratify the report of the Legislative Committee. The motion carried.

Ms. Alley reported that the hearing in the matter of West Virginia Board of Medicine, Petitioner, v. Raymond Omar Rushden, M.D., Respondent, was scheduled to convene on May 2, 2017. In lieu of this matter going to hearing, Dr. Rushden has agreed to enter into a Consent Order with the Board of Medicine. Prior to the meeting a copy of the Consent Order was made available for members to review. Dr. Rahim moved that the Board accept the Consent Order signed by Dr. Rushden on April 18, 2017. Dr. Lakin seconded, and the motion carried.

Ms. Alley reported that upcoming hearings are scheduled for the following dates: June 7-8, 2017, June 16, 2017, and June 26-28, 2017.

Ms. Alley reported that on February 17, 2017, the Kanawha County Circuit court issued an Order Denying Appeal of the Board’s Final Order in the matter of Shivkumar Iyer, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent. The circuit court affirmed the Board’s Final Order. Dr. Iyer has filed an appeal in the West Virginia Supreme Court. A Scheduling Order has been issued with regard to this matter; Dr. Iyer’s brief is due on June 23, 2017, and the Board of Medicine’s brief is due on August 7, 2017.
Ms. Alley reported that in January 2017, the Board issued a Final Order denying the application for licensure to practice medicine and surgery in the state of West Virginia, in the matter of Diane Elain Shafer, M.D. Dr. Shafer filed a Petition in Mingo County Circuit Court to Appeal the Board’s Final Order. Briefs are due on May 30, 2017 in this matter, and the matter is set for Oral Argument on June 22, 2017.

Mr. Wright provided the report of the Physician Assistant Committee, which met on Saturday, May 6, 2017.

Mr. Wright reported that at the Board meeting on March 11, 2017, the Physician Assistant Committee recommended, and the Board approved, that Jessica Faye Dunkley, P.A.-C. be approved for licensure contingent upon her acceptance of a Consent Order with the following terms: (1) that any practice agreement submitted including advanced duties must be reviewed by the Physician Assistant Committee prior to authorization; (2) that Ms. Dunkley practice under direct supervision for a minimum of six months; and (3) that Ms. Dunkley’s supervising physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when direct supervision should be lifted. Ms. Dunkley agreed to these terms, and entered into a Consent Order with the Board on April 4, 2017.

Mr. Wright reported that Jacob Martin Short, P.A.-C. appeared before the Physician Assistant Committee in support of his application for reactivation of his Physician Assistant License. It was the recommendation of the Licensure Committee that Mr. Short be approved for Physician Assistant licensure, and that any practice agreement submitted which includes a request for advanced duties will require review by the Physician Assistant Committee prior to authorization. The motion of the Committee was given by Mr. Wright, and the motion carried.
Mr. Wright asked Board members to review the list of physician assistants up for action and to advise of any conflicts. No conflicts were declared.

The Physician Assistant Committee recommended the following applicants be approved for physician assistant licensure:

Erin Kristin Bateman, P.A.-C.
Jonathan Mitchell Guy, P.A.-C.
Christopher Patrick Kelly, P.A.-C.
Brandon L. Miller, P.A.-C.
Abigail Hubble Salser, P.A.-C.
Megan Marissa Sanko, P.A.-C.
Danielle Caitlin Soya, P.A.-C.

The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

The Physician Assistant Committee recommended that Christopher Engley Carter, P.A.-C be approved for reinstatement of physician assistant licensure. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

The Physician Assistant Committee recommended that Maureen E. Lacaria, P.A.-C be approved for reinstatement of physician assistant licensure pending payment of the reinstatement fee and receipt of evidence of her legal name. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that the Physician Assistant Committee reviewed the quarterly status reports submitted pursuant to the September 27, 2016 Consent Order of Kimberly Elaine Connor, P.A.-C. Ms. Connor was restricted to direct supervision for a minimum period of six months. Her supervising physician has recommended that the restriction be lifted. It was the recommendation of the Licensure Committee that the Board issue an
Order releasing Ms. Connor from her Consent Order. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

The Physician Assistant Committee reviewed separate matters involving potential professional misconduct allegations regarding two licensees, and elected to refer on matter to the Complaint Committee.

Mr. Wright reported that physician assistant licensure renewal for the 2017 renewal period concluded on Friday, March 31, 2017. A total of 835 physician assistants successfully completed the renewal process, and two physician assistants who did not submit complete applications by the deadline are applying for reinstatement. Four of the five licensed Type B physician assistants renewed their licenses. As of Saturday, May 6, 2017, there were 840 physician assistants actively licensed by the West Virginia Board of Medicine.

Mr. Wright reported that Board staff have authorized seventy-seven (77) practice agreements since the March 2017 meeting. Additionally, 17 alternate supervisors were designated.

Mr. Wright moved that the Board accept and ratify the report of the Physician Assistant Committee. The motion carried.

Dr. Rahim delivered the report of the Licensure Committee, which met on Saturday, May 6, 2017.

Three applicants appeared before the Committee on Saturday to discuss their applications. Based upon the Committee’s review of the relevant applications, and its discussion with the applicants, the Committee made the following recommendations:
1. Approve Yahia Homsi, M.D. for permanent medical license.

2. Approve Connie Michell DeLa’O, M.D. for a permanent medical license pending receipt of a copy of a letter of recommendation from Conemaugh Memorial Medical Center Surgery Program Director Russell Dumire, M.D. that is addressed to the Surgical Critical Care Fellowship program Vidant Medical Center of East Carolina University satisfactory to the Board.


The motion of the licensure committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that two applicants who were invited to appear before the Committee, Saeed Fatenejad, M.D. and Niv Ad, M.D., were unable to appear on Saturday. The Committee will request that these applicants appear at the July 2017 meeting.

Dr. Rahim reported that the Licensure Committee reviewed and discussed fifteen applications. Base thereupon, the Committee made the following recommendations:

1. Approve Jeremy W. Brouillette, D.P.M. for permanent podiatric licensure.

2. Approve the following applicants for permanent medical licensure pending payment of the patient injury compensation fund assessment fee:

   Bisher Oscar-Shucr Mustafa, M.D.
   Rahul Prasad Sinha, M.D.
   Charles Michael Brown, M.D.

3. Accept medical school education as satisfactorily verified and approve Hesham Mohamed Ahmed-Amr, M.D. and Ilene Susan Young, M.D. for permanent medical
licensure pending payment of the patient injury compensation fund assessment fee based on the following factors: applicants are graduates of schools from countries currently in civil unrest, are currently licensed in other jurisdictions and are American Board of Medical Specialties certified in radiology and family medicine respectively.

4. Approve Michele Marie Carr, M.D. for permanent medical licensure pending payment of the patient injury compensation fund assessment fee and pursuant to WV Code R. §11-1A-4.8.(b) based upon five years of post-graduate training, including a year fellowship in Otolaryngology in SUNY Buffalo, NY, and her American Board of Medical Specialties member board certification by the American Board of Otolaryngology.

5. Approve Emad Youhanna Mousa, M.D. and Nathan Benjamin Menke, M.D. for change of status of permanent medical license from inactive to active.

The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

Based upon review of application materials, the Committee elected to invite the following applicants to appear at the Committee's July 2017 meeting:

Wayne Ernest Tobin, M.D.
Anil Dutt, M.D.
Gianna Joanne Link, M.D.
Anthony Todde Securo, M.D.

Based upon review of application materials, the Committee elected to invite Jeremiah William Hayanga, M.D. to submit a request to withdraw his application prior to a determination by the Board upon the merits of the application.
The Committee recommended that the Board approve the following applicants for licensure:

**Permanent Medical Licensure**
Ahmad, Zeeshan
Ahsan, Afiah Anis
Anand, Abhishek
Azuqa, Abeer Aref
Bailey, Jason James
Benado, David Nissim
Berkson, David Arnold
Bodenhamer, John Richardson
Boman, Lars
Brandmeir, Nicholas James
Campsey, David Michael
Casis, Paul Norman
Catena, William Joseph
Chaffin, Samantha Leigh
Chaudhuri, Kallool
Chen, Charles Bo
Chigurupati, Naga Sambhavi
Cook, Johanna Lucy
Deskins, Christopher Russell
DeVience, Eva Xiaoyun
Dionne, Christopher Michael
Fagin, Colby Lynn
Farooki, Sana
Goodman, Brian Michael
Gorchynsky, Andrew Michael
Grabo, Jr., Daniel John
Reich, Irwin Martin
Settles, II, Jeffery Dirk
Sheshadri, Navaneetha Krishnan
Skandamis, George Constantinos
Swartz, Barbara Elizabeth
Tariq, Fatima
Tummala, Mounika
Vaughan, II, Freddie William
Wu, Xinyu

Permanent Podiatric Licensure
Abbasi, Amir

The motion of the Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that renewals began on May 3, 2017, with paper applications being available. On-line renewal is anticipated to be functioning in the near future. The renewal period ends at 4:30 p.m. EDT on June 30, 2017. Prior to the conclusion of the May meeting, 3,563 medical doctors and 126 podiatric physicians were eligible to renew their license.

Dr. Rahim reported that the Interstate Medical Licensure Compact licensure pathway has become active, and the Board has received one application thus far.

Dr. Rahim moved that the Board accept and ratify the report of the Licensure Committee. The motion carried.

Dr. Challa provided the report of the Complaint Committee, which met on Sunday, May 7, 2017. Dr. Challa reported the following activities:
CLOSURES

16-170-M  Peter Lee Ang, M.D.
16-128-W  Alfred Baldera, M.D.
17-47-H   John Mirrell Clark, M.D.
17-33-B   Robert Joseph Crow, Jr., M.D.
17-36-H   Ahmed Daver Faheem, M.D.
17-34-B   David Samuel Gloss, II, M.D.
17-17-W   Violeta Gonzalez, P.A.-C
17-43-F   Violeta Gonzalez, P.A.-C
17-44-B   Eric Shane Hopkins, M.D.
17-21-W   Terrence Darryl Julien, M.D.
17-35-H   Karunasree Kanuri, M.D.
16-172-K  Charles Lye, M.D.
17-30-K   Charles Lye, M.D.
17-49-N   Hanibal Mahdi, M.D.
17-02-C   Sandra K. May, P.A.-C
17-25-W   Russell Anthony Miller, M.D.
16-134-W  Vivek Pratrap Padha, M.D.
17-41-C   Ajay Tribhovandhal Patel, M.D.
16-138-S  Robert Carl Pennington, M.D.
16-140-D  Robert Carl Pennington, M.D.
16-165-R  Brian Powderly, M.D.
17-39-M   Amal Fostok Sakkal, M.D.
17-31-C   Muhammad Salman, M.D.
16-156-W  Adin Lim Timbayan, M.D.
17-27-W   Rose Onyinyechi Uradu, M.D.
16-171-J  Brian Roland Whyte, M.D.

INITIATED COMPLAINTS

17-100-W
17-101-W
17-102-W
17-103-W
17-104-W
17-105-W
17-106-W
17-107-W
17-108-W
17-109-W
17-110-W
WITHDRAWAL OF PREVIOUS INITIATED COMPLAINT

17-54-W

CONSENT ORDERS

Dr. Challa requested that the Board authorize the Complaint Committee to move forward with offering nine Consent Orders and/or Amended Consent Orders in ongoing Complaint Committee matters. The motion of the Complaint Committee was given by Dr. Challa, and the motion carried.

FULLY EXECUTED CONSENT ORDERS

Dr. Challa reported that since the March meeting, fully executed Consent Orders have been entered with respect to the following licensees:

John Emil Capito, M.D. – On May 2, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $800.00 for providing an inaccurate response to Professional Practice Question Number Twelve on his most recent renewal application.

Devin Mark Ciliberti, M.D. – On April 13, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $800.00 for providing an inaccurate
response to Professional Practice Question Number Twelve on his most recent renewal application.

Nabeel Ghabra, M.D. – On April, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $800.00 for providing an inaccurate response to Professional Practice Question Number Twelve on his most recent renewal application.

Joseph Jurand, M.D. – Dr. Jurand was previously under a Consent Order, beginning in 2014, which included a stayed suspension and period of probation. The Board dissolved the stay of suspension in September 2016 based upon its determination that Dr. Jurand was in violation of the terms and conditions of the 2014 Consent Order. Dr. Jurand petitioned to modify his suspension. In March 2017, an Amended Consent Order was entered that re-imposes a stay of suspension, and includes strict practice restrictions and limitations during Dr. Jurand’s period of probation. His period of probation was extended until June 30, 2020.

All Consent Orders are available on the Board’s website.

Dr. Challa moved that the Board accept and ratify the report of the Complaint Committee, and the motion carried.

There being no further business to consider, Dr. Rahim moved that the meeting be adjourned. Dr. Cain seconded, and the motion carried.

Ahmed D. Fahcem, M.D.  
President

Rahul Gupta, M.D., M.P.H  
Secretary

18
CALL TO ORDER

- Consideration of whether the continuation in practice of a licensee constitutes an immediate danger to the public

ADJOURNMENT
An emergency meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 25th day of May, 2017, at 5:00 p.m.

The following Board members attended the meeting via teleconference:

Ahmed D. Faheem, M.D., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
Rahul Gupta, M.D., M.P.H., Secretary
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Harry Duncan, M.D.
Beth Hays, M.A.
Cheryl Henderson, J.D.
Carrie Lakin, D.P.M.
David Mullins, M.D.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
Wes Steele, M.D.
Matthew Upton, M.D.
K. Dean Wright, P.A.-C.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Jamie C. Frame
Leslie Thornton-Inghram, CMBI

Dr. Faheem called the meeting to order and thanked members for joining the meeting on short notice. He announced that the purpose of the emergency meeting is to consider whether Yasar Aksoy, M.D.'s continuation in practice constitutes an immediate danger to the public requiring immediate action by the Board.
Ms. Alley reported to the Committee that a public hearing in the matter of *West Virginia Board of Medicine, Petitioner, v. Yasar Aksoy, M.D., Respondent*, Complaint Nos: 16-25-H and 16-113-W, is scheduled to convene on June 7-8, 2017.

On March 14, 2017, the West Virginia Department of Health and Human Resources filed a Verified Petition for Injunctive Relief and a Proposed Temporary Restraining Order in the Circuit Court of Raleigh County seeking to enjoin Dr. Aksoy from operating his medical practice as a chronic pain management clinic. On May 12, 2017, West Virginia Department of Health and Human Resources’ request for a temporary restraining order was granted, prohibiting Dr. Aksoy from continuing to prescribe opioid medications to alleviate pain.

On May 24, 2017, Adkins Pharmacy was presented with a Percocet prescription, dated May 23, 2017, which was written by Dr. Aksoy. The pharmacist declined to fill the prescription and notified the Raleigh County Sheriff’s Department. Earlier today, May 25, 2017, the Board of Medicine received a copy of the prescription written by Dr. Aksoy. The Board of Medicine Investigator, Ms. Thornton-Inghram, conducted a verbal interview with the pharmacist employed by Atkins Pharmacy. During the interview, the pharmacist stated that she had received a call from Dr. Aksoy’s medical practice asking whether the pharmacy would fill a prescription for an opioid product written by Dr. Aksoy for a different patient. The evidence in the Board’s possession suggests that Dr. Aksoy continues to prescribe opioid medications in violation of a valid circuit court order prohibiting this conduct.

On multiple occasions, the latest being today, Thursday, May 25, 2017, Dr. Aksoy has notified the Board that he intends to close his medical practice. However, despite his repeated notices, Dr. Aksoy has not closed his medical practice, and he continues to practice in Beckley, West Virginia.
Dr. Rahim moved that the Board enter into executive session for the purpose of receiving legal advice. Ms. Henderson seconded, and the motion carried.

The Board re-entered public session. After discussion, Reverend Bowyer moved that the Board determine that:

1. Dr. Aksoy’s continued prescribing of opioid drug products is in violation of the Temporary Restraining Order issued by the Raleigh County Circuit Court and constitutes an immediate danger to the public;
2. Evidence in the Board’s possession indicates that Dr. Aksoy’s continuation in practice or unrestricted practice constitutes an immediate danger to the health, welfare and safety of the public;
3. In addition to constituting an immediate danger to the health, welfare and safety of the public, Dr. Aksoy’s continued prescribing of opioid drug products in violation of the Temporary Restraining Order issued by the Raleigh County Circuit court violates the professional conduct standards set forth in the West Virginia medical Practice Act and the Board’s legislative rules, including but not limited to:
   a. W. Va. Code §30-3-14(c)(17) and W. Va. Code R. §11-1A-12.1.o, related to failing to perform any statutory or legal obligation placed upon a physician; and/or
   b. W. Va. Code §30-3-14(c)(17) and W. Va. Code R. §11-1A-12.1.bb, relating to the violation of any law or lawfully promulgated rule or regulation of this State which relates to or regulates the practice of medicine when the licensee knew or should have known his or her actions violated the law; and/or
   c. W. Va. Code §30-3-14(c)(17) and W. Va. Code R. §11-1A-12.1.e, related to engaging in dishonorable, unethical or unprofessional conduct of a character likely to deceive, defraud or harm the public or any member thereof; and/or
d. W. Va. Code §30-3-14(c)(17) and W. Va. Code R. §11-1A-12.1.j, related to engaging in unprofessional conduct, including, but not limited to, any departure from or failure to conform to, the standards of acceptable and prevailing medical practice or the ethics of the medical profession, irrespective of whether or not a patient is injured thereby; and/or

e. W. Va. Code §30-3-14(c)(17) and W. Va. Code R. §11-1A-12.2.d, related to conduct which is calculated to bring or has the effect of bringing the medical profession into disrepute, including, but not limited to, any departure from or failure to conform to the standards of acceptable and prevailing medical or podiatric practice within the state, and any departure or failure to conform to the current principles of medical ethics of the AMA; and/or

f. W. Va. Code §30-3-14(c)(17) and W. Va. Code R. §11-1A-12.2.a,B, related to prescribing a controlled substance with the intent to evade any law with respect to the sale, use or disposition of the controlled substances.

4. Such a danger to the public demands extraordinary measures, and in accordance with its statutory mandate to protect the public interest, the license to practice medicine of Dr. Aksoy, license number 14953, must be summarily suspended, in accordance with the provisions of W.Va. Code §30-3-14(k) and W. Va. Code R. §11-3-10.16 (2010). Reverend Bowyer further moved that, based upon these facts and determinations that the board suspend the medical license of Yasar Aksoy, M.D., License No. 14953, effective at 11:59 p.m. on the date that an Order is served upon Dr. Aksoy. Dr. Rahim seconded, and the motion carried.

Dr. Rahim further moved that that the hearing upon Dr. Aksoy’s summary suspension be delegated to Hearing Examiner Jack McClung, who is already scheduled to handle the collateral disciplinary matter set for June 7-8, 2017. Ms. Hays seconded, and the motion carried.
There being no further business to consider, the meeting adjourned.

Ahmed Daver Faheem, M.D.
President

Rahul Gupta, M.D., M.P.H.
Secretary
CALL TO ORDER

- Consideration of a Disciplinary Consent Order with Regard to Yasar Aksoy, M.D.

ADJOURNMENT
A special meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 6th day of June, 2017, at 4:30 p.m.

The following Board members attended the meeting via teleconference:

Ahmed D. Faheem, M.D., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
Rahul Gupta, M.D., M.P.H., Secretary
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Beth Hays, M.A.
Cheryl Henderson, J.D.
Carrie Lakin, D.P.M.
David Mullins, M.D.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
Wes Steele, M.D.
K. Dean Wright, P.A.-C.

The following Board member was present:

Harry Duncan, M.D.

The following Board member was absent:

Matthew Upton, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Jamie C. Frame
Leslie Thornton-Inghram, CMBI
Dr. Faheem called the meeting to order, and announced that the purpose of this meeting is to consider a Disciplinary Consent Order with regard to Yasar Aksoy, M.D.

Dr. Faheem reported that at the emergency Board meeting, which was held on May 25, 2017, the Board voted to summarily suspend Dr. Aksoy’s license to practice medicine and surgery in the state of West Virginia. Dr. Aksoy was personally served with a copy of the Order of Summary Suspension on May 30, 2017. In lieu of proceeding to public hearing upon the pending Complaint and Notice of Hearing and Summary Suspension of License to Practice Medicine and Surgery, Dr. Aksoy agreed to enter into a Consent Order with the Board to effectuate the permanent, voluntary surrender of his West Virginia medical license. In advance of the meeting a copy of the Consent Order, which was signed by Dr. Aksoy on May 30, 2017, was made available for members to review.

Following discussion, Dr. Rahim moved that the Board accept the Consent Order as signed by the licensee with the correction of a typographical error on page ten of the Consent Order. Ms. Hays seconded, and the motion carried.

There being no further business to consider, the meeting adjourned.

Ahmed Daver Faheem, M.D.
President

Rahul Gupta, M.D., M.P.H.
Secretary
CALL TO ORDER

• Legislative Topics
  • 11 CSR 6 – Continuing Education for Physicians and Podiatrists
  • 11 CSR 10 – Practitioner Requirement for Accessing the WV Controlled Substance Monitoring Program Database
  • Senate Bill 1014 - Relating generally to physician assistants
  • Proposed Amendments to the WV Board of Pharmacy Rule 15 CSR 12

• Consideration of Recommended Decisions and Possible Board Action
  • Joel David Shiffler, M.D.
  • Omar Khalid Hasan, M.D.

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Special Board Meeting Minutes
June 19, 2017

A special meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 19th day of June, 2017, at 4:30 p.m.

The following Board members attended the meeting via teleconference:

Ahmed D. Faheem, M.D., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
Rahul Gupta, M.D., M.P.H., Secretary
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Beth Hays, M.A.
Cheryl Henderson, J.D.
David Mullins, M.D.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
Wcs Stickle, M.D.
Matthew Upton, M.D.
K. Dean Wright, P.A.-C.

The following Board member was present for the meeting:

Harry Duncan, M.D.

The following Board member was absent:

Carrie Lakin, D.P.M.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Jamie C. Frame

The following Counsel from the West Virginia Attorney General’s Office were present:

Katherine Campbell, Esq.
Mary Downey, Esq.
Dr. Faheem called the meeting to order, and roll call was taken by Ms. Frame. With a quorum of the Board present and participating, the meeting commenced.

At the May 8, 2017 meeting, the Board authorized staff to revise 11 CSR 6, *Continuing Education for Physicians and Podiatrists*, for promulgation during the 2018 legislative session. In advance of today’s meeting, members were provided with a copy of the proposed revision of 11 CSR 6. Ms. Alley reported that the proposed amendments to the rule modernize and clarify the language of the existing rule, identify when an applicant may utilize post-graduate training to satisfy continuing education requirements, updates the requirements for drug diversion training and best practice prescribing training to incorporate a training component on prescribing and administration of an opioid antagonist, clarify that three hours of Board-approved drug diversion training and best practice prescribing of controlled substances training must be completed each renewal cycle unless the renewal applicant has not prescribed, administered or dispensed controlled substances pursuant to a West Virginia license during the reporting period, clarify when written documentation of successful completion of CME must be submitted to the Board by renewal, change of status, reinstatement and reactivation applicants, and establish protocol for Board approval of drug diversion training and best practice prescribing of controlled substances training. Dr. Rahim moved that the Board approve the revision of 11 CSR 6, and authorize staff to move forward with promulgation of the proposed rule. Ms. Hays seconded, and the motion carried.

Mr. Spangler reported that at the May 8, 2017 meeting, the Board authorized staff to revise 11 CSR 10, *Practitioner Requirements for Accessing the West Virginia Controlled Substances Monitoring Program Database*, for promulgation during the 2018 legislative session. Upon review of the statute and the Board’s legislative rule, staff determined that no changes need to be made to 11 CSR 10 at this time.

Mr. Spangler provided an update on Senate Bill 1014, relating generally to physician assistants. Mr. Wright reported that earlier today the Governor signed this bill.
The bill is effective 90 days from passage. Staff will provide an update with regard to Senate Bill 1014 at the July 2017 meeting.

Mr. Spangler reported that the West Virginia Board of Pharmacy submitted proposed amendments to 15 CSR 12, *Board of Pharmacy Rules Regarding Immunizations Administered by Pharmacists*, for consideration by the Board of Medicine and the Board of Osteopathic Medicine. In addition to expanding the vaccines permitted to be administered by pharmacists, the proposed rule seeks to place pharmacists on the Bureau for Medical Services Intellectual Development Disabilities Waiver program. The Board of Osteopathic Medicine submitted a comment indicating that they “do not believe that there is a shortage of basic life support courses that could meet the needs of pharmacists requiring a change in the West Virginia statute.” Following receipt of the comment submitted by the Board of Osteopathic Medicine, the Board of Pharmacy removed the language from the proposed rule which sought to place pharmacists on the Bureau for Medical Services Intellectual Development Disabilities Waiver program. Ms. Henderson moved that the Board of Medicine accept the proposed amendments to 15 CSR 12 as modified and submitted by the Board of Pharmacy. Dr. Rahim seconded, and the motion carried.

Ms. Alley excused herself from the meeting at this time, and was not present for the remainder of the meeting. Mr. Spangler also left the meeting at this time.

Discussion began on the matter of the licensure reactivation application of Joel David Shiffler, M.D. The hearing examiner issued a recommended decision in this matter on May 11, 2017. Ms. Campbell was present at the meeting to present the case and to advise the Board on this matter. Reverend Bowyer moved that the public session be recessed, and that the Board enter into executive session to receive legal advice on this matter. Ms. Henderson seconded, and the motion carried. Ms. Downey left the meeting room at this time.
The Board re-entered public session. Mr. Spangler and Ms. Downey returned to the meeting room. Reverend Bowyer moved:

a. That the Board adopt the Hearing Examiner’s Proposed Findings of Fact, Conclusions of Law, and Recommended Decision with one modification;

b. That the Board modify the Procedural History by striking the following sentence on page three, “[t]he following proposed Findings of Fact, Conclusions of Law, and Recommended Decision are provided by the Respondent for consideration by the Hearing Examiner in formulating his Recommended Decision to the West Virginia Board of Medicine.” and adopt the following language, “[i]n accordance with W. Va. Code R. § 11-3-14.1 and 14.3, the following Proposed Findings of Fact, Conclusions of Law, and Recommended Decision are based upon the testimony taken and documentary evidence presented before the undersigned Hearing Examiner.”; and

c. That the Board determine that Dr. Shiffler has failed to meet his burden of demonstrating how he is qualified to practice medicine and surgery in the state of West Virginia, and that the Board order that the application for reactivation of a license to practice medicine and surgery in the state of West Virginia of Joel David Shiffler, M.D. be denied.

Dr. Rahim seconded, and the motion carried by unanimous vote of a quorum of the Board.

With regard to the next agenda item, Consideration of Recommended Decision and Possible Board Action with regard to Omar Khalid Hasan, M.D., the following members declared a conflict and left the teleconference at this time:

Ahmed Faheem, M.D., President
Kishore Challa, M.D., F.A.C.C., Vice President
Cheryl Henderson, J.D.
Matthew Upton, M.D.

Dr. Faheem, Dr. Challa, Ms. Henderson and Dr. Upton were absent from the remainder of the meeting. In the absence of the Board President and Vice President, the remainder of the meeting was chaired by the Secretary of the Board, Rahul Gupta, M.D., M.P.H.

Roll call was taken by Ms. Frame. The following members remained in attendance:

Rahul Gupta, M.D., M.P.H., Acting Chair
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Harry Duncan, M.D.
Beth Hays, M.A.
David Mullins, M.D.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
Wes Steel, M.D.
Dean Wright, P.A.-C.

A quorum of the Board being present, discussion began in the matter of Omar Khalid Hasan, M.D., Complaint No. 14-89-S. The Hearing Examiner issued a recommended decision in this matter on June 13, 2017. Ms. Downey was present at the meeting to present the case and to advise the Board on this matter. Dr. Rahim moved that the Board enter into executive session to seek legal advice on this matter. Ms. Hays seconded the motion, and the motion carried. Ms. Campbell excused herself from the meeting at this time, and was not present for the remainder of the meeting. Mr. Spangler also left the meeting at this time.
The Board re-entered into public session. Upon re-entering public session, and prior to any action being taken, Dr. Rahim indicated that he had additional questions for legal counsel and respectfully moved that the Board re-enter executive session for the purpose of receiving legal advice. Reverend Bowyer seconded, and the motion carried.

The Board re-entered into public session. Having been in session continuously since 4:30 p.m., Reverend Bowyer moved that the meeting recess and reconvene at 10:00 p.m. Dr. Cain seconded, and the motion carried.

The meeting reconvened, and roll call was taken by Ms. Frame.

The following members were present for the remainder of the meeting via teleconference:

Rahul Gupta, M.D., M.P.H., Acting Chair
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Harry Duncan, M.D.
Beth Hays, M.A.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
Wes Steel, M.D.
Dean Wright, P.A.-C.

Due to a scheduling conflict, Dr. Mullins was not present for the remainder of the meeting.

Mr. Spangler and Ms. Downey were also present when the meeting reconvened. With a quorum present, the Board returned to its consideration of the matter of Omar Khalid Hasan, M.D., Complaint No. 14-89-S. Reverend Bowyer moved that the Board enter into executive session for the purpose of receiving legal advice. Dr. Steele
seconded, and the motion carried. Mr. Spangler left the meeting room at this time and did not return for the remainder of the meeting.

The Board re-entered public session. Reverend Bowyer moved that the Board issue a Final Order with regard to Complaint No. 14-89-S with the specific findings of fact, conclusions of law and disciplinary sanctions as outlined in these minutes at pages 8 through 67 and incorporated by reference herein.

Dr. Sheth seconded the motion. Dr. Gupta requested a roll call vote upon the motion. A vote was taken:

Rahul Gupta, M.D., M.P.H., Acting Chair - yes
Reverend O. Richard Bowyer - yes
Rusty Cain, D.P.M. - yes
Harry Duncan, M.D. - yes
Beth Hays, M.A. - yes
Mustafa Rahim, M.D. - yes
Ashish Sheth, M.D. - yes
Wes Steel, M.D. - yes
Dean Wright, P.A.-C. – yes

By unanimous vote of a quorum of the Board, the motion carried.

There being no further business to consider, Dr. Rahim moved that the meeting be adjourned. Dr. Sheth seconded, and the motion carried.

Ahmed Davaer Faheem, M.D.  
President

Rahul Gupta, M.D., M.P.H.  
Secretary
BEFORE THE WEST VIRGINIA BOARD OF MEDICINE

WEST VIRGINIA BOARD OF MEDICINE

Petitioner,

v.

OMAR KHALID HASAN, M.D.

Respondent

Complaint No. 14-89-S

FINAL ORDER

This proceeding arises pursuant to the West Virginia Medical Practice Act at W. Va. Code §30-1-1 et seq. It is a disciplinary proceeding involving the status of the license to practice psychiatry in the state of West Virginia of Omar Khalid Hasan, M.D. The West Virginia Board of Medicine (hereinafter “Board”) is the duly authorized state agency to oversee and conduct physician disciplinary hearings pursuant to the provision of W. Va. Code §30-4-14.

Pursuant to W. Va. Code §11-3-18.2, and upon review of the record in the above-styled matter, a quorum of the Board at its scheduled meeting on June 19, 2017, and upholds the Board’s Counts I, III, V, and VI:

Counts I and III concerning whether an inappropriate sexual relationship existed between Dr. Hasan and M.B. 

Count V concerning engaging in malpractice and/or failed to practice medicine with that level of care, skill and treatment which is recognized by a reasonable, prudent, physician by failing to consider the clinical significance of his outside office communications with M.B.

Count VI concerning the departure for and failed to conform to the standard of acceptable and prevailing medical practice and the ethics of the medical

1 The Complainant is referred to as M.B. to protect her confidentiality.
profession by failing to keep written records justifying the course of treatment for M.B.

The Board does not uphold Counts II and IV in the complaint.

Count II concerning whether Dr. Hasan violated or failed to conform to the standards of acceptable principles of medical ethics of the American Medical Association with regard to the termination of the physician-patient relationship.

Count IV concerning engaging in malpractice and/or failed to practice medicine with that level of care, skill and treatment which is recognized by a reasonable, prudent, physician by failing to appropriately respond to M.B.'s report of suicidal ideation.

PROCEDURAL BACKGROUND

The Board issued its original Complaint and Notice of Hearing in this matter on December 2, 2016, scheduling the hearing on February 1 and 2, 2017. On December 15, 2016, Respondent, Omar Khalid Hasan, M.D. ("Dr. Hasan"), filed his motion to continue the hearing in order to retain an expert witness to testify on the issue of documentation. Said motion was granted by the Hearing Examiner by Order dated January 18, 2017. In conjunction therewith, Dr. Hasan executed a waiver relinquishing his right to challenge the timeliness of the Board's final ruling on the grounds that the Board did not issue a Final Order in this matter within 126 days of November 28, 2016, as previously ordered by the West Virginia Supreme Court of Appeals in West Virginia Ex. Rel. O.H. M.D. v. West Virginia Board of Medicine, 792 S.E.2d 638 (W. Va. 2016). The Hearing Examiner's January 18, 2017 Order rescheduled the hearing for April 25-28, 2017, pursuant to the parties' agreement. The deadline for the Board to issue a Final Order was tolled during the length of the continuance.

By Motion dated January 4, 2017, Dr. Hasan filed a Motion to Dismiss or, in the Alternative, Motion for More Definite Statement. By Order entered February 27, 2017, the Hearing Examiner denied the Motion to Dismiss, but granted the Motion for a More
Definite Statement for the reasons set forth in his Order. The Board timely issued an Amended Complaint on March 12, 2017, in accordance with the Hearing Examiner’s order.

The hearing in this matter convened and proceeded before Hearing Examiner H. Hershel Rose III, on April 25, 26, 27 and 28, 2017, in the Hearing Room of the West Virginia Board of Medicine, 101 Dee Drive, Charleston, West Virginia. The case on behalf of the Board was presented by Greg S. Foster, Assistant Attorney General. The Board appeared through its Executive Director, Mark Spangler. Dr. Hasan appeared and was represented by counsel, Stuart McMillian and Josh Johnson of Bowles Rice LLP.

The Board called, and testimony was received from eight (8) witnesses: Art Hand; Investigator Michael Kidd; Complainant M.B.; Ahmed Faheem, M.D.; Robert Weinstein, M.D. (expert witness); Jeff Benfield; Kellie Aromin, PA; and Glenna Meadows.

Dr. Hasan called, and testimony was received from eleven (11) witnesses: John Ahearne (expert witness); Ben Levitan (expert witness); Michelle Pilkington; Respondent Dr. Hasan; Sarah Beth Janney; Thomas Guthiel, M.D. (expert witness); Surayia Hasan; Michael Johnson; Rabiya Hasan; Jennifer Johnson; and Irene Wasylyk.

At the hearing, the Board submitted twenty-three (23) exhibits that were admitted into evidence and made part of the record. Dr. Hasan submitted twenty-six (26) exhibits that were admitted into evidence and made part of the record.

The public hearing was transcribed, and the parties were given the opportunity to request a copy of the transcript. W. Va. Code R. §11-3-12.3 (2010). At the conclusion of the hearing, the Hearing Examiner ordered the parties to submit proposed findings of fact and conclusions of law on or before May 25, 2017. The Hearing Examiner was advised that the Board’s deadline to issue a Final Order is June 25, 2017. On May 25, 2017, the parties submitted their Proposed
Findings of Fact and Conclusions of Law. The hearing examiner signed his proposed order on June 13, 2017.

FINDINGS OF FACT

1. Dr. Hasan is a psychiatrist that practices at Raleigh Psychiatric Services in Beckley, West Virginia, since 2007. (Tr. Vol. III at 133.)

2. On or about September 11, 2014, the Board received a Complaint Questionnaire from M.B., a former patient of Dr. Hasan’s. In the Complaint Questionnaire, M.B. alleged she had a sexual relationship with Dr. Hasan while she was Dr. Hasan’s patient. (Bd. Ex. 9.)

3. M.B. was called as a witness to testify at the hearing. M.B. began seeing Dr. Hasan on November 29, 2011, Dr. Hasan was to monitor her medication plan and M.B. was referred to someone else for counseling and psychological testing. M.B. sought treatment due her issues with anxiety. (Tr. Vol. I at 218; Hasan’s Resp. to Compl.)

4. M.B. further testified regarding deeper issues that stemmed from events during her childhood. M.B. was abandoned by her mother at the age of 6. After her parents separated, M.B.’s mother dropped her off at her grandmother’s house and M.B. never saw her again. At the age of 15, M.B. was sexually abused by a step uncle. M.B. was also a victim of physical abuse by her father when she was 18 or 19 years old. (Tr. Vol. I at 218.)

5. M.B.’s professional relationship with Dr. Hasan began to change to a more personal relationship in or about January of 2013, when they began flirting during her office visits and then began communicating through text messages. (Tr. Vol. I at 218-220.)

6. M.B.’s phone number at that time was (304) 573-6918. (Tr. Vol. I at 221.)

7. M.B. testified that she gave Dr. Hasan her phone number in January of 2013. Shortly thereafter, Dr. Hasan sent M.B. a text message on the first day of her fourth semester of nursing school, wishing her good luck. (Tr. Vol. I at 219.)
8. M.B.’s testimony regarding the first text message is consistent with Dr. Hasan’s AT&T phone records, which show that the first text message between the two was sent by Dr. Hasan to M.B. on January 23, 2013. (Bd. Ex. 3 at p. 28, item 978.)

9. M.B. testified that their initial text messages were flirtatious. (Tr. Vol. I at 220.)

10. M.B. testified that shortly after they began text messaging, the relationship turned sexual. M.B. testified that she and Dr. Hasan first kissed during an office visit in January of 2013. (Tr. Vol. I at 220-221.)

11. In the month of January 2013, according to Dr. Hasan’s own AT&T records shows that he texted M.B. 60 times and M.B. texted Dr. Hasan 72 times. (Bd. Exhibit 3.)

12. Then, in late January or early February 2013, M.B. testified that she met Dr. Hasan at a house on Union Hall Road in Beckley. The house on Union Hall Road was vacant and owned by Dr. Hasan’s parents. (Tr. Vol. I at 221; Bd. Ex. 2.)

13. M.B. testified that she and Dr. Hasan had intercourse and oral sex the first time he brought her to the house on Union Hall Road. They met in the morning and were at the house for approximately forty-five (45) minutes. (Tr. Vol. I at 224-225.)

14. In the month of March, 2013, according to Dr. Hasan’s own AT&T records texted M.B. 287 times and M.B. texted Dr. Hasan 411 times. (Bd. Ex 3.)

15. In April 2013, Dr. Hasan downloaded two applications for secret messaging. (Bd. Ex. 21.)

16. In April 2013, Dr. Hasan initiated a phone call to M.B. that lasted 31 minutes and 30 seconds. (Bd. Ex. 5.)

17. In May 2013, Dr. Hasan initiated two phone calls to M.B. totaling 55 minutes and 45 seconds. (Bd. Ex. 5.)
18. In June 2013, Dr. Hasan initiated three phone calls to M.B. lasting a total of 49 minutes and 32 seconds. (Bd. Ex. 5.)

19. In August 2013, according to Dr. Hasan's own AT&T records he texted M.B. 622 times and M.B. texted Dr. Hasan 622 times. (Bd. Ex. 3.)

20. In August 2013, Dr. Hasan initiated seven phone calls to M.B. totaling almost six hours. (Bd. Ex. 5.)

21. In September 2013, according to Dr. Hasan's own AT&T records that he texted M.B. 167 times and M.B. texted Dr. Hasan 182 times. (Bd. Ex. 3.)

22. In October 2013, Dr. Hasan initiated a phone call to M.B. lasted 21 minutes and 52 seconds. (Bd. Ex. 5.)

23. M.B. testified that she and Dr. Hasan met a house on Union Hall Road on five (5) or six (6) occasions, the last time being in October or November of 2013. M.B. testified that every time they went to the Union Hall Road house they had intercourse and/or oral sex. (Tr. Vol. I at 225-226.)

24. M.B. testified that Dr. Hasan told her that the Union Hall Road house was owned by his father and that he had to get the keys to the house from his parents. (Tr. Vol. I at 225.)

25. This was confirmed by Surayia Hasan, Dr. Hasan's mother, who testified that the property is owned by her and Dr. Hasan's father, and that the keys to the property are kept at their home. (Tr. Vol. IV at 58-59.)

26. M.B. described the Union Hall Road property at the hearing. M.B.'s description of the property was mostly accurate and consistent with the description provided by the Board's investigator Michael Kidd and the photographs submitted as evidence during the hearing. M.B. correctly testified that the driveway to the house was
located at the end of Union Hall Road at a dead end. M.B. correctly testified that it has a private driveway and that the house is set back in the woods and cannot be seen from Union Hall Road. M.B. correctly testified that the driveway was paved and curved leading up to the house. M.B. correctly testified that upon arriving at the house, the house is on the left side of the driveway and tennis courts are in view. M.B. correctly testified that there was a garage door, and to the right of the garage door was a door that led into the garage. M.B. correctly testified that after entering the garage, one may enter into the house proper by turning right and walking up steps. M.B. correctly testified that upon first entering the house, there is some shelving, and then the first room entered is the kitchen. M.B. correctly testified that there is an island in the kitchen, and then past the kitchen is a living room with wood floors. From this room, M.B. correctly testified that there was a hallway that leads to a bedroom on the right.² (Tr. at Vol. I 221-226 (M.B.'s testimony); (Tr. Vol. I at 52-66 (Mr. Kidd's testimony; Bd. Ex. 2)). Furthermore, M.B. testified that it was cold in the house and it seemed that the utilities were not turned on. (Tr. at Vo. I p. 310.) Dr. Hasan acknowledged that the utilities were not turned on at the Union Hall road house. (Hasan's Resp. to Compl. p. 5). She knew the house had no furniture in it. (Ra. At Vol. II at 166). She knew that initially there was a chain gate to enter the property, but was replaced by a gate. GET CITE

27. In sum, M.B. demonstrated personal knowledge of the Union Hall Road premises that could only be obtained by being personally present in the interior of the house.

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² M.B. incorrectly recalled that there was fireplace in the home and did not remember a stone wall.
28. M.B. further testified that she and Dr. Hasan met at Lowe's parking lot in Beckley on various occasions. She would park her car and get into Dr. Hasan's Black Escalade. At these meetings they talked and kissed, but did not have sex. (Tr. Vol. 1 at 226-227.)

29. M.B. testified that she and Dr. Hasan met at Tamarack parking lot in October or November of 2013. They met early in the morning after M.B. had finished a night shift (7 p.m. to 7 a.m.) at nearby Heartland of Beckley, where she was working at the time. Dr. Hasan was leaving Raleigh General Hospital that morning. M.B. testified that they talked and kissed in Dr. Hasan's vehicle, but did not have sex. (Tr. Vol. 1 at 228.)

30. M.B. testified that she and Dr. Hasan met at the parking lot of the Raleigh County Convention Center. Dr. Hasan gave M.B. a necklace at this meeting. M.B. identified the necklace at the hearing, which was submitted into evidence as Bd. Ex. 6. Dr. Hasan denied giving M.B. the necklace and stated that M.B. must have stolen it from his office, but on the other hand he testified that it was a different color and had remained in his office since 2012. (Tr. Vol. 3 at 276; Hasan’s Resp. to Compl. p. 4.)

31. M.B. testified that she and Dr. Hasan kissed in his vehicle, but did not have sex. (Tr. Vol. 1 at 228-230.)

32. Dr. Hasan and M.B. met at the Sleep Clinic that was operated by Dr. Hasan. On April 25, 2017, after being pushed by Dr. Hasan’s counsel for dates of events that happened some three years earlier, M.B. suggested that the meeting at the Sleep Clinic happened in the early hours of August 3, 2013, but admitted it might not be the exact date. (Tr. Vol. 1 at 294.) It was her recollection after having been there over three years earlier. (Tr. Vol. at 230.)
33. M.B. testified that she and Dr. Hasan had stopped having a sexual relationship in May, June and July of 2013 because Dr. Hasan said he felt guilty and was afraid of losing his children. M.B. testified that their sexual relationship resumed at the Sleep Clinic. (Tr. Vol. I at 230-232.) Glenna Meadows, a friend of M.B.'s, testified that M.B. told her that she was meeting Dr. Hasan at the Sleep Clinic and called Ms. Meadows the next day saying that she had met Dr. Hasan at the clinic and had sex. (Tr. Vol. II at 184, 200.)

34. There were times when the Sleep Clinic was empty. (Tr. Vol. at 323.)

35. According to Stephanie Kennedy who was the quality manager at the clinic and performed sleep studies there was a patient at the clinic the night of August 2, 2014, into August 3, 2014. (Tr. Vol. III at 328.) When doing a sleep study there was always two techs at the clinic with Ms. Kennedy. (Vol III at 317, 324.) They came in around 7:00 pm and leave the next morning sometime between 6:00 am and 8:00 am. (Vol. III at 323.)

36. In spite of the fact that Ms. Kennedy testified that she was doing a sleep study at the clinic during the night and early morning in question, she testified that there were no techs present. (Tr. Vol. III at 328.)

37. At the Sleep Clinic, M.B. saw Dr. Hasan's tattoo on his right arm and asked him what it meant. Dr. Hasan explained to M.B. that it meant Pakistan for his mother, India for his father, and West Virginia for himself. M.B. accurately described the meaning of Dr. Hasan's tattoo, which he showed at the hearing. The tattoo depicts the Moon and Star from the Pakistani State Flag (for Dr. Hasan's mother), the Wheel of Progress from the Indian Flag (for Dr. Hasan's father), and Montani Semper Liberi ("Mountaineers are always free", for Dr. Hasan) (Tr. Vol. I at 232; Tr. Vol. III at 213-214.)
38. Glenna Meadows, a friend of M.B., testified that M.B. told her that she and Dr. Hasan met for sex at the Sleep Center. (Tr. Vol. II at 184.)

39. On November 26, 2013, Dr. Hasan initiated two phone calls to M.B. lasting a total of about 42 minutes. (Bd. Ex. 5.)

40. Pursuant to a review of Dr. Hasan’s own AT&T records, for just the last 5½ month period Dr. Hasan texted M.B. 2,222 times and M.B. texted Dr. Hasan 4,161 times. In just the last two weeks of December and the first week in January, 2014, Dr. Hasan texted M.B. 557 times and M.B. texted Dr. Hasan 595 times. (Bd. Ex. 3.)

41. Dr. Hasan represented that his relationship with M.B. began to change in December of 2013. Dr. Hasan had two office visits with M.B. in December 2013—on December 2 and December 26. There is no indication that there was any change in the relationship or any conflict. There is no mention of M.B.’s feelings or of M.B.’s alleged inappropriate conduct. There is no mention of any text message communications with M.B. Both records state that M.B. is not psychotic and does not warrant psychiatric admission, which contradicts Dr. Hasan’s assertions in his Response that M.B.’s perception of their relationship was not based upon fact, but upon a conjured sexual extra-marital affair. (Tr. at 110-115; Bd. Ex. 17, 18.)

42. On December 16, 2013, in a text from Dr. Hasan to M.B. he stated that he wanted M.B. in his life because she made him feel special, worthwhile, and important, but he was afraid of losing his children. He was sad when he was unable to kiss M.B. (Bd. Ex. 1.) According to Dr. Hasan’s own AT&T records he and M.B. exchanged 62 text messages on December 16, 2013 supporting M.B.'s text messages in Board Exhibit 1 that contained the contents of the text messages. (Bd. Ex 3.)
43. On December 17, 2013 he told M.B. that she was beautiful, but that he did not want to argue. He declared his love for her and she did likewise. He acknowledged that he had done the wrong thing and that he was sorry and felt like a bad person. (Bd. Ex 1.) According to Dr. Hasan’s own AT&T records he and M.B. exchanged over 100 text messages on December 17, 2013, supporting M.B.’s text messages in Board Exhibit 1 that contained the contents of the text messages. (Bd. Ex 3.)

44. On December 19, 2013, Dr. Hasan apologized to M.B. and M.B. begged him to block her number because she was not strong enough to do it herself. He said that he still loved M.B. and would always think about her wonderful qualities she had and miss her. (Bd. Ex 1.) According to Dr. Hasan’s own AT&T records he and M.B. exchanged text messages on December 19, 2013, supporting M.B.’s text messages in Board Exhibit 1 that contained the contents of the text messages. (Bd. Ex 3.)

45. On December 28, 2013, Dr. Hasan texted M.B. that he did not want to fight; that M.B. made him happy, but then things went to hell and he became petrified of losing his children. According to Dr. Hasan’s own AT&T records he and M.B. exchanged approximately 85 text messages on December 28, 2013, supporting M.B.’s text messages in Board Exhibit 1 that contained the contents of the text messages. (Bd. Ex 3.)

46. Although in January 2014 Dr. Hasan blocked text messages from M.B. they started to communicate through text applications. (Bd. Ex. 21.)

47. On January 6, 2014 M.B. texted Dr. Hasan stating that she was much worse off now than when she first saw him. Their relationship brought back many memories from which M.B. thought she had recovered. She texted to Dr. Hasan that all he wanted was sex and that she felt like a whore and wanted to be dead. (Bd. Ex 1.) According to Dr. Hasan’s
own AT&T records he and M.B. exchanged approximately 130 text messages on January 6, 2014, supporting M.B.'s text messages in Board Exhibit 1 that contained the contents of the text messages. (Bd. Ex 3.)

48. M.B. testified that their last meeting occurred at a Microtel Inn in Beckley on January 6 or 7, 2014, around 4:30 p.m. until approximately 8:00 p.m. At the Microtel Inn they discussed M.B.'s concerns with their relationship and her belief that Dr. Hasan did not care about her. M.B. testified that they did not have sex. (Tr. Vol. I at 232-33.)

49. M.B. testified that while at the Microtel Inn she looked at Dr. Hasan's phone and saw his wife's phone number and memorized it. Afterwards she called Dr. Hasan's wife, Irene Wasylyk. M.B. told Dr. Hasan's wife, "I don't know where your husband was telling you he was but he has been with me at the Microtel Inn for the last few hours." M.B. then hung up before Dr. Hasan's wife could respond. (Tr. Vol. I at 234-236.)

50. Dr. Hasan denied meeting M.B. at the Microtel Inn on January 7, 2014. A medical note was produced that indicated Dr. Hasan was at his office at Raleigh Psychiatric Services in Beckley W.Va. at approximately 5:00 p.m. on January 7, 2014, not Microtel Inn as M.B. testified. (Tr. Vol. III at 185-186; Resp. Ex. 21.) However, this directly contradicts Dr. Hasan's own statement in his Reply in Support of Respondent's Motion to Exclude Spreadsheet of Alleged Text Messages, filed on April 18, 2017, in which he asserted that he was at the New River Health Clinic from 3:00 p.m. to 7:00 p.m. (See Reply in Support of Respondent's Motion to Exclude Spreadsheet of Alleged Text Messages, at p. 3.) Furthermore, Mike Johnson, the office manager of Raleigh Psychiatric Services, testified that the billing records indicate that Dr. Hasan was at New River Clinic for four (4) hours on January 7, 2014. As Dr.
Hasan cannot be in two places at once, neither of these records are reliable to account for Dr. Hasan's whereabouts on January 7, 2014.

51. Dr. Hasan's last visit with M.B. was on January 31, 2014, at Beckley ARH after M.B. had admitted herself due to suicidal ideations. At this time M.B. requested a transfer of care to Dr. Faheem. Dr. Hasan's medical notes do not indicate any abnormal behavior by M.B. leading up to her admission. There is no indication of conflict with M.B. There is no mention of M.B.'s feelings or of inappropriate conduct. There is no mention of any text message communications with M.B. There is no explanation why M.B. requested a transfer to a new psychiatrist. There is no mention of delusion. (Tr. Vol. II at 117-118; Bd. Ex. 19.)

52. Moreover, Ms. Wasylyk testified that she was with Dr. Hasan on January 7, 2014, at 5:30 for dinner at the Cracker Barrel, to Krogers, and then home where she and Dr. Hasan stayed. (Vol. IV at 108.) She testified that she was still at home when she received the phone call from M.B. disclosing that she had just been with Dr. Hasan at the Microtel Inn. Id. Dr. Hasan cannot be in three places at one time.

53. Ms. Wasylyk and other members of Dr. Hasan’s family told Mr. Kidd, an investigator, that they spotted a vehicle that looked like M.B.'s and saw a female in the car, but were not 100% sure it was M.B. (Tr. Vol. I at 173-174.) In spite of this Ms. Wasylyk testified at the hearing that she saw a Black Jeep Cherokee with a red-haired driver over 20 times. (Tr. Vol. IV at 171.)

54. According to Dr. Hasan’s AT&T records he exchanged over 220 text messages on January 7, 2014 with M.B. (Bd. Ex. 3.)
55. M.B. and Dr. Hasan continued to exchange text messages subsequent to their last meeting at Microtel on or about January 7, 2014. However, because M.B. had called Dr. Hasan's wife after the Microtel meeting, M.B. testified they began communicating through various text messaging applications that disguised their true phone numbers. (Tr. Vol. I at 239-241; Bd. Ex. 1.) This is consistent with the fact that Dr. Hasan had purchased this type of application that allowed the hiding of true phone numbers. (Bd. Ex 21.)

56. In January 2014, Dr. Hasan stopped responding to M.B.'s texts and phone calls for a period of time. (Tr. Vol. I at 241; Board Ex. 3.)

57. Dr. Hasan admitted to engaging in extensive text messaging with M.B. He testified that the nature of the text messaging changed in December of 2013. Dr. Hasan testified that M.B. became upset, agitated and more hostile. Dr. Hasan failed to document these events in the medical record. (Tr. Vol. III at 149-150.)

58. Dr. Hasan testified that the volume of text messages he received from M.B. increased dramatically subsequent to their office visit on December 2, 2013. Her texts were irritable and angry. Dr. Hasan responded to the texts in an attempt to help her. Dr. Hasan failed to document these events in the medical record. (Tr. Vol. III at 150-152; Bd. Ex. 18.)

59. Dr. Hasan testified that he spoke with M.B. regarding the volume of texts at their office visit on December 26, 2013. Dr. Hasan testified that he felt she had been contacting him too much. Dr. Hasan failed to document these events in the medical record. (Tr. Vol. III at 151-152; Bd. Ex. 18.)

60. Dr. Hasan went out of the country from late December 2013 until early January 2014. When he returned he had a "large slew" of messages from M.B. On January
6 and January 7 of 2014, Dr. Hasan and M.B. exchanged hundreds of text messages. Dr. Hasan testified that M.B. was not doing well and wanted to meet with him. Dr. Hasan did not document any of these events in the medical record. (Tr. Vol. III at 154-155.)

61. Dr. Hasan denies receiving any text messages related to meeting M.B. at Microtel. (Tr. Vol. III at 155.)

62. After extensive text messaging on January 7, 2014, Dr. Hasan testified that he told M.B. that he could not continue to communicate with her in this fashion, that it was too intrusive, and that she needs to communicate with him through the office only. Dr. Hasan informed M.B. that he was going to block her number. Dr. Hasan did not document any of these events in the medical record. (Tr. Vol. III at 157; Bd. Ex. 19.)

63. On January 7, 2014, M.B. called Dr. Hasan's wife, Ms. Wasylyk, and indicated that she was having an affair with Dr. Hasan. Dr. Hasan did not document this event in the medical record. (Tr. Vol. III at 220.)

64. After January 7, 2014, Dr. Hasan testified that he began receiving a large number of text messages from M.B. from random phone numbers. M.B. was telling Dr. Hasan that she needs him to contact her and that she wanted to see him. Dr. Hasan did not document these events in the medical record. (Tr. Vol. III at 158-159.)

65. In January of 2014, Dr. Hasan testified that M.B. was exhibiting threatening and harassing behavior towards his family. He testified that M.B. was driving by his house on a regular basis, at least thirty (30) times, in a black jeep. Dr. Hasan testified that it was a very volatile situation. Dr. Hasan did not document any of these events in the medical record. (Tr. Vol. III at 170-171.)
66. On January 30, 2014, Dr. Hasan was contacted by the Beckley ARH Emergency Department and informed that M.B. was admitted to Beckley ARH. Dr. Hasan saw M.B. in the seclusion room at Beckley ARH the following morning on January 31, 2014. At this time M.B. requested to be transferred to Dr. Faheem. Dr. Hasan did not document any inappropriate or abnormal behavior by M.B. in December 2013/January 2014 in the medical record for this final meeting. (Tr. at Vol. III at 162-170; Bd. Ex. 19.)

67. Dr. Hasan's lack of documentation violates the standard of care on a severe level and could be indicative of intentional concealment. (Tr. Vol. II at 124-125.)

68. Dr. Hasan did not attempt to have any communication with Dr. Faheem regarding M.B. following the transfer of care. (Tr. Vol. III at 170.)

69. Dr. Hasan denies having had a sexual relationship with M.B. and denies ever meeting M.B. outside the office or hospital. This is not credible based upon the evidence and testimony produced at the hearing. (Tr. Vol. III at 174-175.)

70. Dr. Hasan denied meeting M.B. at the Microtel Inn on January 7, 2014. A medical note was produced that allegedly indicated Dr. Hasan was at his office at Raleigh Psychiatric Services at approximately 5:00 p.m. on January 7, 2014. (Tr. Vol. III at 185-186; Resp. Ex. 21.)

71. However, this directly contradicts Dr. Hasan's own assertion in his Reply in Support of Respondent's Motion to Exclude Spreadsheet of Alleged Text Messages, filed on April 18, 2017. Therein, Dr. Hasan asserted that he was at the New River Health Clinic ("New River") from 3:00 p.m. to 7:00 p.m. (See Reply in Support of Respondent's Motion to Exclude Spreadsheet of Alleged Text Messages, at p. 3.)
72. M.B. was married at the time she had a sexual relationship with Dr. Hasan. In January of 2014, after Dr. Hasan had stopped responding to M.B., M.B. disclosed to her husband that she had been having an affair with Dr. Hasan. (Tr. Vol. I at 246-247.)

73. M.B. began to have suicidal ideations after Dr. Hasan ceased communications with her. M.B. disclosed her suicidal thoughts to a friend, who convinced M.B. to go to the hospital. M.B. complied, and on January 30, 2014, M.B. checked herself into Beckley ARH Hospital. (Tr. Vol. I at 249-250; Bd. Ex. 10, 19.)

74. M.B. was still Dr. Hasan’s patient when she checked herself into Beckley ARH on January 30, 2014. Dr. Hasan saw M.B. at Beckley ARH on the morning of January 31, 2014. At that time, M.B. requested that she be transferred to the care of Dr. Ahmed Faheem. (Tr. Vol. I at 250-251; Bd. Ex. 10, 19.)

75. Upon requesting a change to Dr. Faheem, M.B. spoke to a counselor and disclosed that she had been having an affair with Dr. Hasan. (Tr. Vol. I at 251.)

76. Upon seeing Dr. Faheem later that day, M.B. disclosed her affair with Dr. Hasan to Dr. Faheem. (Tr. Vol. II at 13-14; Bd. Ex. 10.)

77. In February 2014, Dr. Hasan texted M.B. 287 times and M.B. texted Dr. Hasan 340 times. (Bd. Ex. I.)

78. On February 2, 2014, Dr. Hasan communicated with his legal counsel.

79. M.B. was discharged from Beckley ARH on February 3, 2014. (See Bd. Ex. 10.)

80. A couple of weeks later, on February 20, 2014, M.B. attempted to commit suicide by overdosing on prescription medications. M.B. testified that on the day of the overdose, she went to the house of her friend, Glenna Meadows, to give her a package.
containing gifts she received from Dr. Hasan. While at Ms. Meadows' house, M.B. attempted to call Dr. Hasan from Ms. Meadows' phone and left a voicemail requesting that Dr. Hasan call her back. Dr. Hasan did not return her call. That night, after M.B. had returned home, she sent a text to Dr. Hasan stating that she wanted him to be the last person she said goodbye to. Dr. Hasan did not respond to M.B.'s voicemail or text. M.B. then overdosed in an attempt to commit suicide. (Tr. Vol. I at 248-249, 253-254.)

81. M.B.'s husband found her lying unconscious in their bathroom and called an ambulance. M.B. was transported to Beckley ARH where she was placed on life support. M.B. survived. M.B. was transferred to Highland Hospital for her recovery. (Tr. Vol. I at 254; Tr. Vol. II at 38-40, 153; Bd. Ex. 12, 13.)

82. M.B. and her husband subsequently divorced due to her affair with Dr. Hasan. (Tr. Vol. I at 254.)

83. According Dr. Hassan's in March 2014 M.B. threatened to file suit him. (Hasan's Resp. to Compl.)

84. M.B. provided her cell phone to her attorney, who then provided M.B.'s phone to Second Creek Technologies ("Second Creek") to extract text messages from her phone. (Tr. Vol. I at 236.)

85. On March 16, 2014, the text messages on M.B.'s phone were extracted by Second Creek and placed into a Spreadsheet identified as Bd. Ex. 1. M.B. testified that she had changed her phone number in January of 2014 to the phone number listed on the cover sheet of Bd. Ex. 1 (304-228-7639). (Tr. Vol. I at 236-237; Bd. Ex. 1.)

86. M.B. testified that she reviewed the content of the text messages contained in Bd. Ex. 1 and they were accurate representations of text communications between her and Dr.
Hasan. M.B. denied that any of the text messages contained in Bd. Ex. 1 were manipulated. (Tr. Vol. I 236-237.)

87. Bd. Ex. 1 contains thousands of text messages that M.B. testified were exchanged between she and Dr. Hasan. The texts began on December 16, 2013, and the last text from Dr. Hasan to M.B. was on January 22, 2014. Dr. Hasan denies the authenticity of the text messages in Bd. Ex. 1 and asserts they were largely manipulated by M.B., even though Second Creek found no evidence of manipulation on her phone. (Bd. Ex. 1; Tr. Vol. I at 32; Vol. III at 242-289.)

88. The volume of text messages in Bd. Exs. 1 and 3 is staggering. The content of the texts in Bd. Ex. 1 depict the deterioration of an inappropriate sexual relationship between Dr. Hasan and M.B. As the relationship ended in January 2014, the texts follow the final stages of their relationship, including one final meeting at Microtel on January 7, 2014. (Bd. Ex. 1.)

89. A reading of the text messages in Bd. Ex. 1 gives credence to their authenticity. The general back and forth and dynamic of the relationship as depicted in the texts is very real. Dr. Hasan's texts generally attempt to avoid conflict and dissipate hostility and frustration coming from M.B. Dr. Hasan is often delicately tending to M.B.'s feelings, who needs constant reassurance that Dr. Hasan cares for her. Dr. Hasan attempts to communicate through reason, while M.B.'s communications are largely based on emotion. For example, Dr. Hasan states he is not a "lovey touchy guy."3 Dr. Hasan further expresses concern that M.B. is not suited to be around his children, and he states that they argue in an unhealthy manner.4 When considering the texts in their entirety, it is difficult to fathom how

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3 Bd. Ex. 1, p. 200, text no. 5267
4 Bd. Ex. 1, p. 199-200, text nos. 5247, 5259; p. 215, text no. 5663.
M.B. could manipulate texts to create a back and forth dialog with such diametrically opposed perspectives. (Bd. Ex. 1.)

90. The authenticity of the texts is reinforced because they often refer and correspond to specific events and dates, in addition to containing personal information about Dr. Hasan. There are texts about Dr. Hasan going to a birthday dinner for his father on December 16, his father’s actual birthday. There are texts about Dr. Hasan going to a Christmas event for his children and about Dr. Hasan reading to kids during bedtime. There are texts about Dr. Hasan going out of the country over the New Year, and Dr. Hasan confirmed that he went to Aruba. There are texts about Dr. Hasan’s grandfather passing before Dr. Hasan was born, which Dr. Hasan confirmed as true. There are texts about Dr. Hasan’s “hole-in-one” golf ball. There are texts about Dr. Hasan’s work schedule on given days, such as the number of ECTs performed and appointments at the New River Clinic, that were confirmed as accurate. To manipulate all or parts of thousands of text messages with such intimate detail, and to mesh “real” texts with allegedly “manipulated” texts to form a coherent and authentic dialog would be a massive undertaking on an extreme level, and is not plausible. (Bd. Ex. 1.)

91. M.B. testified that she continued to send Dr. Hasan text messages after she had attempted suicide and retained an attorney. However, M.B. denied that she sent a text to Dr. Hasan in May of 2014 stating that she promised to say she lied about the “sex stuff” if Dr. Hasan would talk to her. (Tr. Vol. 1 at 256; see Hasan Ex. 11.)

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5 Bd. Ex. 1, p. 192, text nos. 5063-5070.
6 Bd. Ex. 1, p. 192, text no. 5076; p. 198, text no. 5207-5222.
7 Bd. Ex. 1, p. 213, text no. 5617.
8 Tr. Vol. III at 244.
10 Bd. Ex. 1, p. 194, text no. 5106.
92. At this time Dr. Hasan had purchased different applications that could create false e-mails as if actually sent or received. On April 6, 2014, Dr. Hasan purchased FAKE SMS! Fake conversation - text messages. (Bd. Ex. 21.)

**ART HAND. SECOND CREEK TECHNOLOGIES**

93. The Board subpoenaed Art Hand of Second Creek Technologies to testify at the hearing. Second Creek provides technology and computer forensics related services, including the extraction of text messages from cell phones. (Tr. Vol. I at 20.)

94. To extract text messages from a cell phone, Second Creek employs a device called a Cellebrite Forensic UFED ("Cellebrite"), a device built specifically for extracting information from cell phones. Cellebrite is built to locate where text messages are stored on a device, read that information and extract it onto an external device, such as a thumb drive or computer. Cellebrite is capable of locating and extracting text messages that have been deleted but not yet overwritten by new messages. (Tr. Vol. I at 21-23.)

95. Mr. Hand testified that the text message spreadsheet identified as Bd. Ex. 1 was created by Second Creek upon the extraction of text messages from a Samsung Galaxy S3 cellphone. The cover page of the Spreadsheet contains the serial number of the Cellebrite device used for the extraction. Mr. Hand confirmed that the serial number on the Spreadsheet of Bd. Ex. 1 (5569465) matches the serial number for his Cellebrite device, which confirmed that Bd. Ex. 1 was created by Second Creek.\(^\text{12}\) (Tr. Vol. I at 25-26.)

\(^\text{12}\) The redactions in Bd. Ex. 1 were made by M.B.'s attorney, who then produced a redacted copy to the Board.
Mr. Hand testified that he obtained the cell phone from the paralegal of J.R. Carter, an attorney with Bucci, Bailey & Javins. (Tr. Vol. I at 27.)

The cover page of Bd. Ex. 1 shows that the phone number for the Samsung Galaxy S3 cell phone at the time of extraction was (304) 228-7639. This was M.B.'s new phone number at the time of the extraction. In January of 2014, M.B. had changed her number from (304) 573-6918 to (304) 228-7639, but kept her phone. (Bd. Ex. 1; Tr. Vol. I at 236-237.)

Mr. Hand testified that the text messages extracted were those that existed on the phone at the time of extraction, and not necessarily related only to the (304) 228-7639 number. Mr. Hand testified that if the cell phone previously had a different phone number, text messages sent to that previous phone number could be extracted if still stored on the phone. (Tr. Vol. I 28-29.)

Bd. Ex. 1 identifies the date and time of the text messages as "GMT -5", which means Greenwich Meridian Time minus five (5). Mr. Hand testified that GMT -5 equates to Eastern Standard Time ("EST"), as EST is five hours behind GMT. Mr. Hand further testified that GMT equates to UTC, i.e., Universal Time. (Tr. Vol. I at 30.)

Mr. Hand testified that there will be a slight variation of "slush time" in two cell phones' call detail records when comparing the specific time a text message is sent and received between the phones. This "slush time" may vary from milliseconds up to one minute. This is due to the amount of time it takes to send and receive a message, and also because there are multiple clocks running at the same time. Each cell tower has its own clock, each phone has

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13 J.R. Carter was M.B.'s attorney.
its own clock and the billing and authorization systems for the cell phones all have their own clocks. (Tr. Vol. I at 34-35, 38.)

101. Mr. Hand testified that there was no evidence or red flags indicating user manipulation during the extraction. (Tr. Vol. I at 39-43.)

MICHAEL KIDD, INVESTIGATOR

102. Michael Kidd is a private investigator that was contracted by the Board to investigate this matter and was called as a witness by the Board at the hearing.

103. Mr. Kidd confirmed through an investigatory search that the phone number (304) 573-6918 was registered to M.B. (Tr. Vol. I at 74-75; Bd. Ex. 4.)

104. The cell phone records for Dr. Hasan’s phone number at (304) 640-8688 were subpoenaed from AT&T. The AT&T records show Dr. Hasan’s text message communications and phone calls from January 1, 2013 through June 1, 2014. (Bd. Ex. 3, 5.)

105. The AT&T text message from Dr. Hasan records show the time and date of text messages sent and received from Dr. Hasan’s phone in UTC-time (five hours ahead of EST), but do not show the content of the text messages. (Bd. Ex. 3.)

106. The AT&T records from Dr. Hasan’s phone show that the first text message communication between Dr. Hasan and M.B.’s number at (304) 573-6918 was sent by Dr. Hasan to M.B. on January 23, 2013. (Bd. Ex. 3, item 978.)

107. Mr. Kidd reviewed a sampling of Dr. Hasan’s AT&T text message records from January 1, 2013 through January 7, 2014, and calculated the number of text messages between Dr. Hasan and M.B. In the sampling, Mr. Kidd reviewed Dr. Hasan’s text messages from January 23, 2013 through March 31, 2013; August 1, 2013 through September 30, 2013; and December 16, 2013 through January 7, 2014. Thus, over the course of approximately one year,
Mr. Kidd reviewed only about five and a half months (less than half) of text messages. (Tr. Vol. I at 88-95.)

108. In the approximate five and a half months of texts reviewed by Mr. Kidd of Dr. Hasan’s phone, there were a total of 4,161 of texts between Dr. Hasan and M.B. Specifically, Dr. Hasan sent 1,939 texts to M.B. and M.B. sent 2,222 texts to Dr. Hasan in just five and a half months. (Tr. Vol 1 at 95; Bd. Ex. 3.)

109. On many days Dr. Hasan and M.B. texted each other continuously throughout the entire day, amounting to hundreds of texts in a single day. (Tr. Vol. 1 at 96-101; Bd. Ex. 3.)

110. Mr. Kidd also conducted a review of Bd. Ex. 1, text messages on M.B.’s phone, to determine if the dates and times of the text messages between Dr. Hasan and Dr. Hasan’s AT&T Records. All texts he reviewed in Bd. Ex. 1 that are indicated as being sent to and from Dr. Hasan’s AT&T phone number (i.e., 304-610-8688) corresponded to texts between Dr. Hasan and M.B. in the AT&T records. (Tr. Vol. I at 101-108; Bd. Ex. 1, 3.)

111. In addition to text messaging, Dr. Hasan and M.B. also communicated by phone calls, though not at the same frequency. At least thirty-five (35) phone calls were originated by Dr. Hasan, and several phone calls originated by Dr. Hasan lasted over an hour in length. (Bd. Ex. 5.)

AHMED FAHEEM, M.D.

112. Ahmed Faheem, M.D., was called by the Board to testify at the hearing. Dr. Faheem is M.B.’s treating psychiatrist now. (Tr. Vol. II at 5-6.)

113. Dr. Faheem is also the President of the Board. (Tr. Vol. II at 5-6.)

114. As the President of the Board, Dr. Faheem was recused from this disciplinary matter from day one. On a few occasions, because Dr. Faheem is the Board President, he was
informed by the former executive director of the Board that he was required to sign subpoenas seeking documents related to this matter. Dr. Faheem did not obtain or see any documents received by the Board in response to said subpoenas. (Tr. Vol. II at 50-52.)

115. M.B. was transferred to the care of Dr. Faheem on or about January 31, 2014, after she checked herself into Beckley ARH for suicidal ideations and requested a transfer from Dr. Hasan. (Tr. Vol. II at 7-10.)

116. On January 31, 2014, Dr. Faheem was contacted by Beckley ARH administration and requested to take M.B. as a patient. Upon speaking with the counselors who had already spoken with M.B., Dr. Faheem was made aware of M.B.'s allegations against Dr. Hasan prior to seeing M.B. (Tr. Vol II at 8-10.)

117. Dr. Faheem first saw M.B. at Beckley ARH on February 1, 2014, along with his PA, Kellie Aromin. At this time M.B. disclosed to Dr. Faheem that she had been having a sexual relationship with Dr. Hasan. (Tr. Vol. II at 13-14.)

118. Dr. Faheem saw M.B. at his office for the first time on February 18, 2014. M.B. denied that she was having suicidal ideations. (Tr. Vol. II at 29-30; Bd. Ex. 11.)

119. M.B. attempted suicide by overdose on February 20, 2014. This took Dr. Faheem by surprise as M.B had not given him any impression of suicide risk at their office visit two days prior. (Tr. Vol. II at 31.)

120. Dr. Faheem ordered M.B. to be transferred from Beckley ARH to Highland Hospital for recovery. (Tr. Vol. II at 41-42.)

121. Dr. Faheem withheld Dr. Hasan's identity in his Beckley ARH medical charting of M.B.'s allegations. Dr. Faheem did this to protect Dr. Hasan, who was an active physician at Beckley ARH, due to the seriousness of the allegations and because nurses have access to the
charts. Nor did Dr. Faheem identify Dr. Hasan in his medical charting at Beckley ARH a few weeks later after M.B. was readmitted upon attempting suicide. Nor did Dr. Faheem identify Dr. Hasan when M.B. was transferred to Highland Hospital for recovery after her attempted suicide. (Tr. Vol. II at 17-19, 25, 34-36, 43-44; Bd. Ex. 10, 12, 13.)

122. Dr. Faheem continues to treat M.B. as a patient to this day. Dr. Faheem testified that M.B.'s allegations against Dr. Hasan have remained consistent throughout his treatment and that he does not find M.B. to be delusional. Dr. Faheem further testified that he has reviewed M.B.'s medical history and that at no time has M.B. ever been found to be delusional or psychotic. (Tr. Vol. II at 48-50, 94-95.)

ROBERT WETTSTEIN M.D.

123. The Board called Dr. Robert Wettstein, M.D. to testify at the hearing. Dr. Wettstein is a physician and psychiatrist that was retained by the Board to review documents concerning this matter and opine as to whether Dr. Hasan met the standard of psychiatric care in this treatment of M.B., and specifically with regard to documentation. (Tr. Vol. II at 97-98.)

124. Dr. Wettstein graduated from UCLA medical school in 1976. He completed five additional years of training in Chicago to be a psychiatrist, including a Forensic Psychiatry Fellowship. Dr. Wettstein completed his medical training in 1981 and specializes in Psychiatry and Forensic Psychiatry. Dr. Wettstein currently has a clinical appointment as a professor at the University of Pittsburgh, wherein he teaches Psychiatric residents and Forensic Psychiatric Fellows in law and ethics in Psychiatry. In particular, Dr. Wettstein's classes include course work regarding documentation and record-keeping in
Psychiatry. Dr. Wettstein also teaches classes in Medical Ethics and Psychiatric Ethics. (Tr. Vol. II at 98-99; Bd. Ex. 14.)

125. With no objection raised by Dr. Hasan, Dr. Wettstein was qualified as an expert witness in psychiatric documentation. Dr. Wettstein was properly qualified to provide expert testimony in this proceeding in the area of psychiatric documentation. (Tr. Vol. II at 97-100; Bd. Ex. 14.)

126. Dr. Wettstein's opinions are based on a reasonable degree of medical certainty. Dr. Wettstein's opinions were offered with knowledge that Dr. Hasan's treatment of M.B. was pharmacotherapy as opposed to psychotherapy. (Tr. Vol. II at 119-120, 122-123.)

127. Dr. Wettstein credibly testified that documentation is a central part of the practice of medicine in general, as well as in psychiatry. Documentation serves numerous purposes, including the documenting of the patient's condition and course of symptoms over time. It is important to document the intervention and treatment that occurs, and the patient's response to the treatment. (Tr. Vol. II at 102-104.)

128. Dr. Wettstein credibly testified that a psychiatrist is to document any significant contact with the patient, both inside and outside of the office. This includes telecommunications, such as text messages or phone calls, which may be significant to the patient's presentation or treatment. If there are substantive clinical issues with regard to the patient communicated through text messaging or phone calls, those should be documented. Any significant outside of the office electronic communication is an adjunct to ongoing treatment. Ultimately, the purpose of the documentation is to assist with the treatment. (Tr. Vol. II at 103-106.)
129. Dr. Wettstein credibly testified that the proper documentation of a text message is to print out a copy of the text message and add it to the formal record in hard copy. (Tr. Vol. II at 104-105.)

130. Dr. Wettstein credibly opined that a psychiatrist is to document any conflict that may arise with a patient. (Tr. Vol. II at 103.)

131. The factual background on which Dr. Wettstein based his opinion are, in part, those set forth by Dr. Hasan in his Response to M.B.'s complaint. In pertinent part, Dr. Hasan represented in his Response the following:

As treatment progressed into December 2013, Dr. Hasan realized that the patient-physician relationship changed and evolved into a more personal tone. Dr. Hasan recognized that the Complainant's view and expectations of him changed dramatically. Dr. Hasan realized this change through the incessant text messages. In fact, Dr. Hasan's office staff had warned him that the Complainant was developing an obsession with him.

Instead of ending the professional relationship at that point, as Dr. Hasan admits he should have, Dr. Hasan continued treating and communicating with the Complainant. Dr. Hasan frequently exchanged text messages. At some point, his texting served only as a means to placate her. This approach failed and only escalated the tension. Ultimately, the Complainant's perception of his interaction with her was not based upon fact, but upon a conjured sexual extra-marital affair. The Complainant's behavior had become extreme and obsessive. At that point, Dr. Hasan realized his professional services could not continue and planned to terminate the patient-physician relationship at the Complainant's next appointment. Dr. Hasan advised the Complainant to contact him through his office only. In early January 2014, he blocked text messages and phone calls from Complainant to his business cellular phone. The Complainant did not communicate with Dr. Hasan's office. In late January 2014, the Complainant presented to Beckley Appalachian Regional Hospital and requested another physician then. At this time, the patient-physician relationship was terminated.

(Tr. Vol. II at 107-115; Bd. Ex. 17.)
132. None of the above was documented by Dr. Hasan in the medical record. Dr. Wettstein credibly opined that all of the foregoing is significant and should have been documented in the medical record. (Tr. Vol. II at 107-115.)

133. Dr. Wettstein reviewed Dr. Hasan’s medical records with regard to M.B. and did not find any documentation of text messages or phone calls between Dr. Hasan and M.B. (Tr. Vol. II at 106.)

134. Dr. Wettstein credibly opined that if the relationship changed between Dr. Hasan and M.B., it is essential to document such in the medical record. If M.B.’s feelings about Dr. Hasan changed or became more personalized, it was essential to document that in the medical record. (Tr. Vol. II at 109-110.)

135. Dr. Wettstein credibly opined that if there were incessant text messages from M.B., such was essential to document in the medical record. If the office staff indicated that M.B. was becoming obsessed with Dr. Hasan, such was essential to document in the medical record. (Tr. Vol. II at 110.)

136. Dr. Wettstein credibly opined that if Dr. Hasan was considering ending the professional relationship due to abnormal patient conduct, such is highly significant and should be documented in the medical record. The fact that they continued to communicate via text message during this time, as well as the significance of such communications, should have been documented in the medical record. (Tr. Vol. II at 112-114.)

137. Dr. Wettstein credibly opined that if M.B. fantasized about an ongoing sexual affair and Dr. Hasan was aware of such, it should have been documented in the medical record. If M.B.’s behavior was extreme and obsessive, that should have been documented in the medical record. If Dr. Hasan planned to terminate the doctor/patient relationship, that
should have been documented in the medical record. If Dr. Hasan advised M.B. to contact him through the office only, that should have been documented in the medical record. If Dr. Hasan blocked her text messages and phone calls, that should have been documented in the medical record. (Tr. Vol. II at 114-115.)

138. Dr. Wettstein credibly testified that a patient's request to be transferred to another psychiatrist is a significant event that should be documented in detail in the medical record. Dr. Hasan's notes only state that M.B. "is requesting transfer to the services of Dr. Faheem and we will do so." Dr. Wettstein credibly opined that Dr. Hasan's documentation regarding the transfer is insufficient because Dr. Hasan does not explain the reasons for the transfer request or his approach to that request. (Tr. Vol. II at 119; Bd. Ex. 19.)

139. Dr. Wettstein credibly opined that these are not simple documentation mistakes. The scenario Dr. Hasan has represented is complex. Not only has Dr. Hasan failed to document M.B.'s conduct, but he has failed to document any treatment plan to address the issues with M.B. (Tr. Vol. II at 115-116.)

140. Dr. Wettstein credibly opined that over 4,000 text messages in a year is an exceptional amount of text communications between a doctor and patient. (Tr. Vol. II at 120.)

141. Dr. Wettstein credibly opined that the severity of Dr. Hasan's lack of documentation could be indicative of intentional concealment. (Tr. Vol. II at 124-125.)

142. Dr. Wettstein credibly opined Dr. Hasan's lack of documentation violates the standard of psychiatric care on a severe level. (Tr. Vol. II at 119-120.)

JEFFREY BENFIELD

143. Jeffrey Benfield ("Mr. Benfield") was called by the Board to testify at the hearing. Mr. Benfield is a registered nurse and was married to M.B. when she was seeking
treatment from Dr. Hasan, Mr. Benfield and M.B. divorced due to M.B.'s affair with Dr. Hasan. (Tr. Vol. II at 142-144.)

144. Mr. Benfield was suspicious that M.B. was having an affair with Dr. Hasan. M.B. referred to Dr. Hasan as "Omar" and texted with him regularly. (Tr. Vol. II at 145-147.)

145. In January of 2014, M.B. confessed to having an affair with Dr. Hasan after Mr. Benfield asked if she was cheating on him. (Tr. Vol. II at 147.)

146. Mr. Benfield testified that M.B. has never been delusional and is not a liar. (Tr. Vol. II at 148.)

KELLIE AROMIN, P.A.

147. Kellie Aromin ("Ms. Aromin") was called by the Board to testify at the hearing. Ms. Aromin was a nurse for ten (10) years and has been a physician's assistant in psychiatry for the past eleven (11) years. Ms. Aromin is employed by Dr. Faheem at Appalachian Psychiatric Services and also does rounds with Beckley ARH. (Tr. Vol. II at 167.)

148. On January 31, 2014, Ms. Aromin was doing rounds with Dr. Syed at Beckley ARH around 6:30 a.m. They were looking for a patient and was directed to go to the seclusion room. She and Dr. Syed went to the seclusion room and opened the door, at which time Ms. Aromin observed Dr. Hasan with a patient. They realized they had the wrong room and shut the door. (Tr. Vol. II at 168-169.)

149. Ms. Aromin later learned that the patient in the room with Dr. Hasan was M.B. Ms. Aromin recalled that M.B. was lying on the bed and Dr. Hasan was squatted down talking to M.B., with his face very close to M.B.’s head. (Tr. Vol. II at 169-170.)
150. The following day, Ms. Aromin went with Dr. Faheem to see M.B. M.B. was still in the seclusion room. M.B. disclosed to Ms. Aromin and Dr. Faheem that she had been having an affair with Dr. Hasan. (Tr. Vol. II at 173-174.)

151. Ms. Aromin testified that in her twenty-one (21) years of experience, she has never seen a doctor that close to a patient in the seclusion room. She found it odd and testified that it seemed different than a normal doctor/patient relationship. It appeared that Dr. Hasan may have been consoling her or "trying to put out some fires before they get out of hand." She also found it unusual for Dr. Hasan to be at the hospital so early. (Tr. Vol. II at 170-171, 174.)

GLENNA MEADOWS

152. Glenna Meadows was called by the Board to testify at the proceeding. Ms. Meadows has known M.B. since M.B. was eighteen years old. (Tr. Vol. II at 181-182.)

153. Ms. Meadows testified that M.B. told her about the affair with Dr. Hasan while it was ongoing. M.B. would talk to Ms. Meadows about meeting Dr. Hasan shortly after, and sometimes before, the meetings occurred. M.B. told Ms. Meadows about meeting Dr. Hasan at the house on Union Hall Road, the Sleep Clinic, Tamarack and Microtel. (Tr. Vol. II at 182185.)

154. Throughout, Ms. Meadows' testimony regarding the meetings was consistent with M.B.'s testimony.

155. Ms. Meadows also overhead M.B. talking on the phone at her house. M.B. would go into the bedroom but Ms. Meadows had thin walls and could overhear M.B. talking, though she could not hear the person on the other end. Ms. Meadows heard M.B.
upset and crying on the phone, begging the other person not to commit suicide. M.B. told Ms. Meadows she was talking to Dr. Hasan. (Tr. Vol. II at 187-188.)

136. At one point, M.B. gave Ms. Meadows an envelope that contained items Dr. Hasan had given M.B. The enveloped contained a T-Shirt and a necklace. M.B. gave the envelope to Ms. Meadows because she did not want her husband to find the items. Ms. Meadows stored the envelope in her gun cabinet until M.B. came by a month later to retrieve it. (Tr. Vol. II at 189-190.)

137. Ms. Meadows testified that she has never known M.B. to be delusional. (Tr. Vol. II at 190.)

JOHN AHEARNE

138. Dr. Hasan called John Ahearne ("Mr. Ahearne") to testify at the hearing. Mr. Ahearne analyzed Dr. Hasan's cell phone and extracted text messages from the phone. (Tr. Vol. III at 7-10.)

139. Mr. Ahearne was provided with Dr. Hasan's phone on May 1, 2014. Thus, Mr. Ahearne's opinion with regard to the authenticity of text messages extracted from Dr. Hasan's phone does not pertain to any text messages received by Dr. Hasan after May 1, 2014, including the alleged text message that M.B. promised to say she lied about the "sex stuff" if Dr. Hasan would talk to her. This message appeared on Dr. Hasan's phone after he purchased different applications that could create false e-mails as if actually sent or received. (Tr. Vol. I at 256; Hasan Ex. 11; Bd. Ex. 21; Tr. Vol. III at 26-27.) There is no evidence that M.B. purchased said applications and, if fact, Mr. Legg found no manipulation on her phone as previously cited.
140. The AT&T records reflected that Dr. Hasan sent and/or received over 40,000 text messages from January 1, 2013 through May 1, 2014, the latter being the date Dr. Hasan's phone was provided to Mr. Ahearne. (Bd. Ex. 3; Resp. Ex. 14.)

141. Yet, Mr. Ahearne was only able to recover ninety-six (96) text messages from Dr. Hasan's phone, twenty (20) of which were duplicates. (Tr. Vol. III at 32; Resp. Ex. 14.)

142. Mr. Ahearne testified that only 96 text messages were recovered because text messages had been erased due to a factory default reset performed on Dr. Hasan's phone on April 25, 2014, a mere week before the phone was provided to Mr. Ahearne. (Tr. Vol. III at 34-36; Resp. Ex. 14.)

143. A factory default reset erases everything on a cell phone, including all text messages, pictures and the web browsing history. (Tr. Vol. III at 35.)

144. Mr. Ahearne testified that a factory default reset can be performed intentionally by the user. Further, before a user performs a factory default reset, the phone specifically warns the user that proceeding with the reset will cause everything on the phone to be lost. (Tr. Vol. III at 35-36, 51.)

145. Mr. Ahearne could not positively testify that there was no user manipulation with regard to text messages he extracted from Dr. Hasan's phone. It is unclear how a nominal amount of text messages between Dr. Hasan and M.B., all of which pre-dated the factory default reset, were still on the phone. (Tr. Vol. III at 42-44.) Again, the review by Mr. Ahearne was done after Dr. Hasan installed applications on his phone that enabled the creation of false messages.

146. Although Mr. Ahearne believed that possible applications existed that could be downloaded on a Samsung Galaxy S3 to edit text messages, none were found on M.B.'s phone or was there any evidence of manipulation. (Tr. Vol. I at 32, 42.)
147. Although he testified that he knew of no similar applications for an iPhone they do exist.

**BEN LEVITAN**

148. Dr. Hasan called Ben Levitan ("Mr. Levitan") to testify as a witness. Mr. Levitan purported to testify that the text messages in Bd. Ex. 1 that included text messages from M.B.'s phone were manipulated due to inconsistent character counts.

149. Mr. Levitan's testimony and opinion is not credible or reliable. Mr. Levitan misrepresented himself as an engineer at the hearing, as he does not hold an engineering degree. Further, the demonstrative exhibit he provided at the hearing, and upon which he based his opinion, was established to be incorrect and unreliable. (Tr. Vol. III at 96-116; 121-122.)

150. Mr. Levitan was unable to point to any incoming text message from Dr. Hasan's (304)640-8688 number that had an inconsistent character count, as all incoming messages from this number that exceeded 151 characters truncated into a second message. The incoming messages did not exceed 151 characters until Dr. Hasan began communicating through text messaging applications. Mr. Levitan could not dispute the Board's contention that text message applications are not subject to the same character counts, if any, as normal text messages sent through a provider. (Tr. Vol. III at 96-116; Bd. Ex. 1.)

151. Further, Mr. Levitan acknowledged that he is not an expert in Cellebrite, and could not dispute the Board's contention that outgoing messages sent by M.B. would not be truncated (due to the amount of characters) when extracted from M.B.'s phone by a Cellebrite device. Moreover, Mr. Levitan's testimony that outgoing messages should be truncated was contrary to his own Affidavit dated March 3, 2015. (Tr. Vol. III at 96-116.)
152. For the foregoing reasons, this Board does not find Mr. Levitan’s opinion regarding the authenticity of the text messages in Bd. Ex. 1 to be credible or reliable.

153. Dr. Hasan denied giving M.B. a necklace. (Tr. Vol. III at 176-177.) M.B. identified the necklace at the hearing, which was submitted into evidence as Bd. Ex. 6. Dr. Hasan stated that M.B. must have stolen it from his office, but on the other hand he testified that it was a different color and had remained in his office since 2012. (Tr. Vol 3 at 276; Hasan’s Resp. to Compl. p. 4.) Again, his testimony is not credible.

154. Dr. Hasan did not deny that there were over 4,000 text messages between himself and M.B. (in only the five and a half months counted). (Tr. Vol. III at 215.)

155. A number of text messaging applications were downloaded to Dr. Hasan’s phone in 2013 and 2014. In the order they were downloaded, these include:

   a. "CoverMe Private Texting Messenger" (April 11, 2013)
   b. "Private Life Texting — Send secret SMS messages" (April 11, 2013)
   c. "Talkatone — Free SMS Text Messages, WiFi Texti..." (July 2, 2013)
   d. "TigerText Secure Messaging for Business" (August 24, 2013)
   g. "Text Free: Free Texting App and Free Calling App." (i.e., Pinger) (January 5, 2014)
   h. "textPlus Free Text + Calls: Free Texting + Free P..." (January 13, 2014);
   i. "WhatsApp Messenger" (January 13, 2014)
   j. "Blink! - Secret Messaging" (January 13, 2014)
   k. "my SMSfriend - the next generation SMS" (January 13, 2014)
I.  "Masked" (January 13, 2014)
m.  "Voxox - Call, Text, SMS, Fax Translate" (January 13, 2014)

n.  "Wifi Texting" ($0.99) (January 24, 2014)

o.  "TextMet Free Texting and Messaging + Free Ph..." (January 24, 2014)
p.  Fake SMS! (downloaded on April 6, 2014)

q.  Fake Conversation - Text Messages and Upgrade to Pro Version ($0.99) (both downloaded April 6, 2014)

(Bd. Ex. 21.)

156. Dr. Hasan testified that many of these text message applications can be used to
send text messages with an alternative phone number in order disguise one's true phone number.
(Tr. Vol. III at 230-231.)

157. Dr. Hasan's testimony regarding the downloading and use of the text
messaging applications is not credible. He testified that these applications were
downloaded by either himself or his wife in order to figure out how M.B. was sending him
text messages from random numbers. However, by his own testimony, he did not receive
random number text messages from M.B. until after January 7, 2014, after many of the
applications had already been downloaded to his phone. Also, his wife testified that she did
not download any text message applications until sometime after she received the phone

Again, Dr. Hasan's testimony is not credible.

THOMAS GUTHEIL, M.D.

158. Dr. Hasan called Dr. Thomas Gutheil. He was qualified as an expert witness in
the field of forensic psychiatry. (Tr. Vol. IV at 31.)
159. Dr. Gutheil testified that if a patient begins to have an emotional attachment to their psychiatrist and communicates the same to the psychiatrist, such should be documented. (Tr. Vol. IV at 36-37.)

160. Dr. Gutheil testified that if a patient is alleging that she is having an extra marital affair with the psychiatrist, and communicates the same to the psychiatrist, such should be documented. (Tr. Vol. IV at 37-38, 41-43.)

161. Dr. Gutheil testified that if the patient and psychiatrist exchanged over 4,000 text messages over the course of a year, such should be documented. (Tr. Vol. IV at 38-39.)

162. Dr. Gutheil testified that over 4,000 text messages between a patient and psychiatrist is excessive. (Tr. Vol. IV at 40.)

163. Dr. Gutheil testified that if a patient is stalking a psychiatrist, such should be documented. (Tr. Vol. IV at 47-48.)

164. Dr. Gutheil testified that if a patient and a psychiatrist have a sexual relationship, and the psychiatrist cuts off communication with the patient, you would expect the patient's attempts to communicate with the psychiatrist to increase. (Tr. Vol. IV at 48.)

165. Dr. Gutheil testified that in his experience of reviewing over 300 hundred cases of patients alleging inappropriate relationships with their psychiatrist, he has never seen false allegations on such an extravagant scale as the present case, based on the sheer volume of text messages. With respect to the volume of communications involved in this matter, Dr. Gutheil admitted that "this is a record." (Tr. Vol. IV at 50-52.)

MICHELLE PILKINGTON, P.A.

166. Michelle Pilkington is a physician assistant, but not a P.A. in Dr. Hasan's office, whose office was across the hall from Dr. Hasan. (Tr. Vol. III at 122, 124.)
167. She saw Dr. Hasan only on Wednesday mornings. (Tr. Vol. III at 124.)

168. She never saw unprofessional behavior from Dr. Hasan. (Tr. Vol. III at 126.)

**STEPHANIE KENNEDY**

169. Stephanie Kennedy is an employee of Dr. Hasan and works as the quality control manager at the Sleep Clinic.

170. After being asked repeatedly by Dr. Hasan's counsel for dates of events that happened some three years earlier, M.B. suggested that the meeting at the Sleep Clinic happened in the early hours of August 3, 2013, but admitted it might not be the exact date. (Tr. Vol. I at 294.) It was her recollection after having been there over three years earlier. (Tr. Vol. at 230.)

171. Ms. Kennedy testified that M.B. was not there on said date.

172. Glenna Meadows, a friend of M.B.'s, testified that M.B. told her that she was meeting Dr. Hasan at the Sleep Clinic and told Ms. Meadows the next day that they had met at the Sleep Clinic and had sex. (Tr. Vol. II at 184, 200.)

173. According to testimony there were times when the Sleep Clinic was empty. (Tr. Vol. at 323.)

174. Ms. Kennedy who performed sleep studies at the Clinic testified that there was a patient for a sleep study the night of August 2, 2014, into August 3, 2014. (Tr. Vol. III at 328.) She testified that a sleep study was done there was always two techs at the clinic with her. (Vol III at 317, 324.)

175. In spite of the fact that Ms. Kennedy testified that she was doing a sleep study at the clinic during the night and early morning in question requiring two techs to be
present, she testified that there were no techs on the evening of August 2, 2014, into the
morning hours of August 4, 2014. (Tr. Vol. III at 328.)

ALAN KENNEDY

176. Alan Kennedy was the Program Director for the West Virginia Sleep Center.
(Tr. Vol. III at 293.)

177. He alleged that he gave a tour of the facility to M.B. after Dr. Hasan hired an
attorney. (Tr. Vol III at 308:14-22).

178. By February 2, 2014, Dr. Hasan had hired an attorney, therefore, the tour
could not have taken place in 2013 as one of the years suggested by Mr. Kennedy. (Hasan’s
Response to Complaint.)

179. After the alleged tour Mr. Kennedy found on picture of M.B. on facebook.
(Tr. Vol. III at 302.)

180. Mr. Kennedy testified that each day up to four tours of the facility are given.
Between the time that Mr. Kennedy was hired at the Sleep Clinic in early 2013, and when he
recognized M.B.’s picture in 2014 there had been a possible 1,360 tours and yet he could
pick out M.B. as one out of the 1,360. According to Mr. Kennedy’s testimony the alleged
tour could have taken place even much later, thereby, making the odds of being able to
recognize M.B. even worse. (Tr. Vol. III at 293-294.)

181. No sign in sheet was provided at the hearing and no camera recordings were
provided even though there are functioning cameras running in the facility. (Tr. Vol. III at
297.)

CONCLUSIONS OF LAW
1. W. Va. Code § 30-3-14(i) gives the Board of Medicine authority to impose sanctions when a person is found "unqualified because of any of the grounds set forth in subsection (c) on this section. W. Va. Code § 30-3-14(c) allows the Board to determine a person to be unqualified for numerous reasons. Berlow, M.D. v. West Virginia Board of Medicine 193 W. Va. 666, 669, 458 S.E.2d 469, 472 (1995).

2. The function of a hearing officer is to preside at the hearing and to cause to be prepared a record of the hearing and shall prepare findings of fact and conclusions of law for submission to the Board. Id.

3. The Board may adopt, modify or reject such findings of fact and conclusions of law. Id.

4. The Board, not the hearing examiner, shall be a regulatory and disciplinary body for the practice of medicine. W. Va. Code § 30-3-5.

5. Although the Board is not required to accept the recommendations of a hearing examiner, it must present a reasonable articulate decision. Berlow at 473 citing Citizens Bank of Weirton v. Board of Banking, 160 W.Va. 220, 230, 233 S.E. 2d 719, 736 (1977).

6. Counts I and III are concerned with whether an inappropriate sexual relationship existed between Dr. Hasan and M.B that would violate the standards of acceptable principles of medical ethics. The Examiner failed to find that there was a sexual relationship between Dr. Hasan and M.B. primarily relying on the testimony of Dr. Hasan who he found to be credible. (Recommended Decision at 60.) The only finding made by the hearing Examiner in support of the finding of credibility was "even when certain responses were adverse to his interests, the [Dr. Hasan] responded candidly, emphatically, and without hesitation." Id. No examples in support of this one sentence were given. Dr. Hasan was not credible:
a. Dr. Hasan testified at the hearing that he deleted the messages from his iPhone before he knew of any possible action by the Board. This statement is contradicted by Dr. Hasan himself. He knew that a possible complaint was going to be filed against him in March 2014 when he hired a lawyer. (Tr. Vol. III pp. 199-200.) According to Dr. Hasan's own expert witness Dr. Hasan deleted messages on his iPhone on April 25, 2014. (Tr. Vol III, pp. 35, 38, 46, 200.) Respondent acknowledged that he deleted the messages. (Tr. Vol III, p. 200.) Therefore, he deleted critical evidence from his iPhone after he knew that M.B. threatened legal action.

b. The Board submitted a copy of the relevant text messages from M.B.'s phone. Many of the messages exchanged between Dr. Hasan and M.B. were sexually explicit supporting that there was a sexual relationship between Dr. Hasan and M.B. (Bd. Ex. 1). Had Dr. Hasan not deleted the text messages off his iPhone just days before it was examined they could have been reviewed to see if they were consistent with the text messages retrieved from M.B.'s phone. But, of course, the messages cannot be retrieved because Dr. Hasan deleted them just a few days after he learned that a complaint concerning his relationship with M.B. was likely forthcoming. In spite of the spoliation of critical evidence by Dr. Hasan, the Examiner found Respondent to be credible and truthful.

c. In early April 2014, only weeks after Dr. Hasan knew that M.B. was considering filing a complaint against him, Dr. Hasan purchased and downloaded on his iPhone applications including Fake Conversation Text Message, Fake SMS, and an application upgrading Fake Conversation Text Message. (Tr. Vol III pp. 199-200, 227-228). Additionally, he downloaded applications that erased messages without a trace. (Tr. Vol III p. 228). The Hearing Examiner did not refer to these applications purchased by Dr. Hasan much less that they were purchased.
before Dr. Hasan allegedly received a text message from M.B., "I promise to tell the truth I lied about the sex thing if you just talk to me" that she denied sending.

d. The reason that Dr. Hasan gave as to why he downloaded these applications was "[t]o figure out how text messages could be manipulated." (Tr. Vol III p. 199.) Dr. Hasan's testimony regarding the downloading and use of the text messaging applications was again not credible. By his own testimony, he did not receive random number text messages from M.B. until after January 7, 2014, after many of the applications had already been downloaded to his phone. Also, Ms. Wasylyk, his wife, testified that she did not download any text message applications until sometime after she received the phone call from M.B. on January 7, 2014. (Tr. Vol. III at 158-159; 225-231; Vol. IV at 125-126.)

e. One witness testified that the best way to determine if a text message downloaded from a phone was actually sent and/or received was to compare it to Dr. Hasan's iPhone. (Tr. Vol. I at 39, 41.) However, Dr. Hasan deleted his messages just days before his phone was going to be searched for text messages. This too was ignored by the Hearing Examiner in finding Dr. Hasan's testimony to be credible.

f. The AT&T record for Dr. Hasan's iPhone containing the date of all text messages received and sent by him was subpoenaed by the Board in July 2015. (Bd. Ex. 3.) It contained the phone numbers, dates and times, but not the contents. (Tr. Vol. I at 66.) It was expected that the dates and times would match. (Tr. Vol. I at 34.) Dr. Hasan's AT&T records matched up with the dates and times with M.B.'s text messages. (Vol. I at 108.) This too is not credible and ignored by the Hearing Examiner in making his conclusion and recommendations.
g. The dates and times on Dr. Hasan’s AT&T records matched with the sexually explicit text messages downloaded from M.B.’s phone, yet Dr. Hasan denied sending them and this fact was never mentioned by the Hearing Examiner.

h. Dr. Hasan denied meeting M.B. at Microtel Inn on January 7, 2014, at around 4:30 pm. for three or four hours. A medical note was produced that allegedly indicated Dr. Hasan was at his office at Raleigh Psychiatric Services at approximately 5:00 p.m. on January 7, 2014. (Tr. Vol. III at 185-186; Resp. Ex. 21). However, this directly contradicted Dr. Hasan’s own assertion in his Reply in Support of Respondent’s Motion to Exclude Spreadsheet of Alleged Text Messages, filed on April 18, 2017. Therein, Dr. Hasan asserted that he was at the New River Health Clinic ("New River") from 3:00 p.m. to 7:00 p.m. (See Reply in Support of Respondent’s Motion to Exclude Spreadsheet of Alleged Text Messages, at p. 3). Furthermore, Mike Johnson, the office manager of Raleigh Psychiatric Services, testified that the billing records indicate that Dr. Hasan was at New River for four (4) hours on January 7, 2014. The evidence and testimony establishes that Dr. Hasan could not have arrived at New River that day until approximately 3:00 p.m. (Tr. Vol. IV at 81-85; Tr. Vol. III at 182183; Resp. Ex. 18; Bd. Ex. 23.) Dr. Hasan cannot be in two places at once. To make Dr. Hasan’s testimony even more contrived his wife testified that he was with her during this time period. None of these records or testimony were reliable to account for Dr. Hasan’s whereabouts on January 7, 2014. In spite this, the Examiner found Respondent to be credible and truthful.

7. Moreover, the Hearing Examiner ignored critical evidence:

a. In April 2013, Dr. Hasan initiated a phone call to M.B. that lasted 31 minutes and 30 seconds. In May 2013, Dr. Hasan initiated two phone calls to M.B. totaling 55 minutes and 45 seconds. In June 2013, Dr. Hasan initiated three phone calls to M.B. lasting a total of 49 minutes
and 32 seconds. In August 2013, Dr. Hasan initiated seven phone calls to M.B. totaling almost six hours. In October 2013, Dr. Hasan initiated a phone call to M.B. lasted 21 minutes and 52 seconds. The Hearing Examiner did not find the phone calls initiated by Dr. Hasan, some lasting over an hour, worthy of mentioning in his conclusions and recommendations.

b. When reviewing Dr. Hasan’s AT&T records it was revealed that in five and a half months (which only accounted for one half the time that Dr. Hasan and M.B. texted) a total of 4,161 text messages were exchanged. (Tr. Vol. I at 95, Bd. Ex. 3.) Dr. Hasan sent 1,939 texts to M.B. and M.B. sent 2,222 texts to Dr. Hasan. On some days hundreds of texts were exchanged. (Tr. Vol. at 96-101; Bd. Ex. 3.)

c. Again, between January 1, 2013 and May 1, 2014, thousands of text messages were exchanged between Dr. Hasan and M.B. (Bd. Ex. 3). However, on May 1, 2014, after these applications enabling one to erase texts messages were installed, only 96 messages could be found on Respondent’s iPhone. No evidence was presented at the hearing that M.B. downloaded these applications or any other similar applications on her phone. In spite of spoliation of critical evidence by Respondent, the Examiner found Respondent to be credible and truthful.

d. The Examiner cited the testimony of Ben Levitan one of Respondent’s witnesses. Mr. Levitan was qualified as an expert in the field of wireless cellular communications. (Tr. Vol. III pp. 557). He reviewed the Board’s Exhibit 3 containing all of the AT&T text messages on M.B.’s phone from January 1, 2013 to June 2, 2014. He testified and the Hearing Examiner found that there was a limitation to the size of a message that could be sent or received of 150 characters and some exceeding 150 characters showing manipulation by M.B. (Tr. Vol. III at. 64, 67.) The Hearing Examiner omitted the rest of Mr. Levitan’s testimony that he was unable to
point to any incoming text messages from Dr. Hasan’s 304-640-8688 number that had an inconsistent character count, as all incoming messages from this number that exceeded 151 characters truncated into a second message. He agreed that the incoming messages from M.B. did not exceed 150 characters until Respondent began communication through text messaging applications. He did not dispute that text message applications are not subject to the same character count, if any, as normal text messages sent through a provider. A text messaging application was downloaded by Respondent. (Tr. Vol III pp. 199-200, 227-228). Yet, the Examiner omitted this testimony obtained in cross examination thereby suggesting that because there were text messages of more than 150 characters, they were manipulated by M.B.

c. The hearing examiner did not find it worthy enough to mention in his conclusions of law and recommendations that there was no manipulation of text messages found on M.B.’s phone. (Tr. Vol. I at 32, 42.)

d. The Hearing Examiner did not find the phone calls initiated by Dr. Hasan, some lasting over an hour, worthy of mentioning in his conclusions and recommendations.

8. The Hearing Examiner found M.B. to be credible except for her testimony about her rendezvous at the Sleep Center and the Microtel Inn.

9. M.B.’s testimony with regard to the Sleep Clinic is credible;

Stephanie Kennedy is an employee of Dr. Hasan and works as the quality control manager at the Sleep Clinic. After being asked repeatedly by Dr. Hasan’s counsel for dates of events that happened some three years earlier, M.B. suggested that the meeting at the Sleep Clinic happened in the early hours of August 3, 2013, but admitted it might not be the exact date. (Tr. Vol. I at 294.) It was her recollection after having been there over three years earlier. (Tr. Vol. at 230.) Ms. Kennedy testified that M.B. was not at the Sleep Clinic
on the late hours of August 3, 2013, into the early hours of August 4, 2013. On some nights no one is at the Sleep Clinic. (Tr. Vol. at 323.) Ms. Kennedy testified that there was a patient with her the night of August 2, 2014, into August 3, 2014, for a sleep study. (Tr. Vol. III at 328.) When doing a sleep study two techs are always present with her. (Vol III at 317, 324.) There were no techs at the Clinic on the evening of August 2, 2014, into the morning hours of August 4, 2014. (Tr. Vol. III at 328.) Therefore, a sleep study could not have taken place during this time because no techs were present. The Hearing Examiner ignored this important testimony from Ms. Kennedy.

M.B.'s testimony about being with Dr. Hasan being at the Microtel Inn is credible. Dr. Hasan denied meeting M.B. at Microtel on January 7, 2014 at around 4:30 pm. for three or four hours. A medical note was produced that allegedly indicated Dr. Hasan was at his office at Raleigh Psychiatric Services at approximately 5:00 p.m. on January 7, 2014. (Tr. Vol. III at 185-186; Resp. Ex. 21). However, this directly contradicts Dr. Hasan's own assertion in his Reply in Support of Respondent's Motion to Exclude Spreadsheet of Alleged Text Messages, filed on April 18, 2017. Therein, Dr. Hasan asserted that he was at the New River Health Clinic ("New River") from 3:00 p.m. to 7:00 p.m. (See Reply in Support of Respondent's Motion to Exclude Spreadsheet of Alleged Text Messages, at p. 3). Furthermore, Mike Johnson, the office manager of Raleigh Psychiatric Services, testified that the billing records indicate that Dr. Hasan was at New River for four (4) hours on January 7, 2014. The evidence and testimony establishes that Dr. Hasan could not have arrived at New River that day until approximately 3:00 p.m. (Tr. Vol. IV at 81-85; Tr. Vol. III at 182183; Resp. Ex. 18; Bd. Ex. 23.) Dr. Hasan cannot be in two places at once. To make Dr. Hasan's testimony even more contrived his wife testified that he was with her during this time period. (Tr. Vol. IV at 106-110.)
The Hearing Examiner found that while the contents of M.B.'s "dump file" in Board's Exhibit 1 is plausible, he could not say with a firm belief that it was not compromised. In support the Hearing Examiner stated that the AT&T records confirm that M.B. did not send a text message to 304-228-7639 which is the number associated with M.B.'s dump file. M.B. testified that she changed her phone number in January of 2014 to the phone number listed on the cover sheet of Bd. Ex. I (304-228-7639), thereby explaining the difference. (Tr. Vol. I at 236-237; Bd. Ex. 1.)

The Hearing Examiner was critical of the dump file because the better way to verify the content of the text messages is to have both devices on both ends of the conversation compared and Mr. Kidd failed to do this. Dr. Hasan knew that a possible complaint was going to be filed against him in March 2014 when he hired a lawyer. (Tr. Vol. III pp. 199-200.) According to Dr. Hasan's own expert witness he deleted messages on his iPhone on April 25, 2014. (Tr. Vol III, pp. 35, 38, 46, 200.) Respondent acknowledged that he deleted the messages. (Tr. Vol III, p. 200.) As a result, Dr. Hasan engaged in the spoliation of evidence by deleting critical evidence from his iPhone after he knew that M.B. threatened legal action.

The Hearing Examiner was critical of the dump file because Mr. Ahearne, M.B.'s expert, stated that there was no manipulation on Dr. Hasan's phone. Mr. Ahearne was provided with Dr. Hasan's phone on May 1, 2014. Thus, Mr. Ahearne's opinion with regard to the authenticity of text messages extracted from Dr. Hasan's phone does not pertain to any text messages after May 1, 2014, including the alleged text message that M.B. promised to say she lied about the "sex stuff." This message appeared on Dr. Hasan's phone after he purchased different applications that could create false e-mails as if actually sent or received. (Tr. Vol. I at 256; Hasan Ex. 11; Bd. Ex. 21; Tr. Vol. III at 26-27.) There is no evidence that M.B. 

48

616
purchased any similar applications and, if fact, Mr. Legg found no manipulation on her phone. The AT&T records reflected that Dr. Hasan sent and/or received over 4,000 text messages from January 1, 2013 through May 1, 2014 when Mr. Ahearn received Dr. Hasan's phone. (Bd. Ex. 3; Resp. Ex. 14.) Yet, Mr. Ahearn was only able to recover ninety-six (96) text messages from Dr. Hasan's phone, twenty (20) of which were duplicates. (Tr. Vol. III at 32; Resp. Ex. 14.) Mr. Ahearn testified that only 96 text messages were recovered because text messages had been erased due to a factory default reset performed on Dr. Hasan's phone on April 25, 2014, a mere week before the phone was provided to Mr. Ahearn. (Tr. Vol. III at 34-36; Resp. Ex. 14.) Mr. Ahearn could not positively testify that there was no user manipulation with regard to text messages by Dr. Hasan. It is unclear how a nominal amount of text messages between Dr. Hasan and M.B., all of which pre-dated deletion of all messages were still on the phone. (Tr. Vol. III at 42-44.) Again, the review by Mr. Ahearn was done after Dr. Hasan installed applications on his phone that enabled the creation of false messages. Although Mr. Ahearn believed that possible applications existed that could be downloaded on a Samsung Galaxy S3 to edit text messages, none were found on M.B.'s phone nor was there any evidence of manipulation. (Tr. Vol. I at 32, 42.)

The Hearing Examiner was critical of the dump file in ¶ 23, p. 62 of his Recommended Decision because Mr. Levitan, an expert witness of Dr. Hasan, testified that he expected to see 304-373-6918 in the dump file. M.B. testified that she changed her phone number in January of 2014 to the phone number listed on the dump file (304-228-7639). She kept the same phone and when the text messages were downloaded her number was 304-228-7639. (Tr. Vol. I at 236-237; Bd. Ex. 1.) The hearing Examiner in ¶ 4 p. 62 also criticized the dump file because Mr. Levitan testified that there is a limitation on the size of a message that can be sent or received
(150 characters) and observed that the messages on M.B.'s dump file exceeded the character count thereby concluding manipulation by M.B. (Tr. Vol. III at 64, 67.) However, the Hearing Examiner omitted Mr. Levitan's testimony that he was unable to point to any incoming text messages from Dr. Hasan's 304-640-8688 number that had an inconsistent character count, as all incoming messages from this number that exceeded 151 characters truncated into a second message. He agreed that the incoming messages from M.B. did not exceed 150 characters until Respondent began communication through text messaging applications. He did not dispute that text message applications are not subject to the same character count, if any, as normal text messages sent through a provider. A text messaging application was downloaded by Respondent. (Tr. Vol III pp. 199-200, 227-228.)

The Hearing Examiner was critical of the dump file in his Decision ¶ 24, p. 62 because M.B.'s dump file only lists 304-228-7639, not 304-573-6816 even though that was her number for a period of time. Again, M.B. testified that she changed her phone number in January of 2014 to the phone number listed on the dump file (304-228-7639). She kept the same phone and when the text messages were downloaded her number was 304-228-7639. (Tr. Vol. I at 236-237; Bd. Ex. 1.) The Hearing Examiner was critical of the file dump because it began on December 16, 2013, and text messages had been exchanged before that. Old messages are automatically deleted to make room for new text messages. (Tr. Vol. I at 23-24.)

In his Decision ¶ 26, p. 63 the Hearing Examiner was again critical of the file dump because the content of M.B.'s dump file with regard to the Microtel Inn meeting conflicted with evidence present by M.B., medical records signed by Dr. Hasan, and his wife's testimony. See ¶ 10 above. Dr. Hasan denied meeting M.B. at Microtel Inn on January 7, 2014 at around 4:30 pm. for three or four hours. A medical note was produced that allegedly indicated Dr. Hasan was at
his office at Raleigh Psychiatric Services at approximately 5:00 p.m. on January 7, 2014. (Tr. Vol. III at 185-186; Resp. Ex. 21). However, this directly contradicts Dr. Hasan's own assertion in his Reply in Support of Respondent's Motion to Exclude Spreadsheet of Alleged Text Messages, filed on April 18, 2017. Therein, Dr. Hasan asserted that he was at the New River Health Clinic ("New River") from 3:00 p.m. to 7:00 p.m. (See Reply in Support of Respondent's Motion to Exclude Spreadsheet of Alleged Text Messages, at p. 5). Furthermore, Mike Johnson, the office manager of Raleigh Psychiatric Services, testified that the billing records indicate that Dr. Hasan was at New River for four (4) hours on January 7, 2014. The evidence and testimony establishes that Dr. Hasan could not have arrived at New River that day until approximately 3:00 p.m. (Tr. Vol. IV at 81-85; Tr. Vol. III at 182183; Resp. Ex. 18; Bd. Ex. 23.) Dr. Hasan cannot be in two places at once. To make Dr. Hasan’s testimony even more contrived his wife testified that he was with her during this time period. (Tr. Vo. IV at 106-110.)

Specific Dates Provided By M.B.

10. The Hearing Examiner disputes the specific dates given by M.B.

In his Decision Paragraphs Nos. 31-32, p. 64 he found that M.B. could not have been at the Sleep Clinic on the evening hours of August 2, 2013 into the morning hours of August 3, 2014. Stephanie Kennedy was an employee of Dr. Hasan and worked as the quality control manager at the Sleep Clinic. Ms. Kennedy testified that when sleep studies were conducted there was always two techs at the clinic with her. (Vol III at 317, 324.) On the night in question she testified that there were no techs at the Clinic. She acknowledged that sometimes no one is at the Center. (Tr. Vol. III at 317, 323-324, 328.) This is consistent with M.B.’s testimony that when she and Dr. Hasan met at the Sleep Center they were alone.
and no techs were present. (Vol III at 317, 324, 328.) The Hearing Examiner ignored this
important testimony from Ms. Kennedy. That being the case, M.B.’s testimony that she and
Dr. Hasan were at the Sleep Clinic alone on August 2, 2013 into the morning hours of
August 3, 2014 is credible.

In his Decision in Paragraphs Nos. 33-37 at 64-64 The Hearing Examiner argues that
there was substantial evidence that M.B did not meet Dr. Hasan at the Microtel Inn. The
Examiner cited a medical note that allegedly indicated Dr. Hasan was at his office at Raleigh
Psychiatric Services at approximately 5:00 p.m. on January 7, 2014, and therefore could not
have been at the Microtel Inn at 4:30 for several hours. (Tr. Vol. III at 185-186; Resp. Ex. 21).
However, this directly contradicted Dr. Hasan’s own assertion in his Reply in Support of
Respondent’s Motion to Exclude Spreadsheet of Alleged Text Messages, filed on April 18, 2017.
Therein, Dr. Hasan asserted that he was at the New River Health Clinic (“New River”) from
3:00 p.m. to 7:00 p.m. (See Reply in Support of Respondent’s Motion to Exclude Spreadsheet of
Alleged Text Messages, at p. 3). Since he cannot be two places at once, his testimony on this
issue is not credible. Furthermore, Mike Johnson, the office manager of Raleigh Psychiatric
Services, testified that the billing records indicated that Dr. Hasan was at New River for
four (4) hours on January 7, 2014. Again, Dr. Hasan cannot be in two places at once. To
make Dr. Hasan’s testimony even more contrived his wife testified that he was with her during
this time period. (Tr. Vo. IV at 106-110.) M.B. testified that he was with her at the Microtel
Inn.

M.B.’S Communications with the Dr. Hasan After 1/7/14

11. The Hearing Examiner alleged in Paragraph No. 38-40 at p. 66 that M.B.
recanted her allegations when she sent a text message to Dr. Hasan which allegedly read: “I
promise to tell the truth I lied about the sex thing if you just talk to me.” M.B. denies sending this text. Mr. Ahearne was provided with Dr. Hasan’s phone on May 1, 2014. Thus, Mr. Ahearne’s opinion with regard to the authenticity of text messages extracted from Dr. Hasan’s phone does not pertain to any text messages received by Dr. Hasan after May 1, 2014. The May 1, 2014, message appeared on Dr. Hasan’s phone after he purchased different applications that could create false e-mails as if actually sent or received. (Tr. Vol. I at 256; Hasan Ex. 11; Bd. Ex. 21; Tr. Vol. III at 26-27.) The applications purchased before May 1, 2014 the date of the alleged recantation were:

- Talkatone — Free SMS Text Messages, WiFi Texti purchased on July 2, 2013;
- TigerText Secure Messaging for Business purc purchased on August 24, 2013;
- TigerTextPRO — HIPAA Text for Healthcare purchased on August 24, 2013;
- Burner — Free U.S. Number for text messages purchased on January 5, 2014;
- Text Free: Free Texting App and Free Calling App. purchased on January 5, 2014;
- textPlus Free Text + Calls: Free Texting purchased on January 13, 2014;
- WhatsApp Messenger purchased on January 13, 2014;
- Blink! - Secret Messaging purchased on January 13, 2014;
- my SMSfriend - the next generation SMS purchased on January 13, 2014;
- Masked purchased on January 13, 2014;
- Voxox - Call, Text, SMS, Fax Translate purchased on January 13, 2014;
- Wifi Texting purchased on January 24, 2014;
- TextMet Free Texting and Messaging + Free Ph purchased on January 24, 2014;
Fake SMS! Purchased on April 6, 2014;
Fake Conversation - Text Messages and Upgrade to Pro Version both purchased on April 6, 2014.

(Bd. Ex. 21.)

There is no evidence that M.B. purchased said applications and in fact none were found. Mr. Legg found no evidence of manipulation on her phone.

Union House

12. The Hearing Examiner in Paragraphs 41-44 at pp. 66-68 disputed that M.B. was in the Union House with Dr. Hasan because she failed to describe the house correctly. He found a discrepancy in her testimony about whether the utilities were on in the house. Dr. Hasan stated in his response to the complaint that there were no utilities on in the house and M.B. testified likewise. M.B. testified that during her first visit to the Union house there was no gate into the property but later there was. No one disagreed. There was only speculation that M.B. knew the location of the house other than being there with Dr. Hasan. M.B. correctly testified that the driveway to the house was located at the end of Union Hall Road at a dead end. M.B. correctly testified that it has a private driveway and that the house is set back in the woods and cannot be seen from Union Hall Road. M.B. correctly testified that the driveway was paved and curved leading up to the house. M.B. correctly testified that upon arriving at the house, the house is on the left side of the driveway and tennis courts are in view. M.B. correctly testified that there was a garage door, and to the right of the garage door was a door that led into the garage. M.B. correctly testified that after entering the garage, one may enter into the house proper by turning right and walking up steps. M.B. correctly testified that upon first entering the house, there is some shelving,
and then the first room entered is the kitchen. M.B. correctly testified that there is an island in the kitchen, and then past the kitchen is a living room with wood floors. From this room, M.B. correctly testified that there was a hallway that leads to a bedroom on the right. (Tr. at Vol. I 221-226 (M.B.’s testimony; Tr. Vol. I at 52-66; Bd. Ex. 2). Furthermore, M.B. testified that it was cold in the house and it seemed that the utilities were not turned on. (Tr. at Vol. I p. 310.) Dr. Hasan acknowledged that the utilities were not turned on at the Union Hall road house. (Hasan’s Resp. to Compl. p. 5). She knew the house had no furniture in it. (Tr Vol. II at 166). She knew that there was a chain gate to enter the property that was later replaced by a gate. In sum, M.B. demonstrated personal knowledge of the Union Hall Road premises that could only be obtained by being personally present in the interior of the house.

**Gifts**

13. The Hearing Examiner disputed that Dr. Hasan gave M.B. a necklace. M.B. testified that Dr. Hasan gave her a necklace and M.B. identified the necklace at the hearing. (Bd Ex. 6.) Dr. Hasan denied giving M.B. the necklace and stated that M.B. had stolen it from his office, but then testified that it was different color and it had remained in his office since 2012. (Tr. Vol. III at 276; Dr. Hasan’s Resp. to Compl. at 4.) His testimony about the necklace is not credible.

14. The Board concludes that it has proven by clear and convincing evidence that Dr. Hasan exercised influence within the patient-physician relationship for the purpose of engaging M.B. in sexual activity as alleged in Count I of the Board’s Amended Complaint.

15. The Board further finds that it has established by clear and convincing evidence that Dr. Hasan entered into a sexual relationship with M.B. as alleged in Count III of the Board’s Amended Complaint.
16. The Board finds that it proved by clear and convincing evidence that Dr. Hasan departed from or failed to conform to the standards of acceptable medical practice with regard to his outside the office communications with M.B. as alleged in Count V of the Board’s Amended Complaint.

17. The Board finds that it proved by clear and convincing evidence that Dr. Hasan departed from the standard of acceptable and prevailing medical practice and the ethics of the medical by failing to document most of his interactions with M.B. Dr. Hasan departed from and failed to conform to the standards of the prevailing medical practice of the medical profession as alleged in Count VI.

18. Pursuant to W. Va. Code §30-4-14(j) the Board is authorized to impose one or more of the following disciplinary measures as appropriate to the particular circumstances of a case:

1) Deny his or her application for a license or other authorization to practice medicine and surgery or podiatry;

2) Administer a public reprimand;

3) Suspend, limit or restrict his or her license or other authorization to practice medicine and surgery or podiatry for not more than five years including limiting the practice of that person to, or by the exclusion of. One or more areas of practice, including limitations on practice privileges;

4) Revoke his or her license or other authorization to practice medicine and surgery or podiatry or to prescribe or dispense controlled substances for a period not to exceed the years;
5) Require him or her to submit to care, counseling or treatment designated by the board as a condition for initial or continued licensure or renewal of licensure or other authorization to practice medicine and surgery or podiatry;

6) Require him or her to participate in a program of education prescribed by the board;

7) Require him or her to practice under the directions of a physician or podiatrist designated by the board for a specified period of time; and

8) Assess a civil fine of not less than $1,000 nor more than $10,000.

As such the Respondent, Omar Hasan, M.D., violated the Board’s statutes and rules as shown above, and the Board hereby ORDERS the following:

a. That Dr. Hasan's West Virginia Medical license be SUSPENDED for a period of ONE (1) YEAR. The suspension imposed shall remain in effect until it is lifted or otherwise modified pursuant to a subsequent Order issued by the Board;

b. That Dr. Hasan is PUBLICLY REPRIMANDED for his dishonorable, unprofessional and unethical conduct regarding M.B.

c. That Dr. Hasan shall complete, at his own expense, the Multidisciplinary Assessment & Evaluation of Professionals program at the Professional Renewal Center in Lawrence, Kansas. Dr. Hasan shall cause the Professional Renewal center to notify the Board ahead of time of his assessment date(s), and provide proof directly to the Board of Dr. Hasan's participation in the initial assessment process within ten days of completion of the process.
d. Prior to evaluation by the Professional Renewal Center, Dr. Hasan shall execute all necessary authorizations, releases and written consent forms necessary to permit the open communication and sharing of information between the Board and the Professional Renewal Center regarding: (1) the facts and circumstances which form the basis of Complaint No. 14-89-S including all related documentation; (2) the Professional Renewal Center's assessment and evaluation of Dr. Hasan; (3) all reports, treatment, and aftercare recommendations of the Professional Renewal Center; and (4) all documents and information obtained by the Professional Renewal Center in association with its assessment and evaluation of Dr. Hasan. Failure to provide such consent sufficiently in advance of evaluation as to permit meaningful communication between the Board and the Professional Renewal Center, or the subsequent revocation of such consent, shall constitute a material violation of the Board's Final Order.

e. That the Board shall not consider lifting or otherwise modifying the suspension of Dr. Hasan's West Virginia medical license until Dr. Hasan makes a written request that his suspension be modified and/or lifted and that the following conditions are met:

Dr. Hasan has completed the Multidisciplinary Assessment & Evaluation of Professionals program at the Professional Renewal Center in Lawrence, Kansas and provides proof satisfactory to the Board that:

1. The Professional Renewal Center assessment and evaluation concludes that patient safety would not be jeopardized by Dr. Hasan's return to practice;

2. The Professional Renewal Center submits a list of any and all practice recommendations and/or restrictions it may
propose in association with a return to practice by Dr. Hasan; and

3. Dr. Hasan is in full compliance with any and all treatment and aftercare recommendations of the Professional Renewal Center.

f. That Dr. Hasan's participation and completion of the Multidisciplinary Assessment & Evaluation of Professionals program at the Professional Renewal Center may not be utilized to satisfy any of his continuing medical education requirements for the state of West Virginia;

g. That Dr. Hasan shall appear before the Board or a designated Committee thereof on an annual basis, and at any other time requested at the discretion of the Board, to discuss his practice and matters relative to the terms and conditions set forth herein; and

h. That Dr. Hasan is hereby ORDERED to pay the costs and expenses of these proceedings, including, but not limited to, costs associated with the services provided by the Hearing Examiner, the court reporter and expert witness Dr. Wettstein, and all other costs of investigation and prosecution of this matter. Payment shall be made by Dr. Hasan to the Board within thirty (30) days of the issuance of an Invoice by the Board.

This Order shall be deemed entered on the date that this order, with all required signatures affixed hereupon, is received in the Board’s 101 Dee Drive Charleston, West Virginia office. The Executive Director of the West Virginia Board of Medicine is hereby authorized to denote the date of entry on behalf of the Board in accordance with this paragraph.
In compliance with the provisions of West Virginia Code §30-3-8, which provides that the Secretary of the Board shall “together with the president of the board sign all licenses, reports, orders and other documents that may be required by the board in the performance of its duties,” the ministerial signature of the current Board Secretary appears hereupon below. Pursuant to the signature authority executed by the current Board President, his designated signatory has executed this Order on behalf of the Board.

ENTERED this 13th day of June, 2017.

WEST VIRGINIA BOARD OF MEDICINE

[Signature]

Designated Signatory for Board President

Rahul Gupta, M.D., M.P.H.
Secretary
Fiscal 2018
Committee Meeting Agendas
and Minutes
Physician Assistant Committee
Meeting Agendas and Minutes
PHYSICIAN ASSISTANT COMMITTEE MEETING AGENDA
SATURDAY, JULY 8, 2017

Call to Order

Approval of Minutes

Approval of May 6, 2017, Physician Assistant Committee Meeting Minutes.

Consent Order Update

Kimberly Elaine Connor, P.A.-C.

New Licensure Applicants

1. Haley May Baird, P.A.-C.
2. Christian August Barill, P.A.-C.
3. Lorin Ashley Belcher, P.A.-C.
4. Kristen Marie Bilby, P.A.-C.
5. Jordan Ashley Britton, P.A.-C.
6. Christopher Timothy Burgan, P.A.-C.
7. Taylor W. Callahan, P.A.-C.
8. Dana Frances DeGeorge, P.A.-C.
9. Ashley Lynn Delashmutt, P.A.-C.
10. Jenna Lee Enoch, P.A.-C.
11. Erika Nicole Fox, P.A.-C.
12. Gerald Edward Frey, Jr., P.A.-C.
13. Brittany Lynn Giesken, P.A.-C.
14. Stephanie Anne Hamrick, P.A.-C.
15. Timothy David Hontz, P.A.-C.
16. Travis Wayne Hughes, P.A.-C.
17. Mark Edward Javins, P.A.-C.
18. Mallory Ann Ledergerber, P.A.-C.
19. Heather Kay Legg, P.A.-C.
22. Kelsey Lynn Roetenberg, P.A.-C.
23. Norman Lee Walker, P.A.-C.

Add-ons below
24. Jackson Barkley Austin, P.A.-C.
25. Terri Leanne Belcher, P.A.-C.
26. Kelly Elizabeth Demuynck, P.A.-C.
27. Ellen Adelia Doehler, P.A.-C.
28. Tara Carson Jernejcic, P.A.-C.
29. Christina Michelle Manchin-Newton, P.A.-C.
30. Heather Ann Nattkemper, P.A.-C.
31. William Joseph Roberts, P.A.-C.
32. Erika Blythe Saunders, P.A.-C.
33. Aris Leshae Smith, P.A.-C.
34. Elisabeth May Walls, P.A.-C.
35. Josee Leigh Zydonik, P.A.-C.
Reinstatement

Lynne Alice Shaver, P.A.-C.

Discussions

A. James Michael Lackey, P.A.-C.
B. Amanda Paugh, P.A.-C.
C. Discussion of Senate Bill 1014 and Review of Proposed 11CSR 1B Amendments
D. Practice Agreement Status Report

Adjournment
WEST VIRGINIA BOARD OF MEDICINE

Physician Assistant Committee Meeting Minutes
July 7, 2018

A meeting of the West Virginia Board of Medicine Physician Assistant Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 7th day of July 2018 at 9:00 a.m.

The following Committee members were present:

Kenneth Dean Wright, P.A.-C.
Harry E. Duncan, Jr., M.D.
Carrie Lakin, D.P.M.
Rev. Janet Harman
Victoria (Tori) Mullins, P.A.-C.

The following Committee members were absent:

David A. Mullins, M.D.
Russell O. Wooton, Esq.

The following Staff members were present:

Mark A. Spangler, Executive Director
Jamie S. Alley, Deputy Director/General Counsel
Greg S. Foster, Board Attorney
Sheree J. Thompson, Supervisor of Licensing
Diane M. Callison, Physician Assistant Licensure Analyst

With a quorum present, Mr. Wright called the meeting to order. A motion was made by Dr. Lakin to approve the minutes of the May 5, 2018, meeting of the Physician Assistant Committee. Dr. Duncan seconded the motion, and the motion carried.

Mr. Wright led a brief discussion on collaboration practice between physician assistants and physicians in relation to the requirement of practice agreements. A follow-up on this topic is planned for the September Board meeting, including a discussion of possible recommendations to the Legislative Committee.
At its May 2018 meeting, the Physician Assistant Committee reviewed the licensure application of Cheryl-Ann Leslie-Theall, P.A.-C. Ms. Leslie-Theall’s application was placed on hold and she was requested to review and amend her application prior to appearing before the Committee at its July meeting. Ms. Leslie-Theall submitted an amended application and she appeared before the Committee in support of her application. After an in-depth discussion with the applicant, including a discussion of continued omissions in her work and licensure history, Dr. Duncan moved that Ms. Leslie-Theall be given the opportunity to withdraw her application. Dr. Lakin seconded the motion, and the motion carried.

The Committee received an update in the matter of Richard Santostefano, Sr., P.A.-C. Mr. Santostefano entered with the Board on October 4, 2017, which restricted his practice to direct collaboration for a minimum period of six months. At its May meeting, the Physician Assistant Committee reviewed the documentation submitted by his collaborating physician, who had recommended lifting the direct supervision restriction. The Committee recommended Mr. Santostefano be released from his Consent Order. An Order Terminating Consent Order was entered on May 7, 2018.

The Physician Assistant Committee reviewed the following complete applications for physician assistant licensure:

1. Edward Beck Baldwin, III, P.A.-C.
2. Jean Trimble Bried, P.A.-C.
3. Brandon Phillip Carag, P.A.-C.
4. Holli Lucia Dalton, P.A.-C.
5. Lynn Ann Damico, P.A.-C. - #1190
6. Pricilla Gail Delp, P.A.-C.
7. Amy Leigh Dingess, P.A.-C.
8. Kari Rae Hunter, P.A.-C.
9. Kayla Marie Johns, P.A.-C.
10. Erica Michelle Paul, P.A.-C.
11. Kate Kennedy Pierce, P.A.-C.
12. Ashley Grace Reese, P.A.-C.
13. Adele Denise Rinchuse, P.A.-C.
14. Jenna Alyse Saltsgaver, P.A.-C.
15. Brittany Ann Sebben, P.A.-C.
No conflicts being declared, Dr. Lakin moved that the Committee recommend each such applicant for Physician Assistant licensure by the Board. Ms. Mullins seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the licensure application of Peter John Womack, P.A.-C. A discrepancy was noted by Board staff between the date of graduation on the diploma and the date on the education verification form submitted by George Washington University. Board policy has been to use the diploma date for data entry purposes, however, the diploma date only includes the month and year. Dr. Duncan moved that the Board utilize the graduation date provided on the verification form, and approve Mr. Womack for Physician Assistant licensure. Dr. Duncan further moved that in the event that the University provides different documentation of Mr. Womack’s graduation date, his record be modified accordingly. Dr. Lakin seconded the motion, and the motion carried.

The Committee reviewed and discussed a proposed practice agreement that includes the delegation of physician assistant practice via telemedicine. Dr. Lakin moved that the agreement be authorized. Dr. Duncan seconded the motion, and the motion carried.

The Committee reviewed and discussed an amended proposed practice agreement that includes the delegation of MAT, including via telemedicine. Ms. Harman moved that the agreement be authorized. Dr. Duncan seconded the motion, and the motion carried.

The Committee reviewed the Consent Order and quarterly collaborating physician status reports of James Michael Lackey, P.A.-C. The two-years of continuous employment probationary period began with his employment on September 14, 2016. Ms. Harman moved that Mr. Lackey appear before the Physician Assistant Committee at its September meeting. Dr. Duncan seconded the motion, and the motion carried.

Ms. Thompson reported that sixty-six (66) practice agreements were authorized since the May 2018 meeting. Additionally, sixty-eight (68) alternate supervisors were designated.
There being no further business, the Physician Assistant Committee was adjourned by consensus.

Kenneth Dean Wright, P.A.-C.
Chair of the Physician Assistant Committee
Call to Order

Approval of Minutes

Approval of July 8, 2017, Physician Assistant Committee Meeting Minutes.

New Licensure Applicants

1. Nancy Jean Balewski, P.A.-C.
2. Joyce Mary Brun, P.A.-C.
3. Courtney Rae Cira, P.A.-C.
4. Brianne Nicole Clark, P.A.-C.
5. Tabitha Eve Cox, P.A.-C.
6. Alexandra Korin Higginbotham, P.A.-C.
7. Jaime Legaspi Lazaro, Jr., P.A.-C.
8. Claire Hillman Leinhauser, P.A.-C.
9. Leanne Kocher Mazzella, P.A.-C.
10. Katherine Laura Moio, P.A.-C.
11. Nathan Merl Musser, P.A.-C.
12. Richard Santostefano, Sr., P.A.-C.
13. Kayla Nicole Strimel, P.A.-C.
14. Nancy Louis Jones, P.A.-C. - add-on
15. Kelsey M. Leadman, P.A.-C. - add-on
16. Robert Joshua Logan, P.A.-C. - add-on
17. Andie Elizabeth Meade, P.A.-C. - add-on
18. Rosa Lea Nardo, P.A.-C. - add-on
19. Natalie Hope Stanley, P.A.-C. - add-on

Reinstatement

Kerry Sue Brinager, P.A.-C.

Appearance

Amanda Marie Skrinjorich, P.A.-C.

Discussions

A. Agency Approved Amendments to 11 CSR 1B and Proposed Emergency Rule 11 CSR 1B
B. PA Formulary revision
C. Practice Agreement Form and Appendix B Form Revision
D. Discussion of Changes in Prescribing Authority on Current Practice Agreements with Prescribing Authority
E. Physician Assistant Application Form Revision
F. Notification of Termination of a Practice Agreement Form Revision
G. Initial Physician Assistant Licensure Application Form Revision
Discussions cont.

H. 2017 Physician Assistant Reinstatement Application Revision
I. Practice Agreement Status Report
J. Rana - Jafari Proposed Practice Agreement
K. Uniform Application for Physician Assistants

Adjournment
WEST VIRGINIA BOARD OF MEDICINE

Physician Assistant Committee Meeting Minutes
September 9, 2017

A meeting of the West Virginia Board of Medicine Physician Assistant Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 9th day of September, 2017 at 9:00 a.m.

The following Committee members were present:

Ashish P. Sheth, M.D., Acting Chair
Harry E. Duncan, Jr., M.D.
Mustafa Rahim, M.D.

The following Committee members were absent:

Kenneth Dean Wright, P.A.-C., Chair
Carrie Lakin, D.P.M.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Sheree J. Thompson
Ryan P. Moore

The Board President, Dr. Faheem, appointed Dr. Sheth as Acting Chair and Dr. Rahim as a Committee member for September meeting. With a quorum present, Dr. Sheth called the meeting to order. A motion was made by Dr. Rahim, and seconded by Dr. Duncan, to approve the minutes of the July 8, 2017, meeting of the Physician Assistant Committee. The motion carried.

The Physician Assistant Committee reviewed the following complete applications for physician assistant licensure:

Nancy Jean Balewski, P.A.-C.
Joyce Mary Brun, P.A.-C.
Courtney Rae Cira, P.A.-C.
Brianne Nicole Clark, P.A.-C.
Tabitha Eve Cox, P.A.-C.
Alexandra Korin Higginbotham, P.A.-C.
Nancy Louis Jones, P.A.-C.
Jaime Legaspi Lazaro, Jr., P.A.-C.
Kelsey M. Leadman, P.A.-C.
Claire Hillman Leinhauser, P.A.-C.
Robert Joshua Logan, P.A.-C.
Leanne Kocher Mazzella, P.A.-C.
Andie Elizabeth Meade, P.A.-C.
Katherine Laura Moio, P.A.-C.
Nathan Merl Musser, P.A.-C.
Rosa Lea Nardo, P.A.-C.
Natalie Hope Stanley, P.A.-C.
Kayla Nicole Strimel, P.A.-C.

Dr. Rahim moved that the Committee recommend each such applicant for Physician Assistant licensure by the Board. Dr. Duncan seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the license reinstatement application of Kerry Sue Brinager, P.A.-C. After a thorough discussion, Dr. Rahim moved that the Committee recommend that the Board approve Ms. Brinager for reinstatement of physician assistant licensure. Dr. Duncan seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the licensure application of Richard Santostefano, Sr., P.A.-C. After an in depth discussion, Dr. Rahim moved that the Committee recommend Mr. Santostefano be approved for physician assistant licensure by the Board contingent upon his acceptance of a Consent Order with the following terms: (1) that any proposed practice agreement submitted delineating advanced duties to Mr. Santostefano must be reviewed by the Physician Assistant Committee; (2) that Mr. Santostefano practice under direct supervision for a minimum of six months; and (3) that Mr. Santostefano’s supervising/collaborating physician send quarterly status reports updating the Committee on his progress and a recommendation regarding when the direct supervision requirement should be lifted. Dr. Duncan seconded the motion, and the motion carried.
At its July 2017 meeting, the Physician Assistant Committee reviewed the proposed practice agreement between Amanda Marie Skrinjorich (formerly Paugh), P.A.-C. and Ryan Wakim M.D. which includes a request for the advanced duty of MAT patients. The Committee invited Ms. Skrinjorich and Dr. Wakim to appear before the Committee at its September meeting. Both Ms. Skrinjorich and Dr. Wakim appeared at the September meeting. After a thorough discussion, Dr. Rahim moved that the Committee approve authorization of the practice agreement pending satisfactory receipt of the following additional information regarding the proposed delegation of MAT: 1) evidence that Ms. Skrinjorich has a minimum of one year of experience in substance use disorder treatment and medication-assisted treatment settings; or 2) a statement from the medial director of the MAT practice location indicating that Ms. Skrinjorich has completed or is actively enrolled in a plan of education for obtaining competence in medication-assisted treatment methods and substance use disorders that is approved by the medical director with a description of the educational plan; and 3) a narrative description from the collaborating physician of the model of patient treatment and Ms. Skrinjorich’s role in patient care for MAT patients. Dr. Duncan seconded the motion, and the motion carried.

The Committee discussed the development of a policy of what needs to be included in practice agreements requesting authorization to delegate the advanced duty of treatment of MAT patients and the procedure for staff authorization of such practice agreements. Dr. Rahim moved that a practice agreement requesting the advanced duty of MAT should include the following:

1) Identification and evidence of the source of the DATA 2000 waiver under which the Physician Assistant will practice.

2) A) Evidence that the PA has a minimum of one year of experience in substance use disorder treatment and medication-assisted treatment settings; or
B) a statement from the medial director of the MAT practice location indicating that the physician assistant has completed or is actively enrolled in a plan of education for obtaining competence in medication-assisted treatment methods and substance use disorders that is approved by the medical director with a description of the educational plan; and
3) A narrative description from the collaborating physician of the model of patient treatment and the physician assistant’s role in patient care for MAT patients.

Dr. Rahim further moved that Board staff may authorize proposed practice agreements which delegate MAT if all appropriate information and documentation are provided. If the proposed practice agreement contains new or unique information, the Committee should review the agreement prior to authorization. Dr. Duncan seconded the motion, and the motion carried.

The Physician Assistant Committee conducted an annual review of the Physician Assistant formulary. After a lengthy discussion, Dr. Duncan moved that the Committee recommend the following formulary to become effective upon enactment of Emergency Rule 1B:

1) Physician Assistants may not prescribe: any Schedule I or II Controlled Substances of the Uniform Controlled Substances Act; Clozapine; Antineoplastics; Radio-Pharmaceuticals; or General Anesthetics.

2) Physician Assistants may prescribe Schedule III Controlled Substances, but no greater than a non-refillable 30-day supply.

3) Physician Assistants may prescribe Schedule IV or V Controlled Substances as set forth in the practice agreement.

4) Physician Assistants may generally prescribe prescription drugs which are not excluded or otherwise limited hereinabove, and physician assistants may prescribe up to an annual supply of any drug, other than a controlled substance, for the treatment of a chronic condition (other than chronic pain management) as defined by the Board’s legislative rules governing the practice of physician assistants.

Dr. Rahim seconded the motion, and the motion carried.

During the 2017 legislative special session, the West Virginia Legislature considered and passed SB1014. The Bill was signed by Governor Justice on June 19, 2017, and became effective on September 7, 2017. This necessitated amendment to 11 CSR 1B and the promulgation of an emergency rule in September. The Board was granted autonomy to file the Proposed Emergency Rule with the Secretary of State’s office after the
September Board meeting. Upon filing, the Emergency Rule will either be rejected or approved within 41 days of filing. The Committee reviewed the Agency Approved version of 11 CSR 1B and proposed Emergency Rule 11CSR 1B.

The Committee reviewed the following forms which will need revision effective upon approval of the Proposed Emergency Rule 11 CSR 1B: Practice Agreement; Appendix A; Appendix B; Notification of Termination of a Practice Agreement; Physician Assistant Application for Licensure; and 2017 Physician Assistant Reinstatement of Licensure Application. After a thorough discussion, Dr. Rahim moved that staff amend the forms as necessary including a global change in language from supervising/supervisor to collaborating/collaboration, and a revision of necessary sections of the Practice Agreement to include a section for collaborating physicians to provide details about delegated controlled substance prescribing. Dr. Duncan seconded the motion and the motion carried.

The Committee also discussed how to facilitate utilization of the new PA formulary once the emergency rule goes into effect. After a thorough discussion, the Committee acknowledged that all current practice agreements incorporate the current PA formulary which limits Schedule III Controlled Substances to a 72-hour supply. Dr. Duncan moved to recommend to the Board that physician assistants and their collaborating physicians who wish to amend their current practice agreement solely for the purpose of changing the delegation of prescribing authority may submit a Board approved amendment form prior to December 31, 2017, at no additional fee. Dr. Rahim seconded the motion, and the motion carried.

The Committee discussed the Federation of State Medical Board’s request to utilize its newly available Uniform Application (UA) for Physician Assistants. The Committee concluded to defer this discussion to a later date.
Ms. Thompson advised the Committee that sixty-three (63) practice agreements were authorized since the July 2017 meeting. Additionally, twenty (20) alternate supervisors were designated.

There being no further business, the Physician Assistant Committee was adjourned by consensus.

Kenneth Dean Wright, P.A.-C.
Chair of the Physician Assistant Committee
Call to Order

Approval of Minutes

Approval of September 9, 2017, Physician Assistant Committee Meeting Minutes.

Consent Order Update

Richard Santostefano, Sr., P.A.-C.

New Licensure Applicants

1. George Burton Bryant, Jr., P.A.-C.  508
2. Sarah Elizabeth Buch, P.A.-C.
3. James Keith Burress, Jr., P.A.-C.
4. Lyndsey Catherine Costa, P.A.-C.
5. Kelsey Lynn Dillon, P.A.-C.
6. Tommy Dorsey Dooley, II, P.A.-C.
7. Sean Michael Gaffney, P.A.-C.
9. Adam Nathaniel Hill, P.A.-C.
10. Eric A. Holtz, P.A.-C.
11. Jami Lee Krull, P.A.-C.
12. Holly Shae Lee, P.A.-C.
13. Krystal Marie MacDowell, P.A.-C.
14. Ryan Alexander McCune, P.A.-C.
15. Ronald J. Murphy, Sr., P.A.-C.  385
16. Kaitlin Clark Osbourn, P.A.-C.
17. Pamela Michelle O’Dell, P.A.-C.  1063
18. Chadwick Jay Perry, P.A.-C.
19. Kelley Kathleen Prado, P.A.-C.
20. Stephanie Nicole Price, P.A.-C.
21. Derek Landon Ramsey, P.A.-C.
22. Douglas Kendal Russell, P.A.-C.
23. Kaitlin Christine Scarberry, P.A.-C.
24. Brandon Joseph Stewart, P.A.-C.
25. Kyria Grace Yanoviak, P.A.-C.
26. Tyler John Young, P.A.-C.
27. Ashlee Kristine O’Kernick, P.A.-C. – add-on

Reinstatement

Kaleb Paul Rush, P.A.-C. #2026
Anna C. Stout-Tuckwiller, P.A.-C. #1554 – add-on
Appearances

Allison Ann Brown, P.A.-C.
Melissa Fabiola Culver, P.A.-C.

Discussions

A. Legislative Rule 1B
B. Emergency Rule 11 CSR 1B
C. Updated Physician Assistant Forms
D. Inquiry on clarification of Formulary restrictions
E. Scope of practice of collaborating physicians in a hospital setting
F. Update on Prescriptive Authority Amendment to Current Practice Agreements
G. Practice Agreement Status Report Updated
H. Jessica Faye Dunkley, P.A.-C. -add-on
I. Inquiry on PA practice/supervision – add-on
J. PA practice agreement advanced duty evidence of training – add-on
K. Tyson E. Bubnar, P.A.-C. (1894) – add-on

Adjournment
A meeting of the West Virginia Board of Medicine Physician Assistant Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 11th day of November, 2017 at 9:00 a.m.

The following Committee members were present:

Kenneth Dean Wright, P.A.-C.
Harry E. Duncan, Jr., M.D.

The following Committee member was absent:

Carrie Lakin, D.P.M.

The following Board members were present:

Victoria (Tori) Mullens, P.A.-C.
Russell O. Wooten, Esq.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Sheree J. Thompson

With a quorum present, Mr. Wright called the meeting to order. Mr. Wright welcomed new Board members Ms. Mullens and Mr. Wooten who were observing the Committee meeting. A motion was made by Dr. Duncan, and noted by Mr. Wright, to approve the minutes of the September 9, 2017, meeting of the Physician Assistant Committee. The motion carried.

The Committee received an update in the matter of Richard Santostefano, Sr., P.A.-C. At its September 9, 2017, the Physician Assistant Committee recommended, and the Board approved, that Mr. Santostefano be granted licensure contingent upon his acceptance of a Consent Order with the following terms: (1) that any practice agreement submitted delineating advanced duties to Mr. Santostefano must be reviewed by the
Physician Assistant Committee prior to authorization; (2) that Mr. Santostefano practice under direct supervision for a minimum of six months; and (3) that Mr. Santostefano’s supervising physician send quarterly status reports updating the Committee on his progress and a recommendation regarding when direct supervision should be lifted. Mr. Santostefano agreed to these terms and entered into a Consent Order with the Board on October 4, 2017.

The Physician Assistant Committee reviewed the following complete applications for physician assistant licensure:

George Burton Bryant, Jr., P.A.-C., #508
Sarah Elizabeth Buch, P.A.-C.
James Keith Burress, Jr., P.A.-C.
Lyndsey Catherine Costa, P.A.-C.
Kelsey Lynn Dillon, P.A.-C.
Tommy Dorsey Dooley, II, P.A.-C.
Sean Michael Gaffney, P.A.-C.
Leonard Bernard Galvan, P.A.-C., #631
Adam Nathaniel Hill, P.A.-C.
Eric A. Holtz, P.A.-C.
Jami Lee Krull, P.A.-C.
Holly Shae Lee, P.A.-C.
Krystal Marie MacDowell, P.A.-C.
Ryan Alexander McCune, P.A.-C.
Ronald J. Murphy, Sr., P.A.-C., #385
Kaitlin Clark Osbourn, P.A.-C.
Pamela Michelle O’Dell, P.A.-C., #1063
Ashlee Kristine O’Kernick, P.A.-C.
Chadwick Jay Perry, P.A.-C.
Kelley Kathleen Prado, P.A.-C.
Stephanie Nicole Price, P.A.-C.
Derek Landon Ramsey, P.A.-C.
Douglas Kendal Russell, P.A.-C.
Kaitlin Christine Scarberry, P.A.-C.
Brandon Joseph Stewart, P.A.-C.
Kyria Grace Yanoviak, P.A.-C.
Tyler John Young, P.A.-C.

Dr. Duncan moved that the Committee recommend each such applicant for Physician Assistant licensure by the Board. Mr. Wright seconded the motion, and the motion carried.
The Physician Assistant Committee reviewed the license reinstatement applications of Kaleb Paul Rush, P.A.-C and Anna C. Stout-Tuckwiller, P.A.-C. After a thorough discussion, Dr. Duncan moved that the Committee recommend that the Board approve Mr. Rush and Ms. Stout-Tuckwiller for reinstatement of physician assistant licensure. Mr. Wright seconded the motion, and the motion carried.

Melissa Fabiola Culver, P.A.-C. appeared before the Physician Assistant Committee in support of her application for physician assistant licensure. After an in depth discussion with Ms. Culver, Dr. Duncan moved that the Committee recommend that the Board approve Ms. Culver for physician assistant licensure. Mr. Wright seconded the motion, and the motion carried.

Allison Anne Brown, P.A.-C. appeared before the Physician Assistant Committee in support of her application for physician assistant licensure. After an in depth discussion with Ms. Brown, Dr. Duncan moved that Ms. Brown’s application be placed on hold pending receipt of additional information demonstrating that Ms. Brown has come into compliance with a currently pending and unsatisfied Order issued by the Delaware Board of Medical Licensure and Discipline. Mr. Wright seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed documentation submitted pursuant to the April 4, 2017 Consent Order of Jessica Faye Dunkley, P.A.-C. Ms. Dunkley was restricted to direct supervision for a minimum period of six months. Her supervising physician has recommended that the restriction be lifted. Dr. Duncan moved that the Physician Assistant Committee recommend to the Board to issue an Order releasing Ms. Dunkley from her Consent Order. Mr. Wright seconded the motion, and the motion carried.

The Committee reviewed a proposed practice agreement for sufficient evidence of advanced duty experience/training that included cryosurgery. Dr. Duncan moved that a letter from a previous collaborating physician acknowledging competency in the duties over a several year period was sufficient evidence of advanced duty experience, and that
staff may add cryosurgery to Appendix A as a Committee approved advanced duty. Mr. Wright seconded the motion, and the motion carried.

The Committee reviewed and discussed the Consent Order of Tyson E. Bubnar, P.A.-C., which he entered with the Board on June 26, 2015. Mr. Bubnar’s Consent Order requires quarterly reports be submitted from his supervisory/collaborating physician during a minimum two-year probationary practice period. Mr. Bubnar is currently practicing under the license issued to him by the WV Board of Osteopathic Medicine. The Committee suggested staff contact Mr. Bubnar regarding the current status of his employment and the possibility of submission of quarterly reports by his osteopathic collaborating physician.

The Committee discussed proposed legislative rule Series 1B, which incorporates a requirement that PAs keep the Board informed of current NCCPA status, even though continued NCCPA certification is no longer a requirement of license renewal. The consensus of the Committee was that in order for the Board of Medicine to license and identify physician assistants as PA-C versus PA, the current NCCPA status must be known and that this is important information to collect for a number of reasons. Mr. Wright will share the Committee’s perspective with the Legislative Committee on November 12, 2017.

The Committee discussed the PA Emergency Rule which became effective on October 20, 2017. Staff informed the Committee that many questions are being fielded regarding insurance parity and training required for the delegation of completion of death certifications. These issues were addressed in SB1014. In relation to the first inquiry topic, the Board generally does not regulate insurance billing or reimbursement of providers. The Committee provided staff with instructions on referring those inquiries. Regarding the training for the completion of death certificates, the Committee acknowledges that there is currently no specific training required by the Board and that the nature and type of training can be determined at the practice level by the delegating physician, however, if specific required training is available through Vital Statistics in the future, the Committee will share this information with licensees.
The Committee reviewed the following forms which had been identified for revision at its September meeting: Practice Agreement; Appendix A; Appendix B; Notification of Termination of a Practice Agreement; Prescriptive Authority Amendment Form; and 2017 Physician Assistant Reinstatement of Licensure Application. Dr. Duncan moved that the Committee approve the forms as revised. Mr. Wright seconded the motion, and the motion carried.

The Committee reviewed an inquiry regarding antineoplastics restrictions. The Committee noted that no changes have occurred in the formulary regarding these restrictions. Staff will convey this to the inquiring party.

The Committee discussed the submission of practice agreements that contain the delineation of advanced duties in the hospital setting that are outside the scope of the collaborating physicians stated scope of practice. No action was taken regarding current practice, which requires the collaborating physician to delegate only within his or her scope and customary practice.

The Committee reviewed an inquiry regarding collaborating physician co-evaluation of new patients and whether or not if direct supervision is required for ultraviolet light therapy. The Physician Assistant Practice Act does not require co-evaluation of new patients. Ultraviolet light therapy does not require direct supervision.

Board staff provided an update to the Committee on the amending of prescriptive authority to current practice agreements after the enactment of Emergency Rule 1B. Many of the initial forms submitted contained omissions and 38 have been processed to date. The forms are being utilized to modify the agreements to the current formulary restrictions for the delegation of prescribing of the agreements currently in place and are available until December 29, 2017.

Ms. Thompson advised the Committee that sixty-four (64) practice agreements were authorized since the September 2017 meeting. Additionally, fifty-nine (59) alternate supervisors were designated.
There being no further business, the Physician Assistant Committee was adjourned by consensus.

[Signature]
Kenneth Dean Wright, P.A.-C.
Chair of the Physician Assistant Committee
Call to Order

Approval of Minutes

Approval of November 11, 2017, Physician Assistant Committee Meeting Minutes.

Consent Order Update

Jessica Faye Dunkley, P.A.-C.

New Licensure Applicants

1. Toni Rebekah Davison, P.A.-C.
2. Jason R. Fantini, P.A.-C.
3. Samantha Jane Hanson, P.A.-C.
4. Maureen E. McDonough, P.A.-C.
5. James Carroll O’Connor, P.A.-C.
6. Patricia Ann Parrish, P.A.-C. - #793
7. Emily N. Penz, P.A.-C.
8. Heather Ann Whetzel, P.A.-C.

Reinstatement

Brian Thomas Jarrell, P.A.-C. #1297

Discussions

A. Allison Ann Brown, P.A.-C.
B. Legislative Rule 1B
C. Update on Prescriptive Authority Amendment to Current Practice Agreements
D. Practice Agreement Status

Adjournment
WEST VIRGINIA BOARD OF MEDICINE

Physician Assistant Committee Meeting Minutes
January 6, 2018

A meeting of the West Virginia Board of Medicine Physician Assistant Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 6th day of January 2018 at 9:00 a.m.

The following Committee members were present:

Kenneth Dean Wright, P.A.-C.
Harry E. Duncan, Jr., M.D.
Carrie Lakin, D.P.M.
David A. Mullins, M.D.
Victoria (Tori) Mullins, P.A.-C.
Russell O. Wooton, Esq.

The following Committee member was absent:

Rev. Janet Harman

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Sheree J. Thompson

With a quorum present, Mr. Wright called the meeting to order. Mr. Wright welcomed new Committee members Dr. Mullins, Ms. Mullins and Mr. Wooten. A motion was made by Dr. Lakin to approve the minutes of the November 11, 2017, meeting of the Physician Assistant Committee. Dr. Mullins seconded the motion, and the motion carried.

The Committee received an update in the matter of Jessica Faye Dunkley, PA-C. Ms. Dunkley entered into a Consent Order with the Board on April 4, 2017, which restricted her practice as a physician assistant to direct supervision for a minimum period of six months. At its November 2017 meeting, the Physician Assistant Committee reviewed the documentation submitted by her supervising physician, who had also
recommended lifting the direct supervision requirement. The Committee recommended Ms. Dunkley be released from her Consent Order. An Order Terminating Consent Order was entered on November 13, 2017.

The Physician Assistant Committee reviewed the following complete applications for physician assistant licensure:

- Toni Rebekah Davison, P.A.-C.
- Jason R. Fantini, P.A.-C.
- Samantha Jane Hanson, P.A.-C.
- Maureen E. McDonough, P.A.-C.
- James Carroll O’Connor, P.A.-C.
- Patricia Ann Parrish, P.A.-C. - #793
- Emily N. Penz, P.A.-C.
- Heather Ann Whetzel, P.A.-C.

Dr. Mullins moved that the Committee recommend each such applicant for Physician Assistant licensure by the Board. Dr. Duncan seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the application for physician assistant licensure of Meredith L. Wisser (George), P.A.-C. After a thorough discussion, Dr. Duncan moved that the Committee recommend that the Board approve Ms. Wisser for licensure to practice in her legal name pending receipt of an accurately completed application form. Dr. Lakin seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the license reinstatement application of Brian Thomas Jarrell, P.A.-C. After a thorough discussion, Dr. Duncan moved that the Committee recommend that the Board approve Mr. Jarrell for reinstatement of physician assistant licensure. Dr. Mullins seconded the motion, and the motion carried.

At its November 2017 meeting Allison Anne Brown, P.A.-C. appeared before the Physician Assistant Committee in support of her application for physician assistant licensure. The Committee moved that Ms. Brown’s application be placed on hold pending receipt of additional information demonstrating that Ms. Brown has come into
compliance with a currently pending and unsatisfied Order issued by the Delaware Board of Medical Licensure and Discipline. Information was submitted for the Committee’s review from Ms. Brown and the Delaware Board of Medicine providing evidence of Ms. Brown’s compliance. Dr. Lakin moved that the Committee recommend that the Board approve Ms. Brown for licensure. Mr. Wooten seconded the motion, and the motion carried.

Ms. Alley reported to the Committee that the Legislative Rule Making Review Committee has approved the Board’s proposed Legislative Rule 1B.

The Physician Assistant Committee reviewed and discussed the incomplete proposed practice agreement between Maryam Jafary Rana, P.A.-C. and Hassan Asghar Jafary, M.D. along with related correspondence between the licensees and Board staff regarding the proposed agreement. The Committee advised Board staff to communicate with Ms. Rana and Dr. Jafary the items still needed as previously outlined in the Additional Instructions for Delegation of MAT available on the Board’s website.

Ms. Thompson informed the Committee that the NCCPA certification for seven actively licensed physician assistants expired effective December 31, 2017. These PAs have been notified to practice using the designation “PA” rather than “PA-C”.

Ms. Thompson provided an update to the Committee on the amending of prescriptive authority to current practice agreements after the enactment of Emergency Rule 1B. A total of 339 Prescriptive Authority Amendment forms for currently authorized practice agreements received by the December 29, 2017 deadline were processed.

Ms. Thompson also reported that forty-one (41) practice agreements were authorized since the November 2017 meeting. Additionally, fifty-nine (59) alternate supervisors were designated.
There being no further business, the Physician Assistant Committee was adjourned by consensus.

Kenneth Dean Wright, P.A.-C.
Chair of the Physician Assistant Committee
PHYSICIAN ASSISTANT COMMITTEE MEETING AGENDA
SATURDAY, MARCH 10, 2018

Call to Order

Approval of Minutes

Approval of January 6, 2018, Physician Assistant Committee Meeting Minutes.

New Licensure Applicants

1. Amber Mae Beckman, P.A.-C.
2. Rebecca Lynn D'Eramo, P.A.-C.
3. Randi Linn Dillon, P.A.-C.
5. Kaitlyn Arielle Garnett, P.A.-C.
6. Jessica Chaney Hansroth, P.A.-C.
7. Holly Marie Harris, P.A.-C.
8. Randall Douglas Kelly, P.A.-C.
10. Skerdilaid Licaj, P.A.-C.
11. Joshua James Rogers, P.A.-C.
12. Megan J. Schweid, P.A.-C.
13. Natalie Anne Sesto, P.A.-C.
14. Ronald Winston Bewick, Jr., P.A.-C. – Add-on
15. Richard Annon Corley, Jr., P.A.-C. (#525) – Add-on
16. Lindsey Megan Fancett, P.A.-C. – Add-on
17. Sarah Leigh LaSala, P.A.-C. – Add-on
18. Thomas A. White, P.A.-C. (#1563) – Add-on
19. Eric Francis Williams, P.A.-C. – Add-on

Reinstatement Applicant

David W. Runyon, P.A.-C. #838
Weslyn Anna Leffler, P.A.-C. #1648 – Add-on

Discussions

A. Inquiry on Alternate Collaboration in Emergency Room
B. Practice Agreement Status
C. Proposed Practice Agreements – Home Health Visits
D. Inquiry on Emergency administering of Schedule II controlled substances – Add-on
E. Proposed Practice Agreement with advanced duty logs – Add-on

Adjournment
A meeting of the West Virginia Board of Medicine Physician Assistant Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 10th day of March 2018 at 9:00 a.m.

The following Committee members were present:

Kenneth Dean Wright, P.A.-C.
Rev. Janes Harman
Carrie Lakin, D.P.M.
David A. Mullins, M.D.
Victoria (Tori) Mullins, P.A.-C.

The following Committee members were absent:

Harry E. Duncan, Jr., M.D.
Russell O. Wooton, Esq.

The following Staff members were present:

Mark A. Spangler, Executive Director
Jamie S. Alley, Deputy Director/General Counsel
Greg S. Foster, Board Attorney
Sheree J. Thompson, Supervisor of Licensing

With a quorum present, Mr. Wright called the meeting to order. Mr. Wright welcomed new Committee member Rev. Harman. A motion was made by Dr. Lakin to approve the minutes of the January 6, 2018, meeting of the Physician Assistant Committee. Dr. Mullins seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the following complete applications for physician assistant licensure:

1. Amber Mae Beckman, P.A.-C.
2. Ronald Winston Bewick, Jr., P.A.-C.
3. Richard Annon Corley, Jr., P.A.-C. (#525)
4. Rebecca Lynn D’Eramo, P.A.-C.
5. Randi Linn Dillon, P.A.-C.
7. Kaitlyn Arielle Garnett, P.A.-C.
8. Jessica Chaney Hansroth, P.A.-C.
9. Holly Marie Harris, P.A.-C.
10. Randall Douglas Kelly, P.A.-C.
11. Jordan Rhea Kerr, P.A.-C.
12. Skerdilaid Licaj, P.A.-C.
13. Joshua James Rogers, P.A.-C.
14. Megan J. Schweid, P.A.-C.
15. Natalie Anne Sesto, P.A.-C.
16. Thomas A. White, P.A.-C. (#1563)
17. Eric Francis Williams, P.A.-C.

Dr. Mullins moved that the Committee recommend each such applicant for Physician Assistant licensure by the Board. Dr. Lakin seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the application for physician assistant licensure of Lindsey Megan Fancett, P.A.-C. After a thorough discussion, Dr. Mullins moved that Ms. Fancett’s application be placed on hold pending receipt of an amended application for the Committee’s review, which clarifies her licensure and work history as well as the explanation provided for a “yes” answer to a professional practice question. Dr. Lakin seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the licensure application and proposed practice agreement of Sarah Leigh LaSala, P.A.-C. After an in depth discussion, Dr. Mullins moved that the Committee recommend Ms. LaSala be approved for Physician Assistant licensure by the Board through Consent Order which includes the following terms: (1) that any practice agreement submitted must be reviewed by the Physician Assistant Committee prior to authorization; (2) that Ms. LaSala practice under direct supervision for a minimum of six months; and (3) that Ms. LaSala’s supervising physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when direct supervision should be lifted. Additionally, if Ms. LaSala accepts the terms of the Consent Order, and modifies her proposed practice agreement to include a direct supervision component, Board staff can authorize the
proposed practice agreement with Melanie Ann Fisher, M.D. Dr. Lakin seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the license reinstatement applications of Weslyn Anna Leffler, P.A.-C and David Runyon, P.A.-C. After a thorough discussion, Dr. Mullins moved that the Committee recommend that the Board approve Mr. Ms. Leffler and Mr. Runyon for reinstatement of physician assistant licensure. Dr. Lakin seconded the motion, and the motion carried.

The Committee discussed the delegation of morphine pump refills and maintenance in an office-based setting. Rev. Harman moved the Committee direct staff that agreements may be authorized delegating this advanced duty with evidence of the appropriate training and logs for refills and pump maintenance only. Because morphine is a Schedule II Controlled Substance independent adjustment of dosages is outside the scope of a physician assistant. Accordingly, physician assistants may not make changes in dosage/calibration of the pump without specific direction from the collaborating physician. Dr. Mullins seconded the motion, and the motion carried.

The Committee discussed a proposed practice agreement which requested delegation of joint aspirations. The logs submitted were not site specific as is required for joint injections. The Committee confirmed for staff that joint aspiration delegation would also be site specific and would require the appropriate logs for authorization to delegate this advanced duty.

The Committee discussed the inquiry of a physician assistant relating to the emergent administration of morphine for cardiac treatment in the absence of the collaborating physician. Dr. Mullins moved the Committee direct staff to inform the physician assistant that the collaborating physician may delegate this in the Emergency Care section of the delegated medical acts provided that specific protocols are outlined in the agreement. Dr. Steele seconded the motion, and the motion carried.
The Committee discussed three proposed practice agreements received in which the care provided by the collaborating physician and physician assistants consist of home health visits. The collaborating physician has agreed to use her home office as the work location. The Committee confirmed for staff that this was acceptable under the circumstances presented.

The Committee discussed a written request regarding clarification of the delegation of alternate collaboration in an emergency room setting. The Committee determined that the language from the Board’s emergency rule (11 CSR 1B) in Section 10.11 answers the question regarding numbers, and that there is little room for interpretation of its meaning. The Committee took no action at this time, however, discussed that legislative action may be needed in the future to address this issue.

Ms. Thompson reported that one hundred twenty-one (121) practice agreements were authorized since the January 2018 meeting. Additionally, one hundred forty-eight (148) alternate supervisors were designated.

There being no further business, the Physician Assistant Committee was adjourned by consensus.

ADJOURNMENT

Kenneth Dean Wright, P.A.-C.
Chair of the Physician Assistant Committee
PHYSICIAN ASSISTANT COMMITTEE MEETING AGENDA
SATURDAY, MAY 5, 2018

Call to Order

Approval of Minutes

Approval of March 10, 2018, Physician Assistant Committee Meeting Minutes.

New Licensure Applicants

1. Danielle Marie Abel, P.A.-C.
2. Caitlin Anne Andryka, P.A.-C.
3. Megan Diane Przybrowski, P.A.-C.
4. Beth Ann Ryan, P.A.-C.
5. Cheryl-Ann Leslie-Theal, P.A.-C.
6. Susan Post Tubens, P.A.-C.
7. Saudat Olayinka Akinola-Hadley, P.A.-C. – add-on
8. Matthew Edward Barker, P.A.-C. – add-on
9. Morgan Leigh Copeland, P.A.-C. – add-on
10. Christopher Wayne Milligan, P.A.-C. – add-on

Discussions

A. Richard Santostefano, P.A.-C.
B. Lindsey Megan Fancett, P.A.-C.
C. Cynthia Jean Hurst, P.A.-C.
D. Practice Agreements Delegating MAT with Telemedicine Component
E. Practice Agreement Status
F. Practice Agreement Delegating MAT for review
G. Query Regarding PA to MD Ratio

Adjournment
WEST VIRGINIA BOARD OF MEDICINE

Physician Assistant Committee Meeting Minutes

May 5, 2018

A meeting of the West Virginia Board of Medicine Physician Assistant Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 5th day of May 2018 at 9:00 a.m.

The following Committee members were present:

Kenneth Dean Wright, P.A.-C.
Carrie Lakin, D.P.M.
David A. Mullins, M.D.
Russell O. Wooton, Esq.

The following Committee members were absent:

Harry E. Duncan, Jr., M.D.
Rev. Janet Harman
Victoria (Tori) Mullins, P.A.-C.

The following Staff members were present:

Mark A. Spangler, Executive Director
Jamie S. Alley, Deputy Director/General Counsel
Greg S. Foster, Board Attorney
Sherree J. Thompson, Supervisor of Licensing
Diane M. Callison, Physician Assistant Licensure Analyst

With a quorum present, Mr. Wright called the meeting to order. A motion was made by Dr. Lakin to approve the minutes of the March 10, 2018, meeting of the Physician Assistant Committee. Mr. Wooton seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the following complete applications for physician assistant licensure:

1. Danielle Marie Abel, P.A.-C.
2. Caitlyn Anne Andryka, P.A.-C.
3. Matthew Edward Barker, P.A.-C.
4. Morgan Leigh Copeland, P.A.-C.
5. Christopher Wayne Milligan, P.A.-C.
6. Megan Diane Przybrowski, P.A.-C.
7. Beth Ann Ryan, P.A.-C.
8. Susan Post Tubens, P.A.-C.

Dr. Mullins moved that the Committee recommend each such applicant for Physician Assistant licensure by the Board. Dr. Lakin seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the licensure application and proposed practice agreement of Sarah Leigh LaSala, P.A.-C. After an in-depth discussion, Dr. Mullins moved that the Committee recommend Ms. LaSala be approved for Physician Assistant licensure by the Board through Consent Order which includes the following terms: (1) that any practice agreement submitted must be reviewed by the Physician Assistant Committee prior to authorization; (2) that Ms. LaSala practice under direct collaboration for a minimum of six months; and (3) that Ms. LaSala’s collaborating physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when direct collaboration should be lifted. Additionally, if Ms. LaSala accepts the terms of the Consent Order, and modifies her proposed practice agreement to include a direct collaboration component, Board staff may authorize the proposed practice agreement with Melanie Ann Fisher, M.D. Dr. Lakin seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the licensure application of Saudat Olayinka Olushola Akinola-Hadley, P.A.-C. After an in-depth discussion, Mr. Wooton moved that the Committee recommend that Ms. Akinola-Hadley be approved for Physician Assistant licensure by the Board pending receipt of verification of her DC licensure. Dr. Mullins seconded the motion, and the motion carried.

The Physician Assistant Committee reviewed the quarterly status reports submitted pursuant to the Consent Order of Richard Santostefano, Sr., P.A.-C., which Mr. Santostefano entered with the Board on October 4, 2017. Mr. Santostefano was restricted to direct collaboration for a minimum period of six months. His collaborating physician has
recommended that the restrictions be lifted. Dr. Lakin moved that the Committee recommend to the Board that Mr. Santostefano be released from his Consent Order through Board Order. Dr. Mullins seconded the motion, and the motion carried.

At its March 2018 meeting, the Physician Assistant Committee reviewed the application for physician assistant licensure of Lindsey Megan Fancett, P.A.-C. The Committee moved that Ms. Fancett’s application be placed on hold pending receipt of an amended application for the Committee’s review, which clarifies her licensure and work history as well as the explanation provided for a “yes” answer to a professional practice question. Ms. Fancett submitted an amended application for review. Dr. Mullins moved to accept the amended application and that the Committee recommend Ms. Fancett for Physician Assistant licensure by the Board. Dr. Lakin seconded the motion, and the motion carried.

The Physician Assistant Committee discussed the application for an out of cycle renewal application for Cynthia Jean Hurst, P.A.-C. Ms. Hurst contacted the Board when she determined her license expiration date was out of alignment with the West Virginia Board of Medicine physician assistant licensure cycle. It was determined that a data entry error resulted in her NCCPA certification expiration date being entered in her license expiration field, and Ms. Hurst was therefore not part of the cohort for renewal in 2017. When the issue was identified, Ms. Hurst submitted a modified renewal application, without a fee. After review of the application and the facts and circumstances resulting in the need for the out of cycle application, Mr. Wooton moved to accept the renewal application and adjust Ms. Hurst’s license expiration date to March 31, 2019. Dr. Lakin seconded the motion, and the motion carried.

The Committee reviewed and discussed a proposed practice agreement that includes the delegation of MAT that includes the use of telemedicine. Mr. Wooton moved that the authorization of the use of MAT telemedicine be held pending additional information for the Committee’s review. Dr. Lakin seconded the motion, and the motion carried.
The Committee reviewed and discussed an amended proposed practice agreement that includes the delegation of MAT. Mr. Wooton moved that the authorization of the agreement be approved pending receipt of modifications to page 3 of the agreement. Dr. Mullins seconded the motion, and the motion carried.

The Committee discussed correspondence received from WVU Medicine asking the Board: (1) to remove the current requirements which limits the number of PAs a physician may collaborate with; and (2) to make an exception regarding this requirement for clinics which are part of the WVU Heart & Vascular Institute. Currently, a physician may collaborate with up to five physician assistants. In an emergency room or other hospital settings, a physician may collaborate with up to five PAs per shift. Dr. Mullins motioned that the Committee direct staff to send a letter to WVU Medicine which explains that the collaboration limitations identified in the submitted correspondence are set by statute, and the Board does not have the authority to change them or approve exceptions to them absent legislative action. The Committee acknowledges that the current law creates some logistical problems for scheduling models like the one used by the correspondent and these problems and regulatory burden are worthy of consideration by the Legislative Committee for possible legislative action. Dr. Lakin seconded the motion, and the motion carried.

Ms. Thompson reported that ninety-three (93) practice agreements were authorized since the March 2018 meeting. Additionally, two hundred seven (207) alternate supervisors were designated.

There being no further business, the Physician Assistant Committee was adjourned by consensus.

Kenneth Dean Wright, P.A.-C.
Chair of the Physician Assistant Committee

ADJOURNMENT
Licensure Committee
Meeting Agendas and Minutes
WEST VIRGINIA BOARD OF MEDICINE
LICENSURE COMMITTEE AGENDA
July 8, 2017

CALL TO ORDER

LICENSURE COMMITTEE REVIEW AND ACTION

Approval of Minutes of May 6, 2017 meeting

APPEARANCES

1. Ad, Niv 10:45 a.m.
2. Luizaga Coca, Ever 11:00 a.m.
3. Fatenejad, Saeed 11:15 a.m.
4. Dutt, Anil 11:30 a.m.
5. Hayanga, Jeremiah William 11:45 a.m.

LUNCH BREAK

6. Link, Gianna Joanne 12:45 p.m.
7. Securo, Anthony Todde 1:00 p.m.
8. Wee, Alvin 1:15 p.m.
9. Fish, Steven Michael 1:30 p.m.

DISCUSSIONS

10. Tobin, Wayne Ernest
11. Gannon, Peter Mathew
12. Hussain, Maryam
13. Davis, Deborah Sue
14. Burke, Jr., Paul Webber
15. Chadwick, Deborah Lynn – Add-on
16. Bennion, Jr., David Austin – Add-on
17. Burner, Kyle Matthew – Add-on
18. Drug Dispensing Registration Application Revised – Add-on
19. Charitable Exemption Authorization Revised -Add-on
20. Report on 2017 Medical Doctor and Podiatrist Renewals
A meeting of the West Virginia Board of Medicine Licensure Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 8th day of July, 2017, at 10:30 a.m.

The following Committee members were present:

Mustafa Rahim, M.D., Chair
Harry E. Duncan, Jr., M.D.
Beth Hays, M.A.
Carrie Lakin, D.P.M.
Ashish P. Sheth, M.D.
Wes Steele, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Sheree J. Thompson

Dr. Rahim called the meeting to order. A motion was made by Dr. Duncan, and seconded by Ms. Hays, to approve the minutes of the May 6, 2017, Licensure Committee meeting. The motion carried.

At its January 2017 meeting the Licensure Committee reviewed and discussed the application for a medical school faculty license of Niv Ad, M.D. Dr. Ad was requested to appear before the Committee and was unable to appear at the March or May 2017 meetings. The Committee requested his appearance at its July 2017 meeting. Dr. Ad appeared before the Committee in support of his application. After a thorough discussion with Dr. Ad, Ms. Hays moved that the Committee recommend that the Board approve Dr. Ad for medical school faculty licensure. Dr. Steele seconded the motion, and the motion carried.
At its May 2017 meeting, the Licensure Committee reviewed and discussed a group of applications that have been submitted through a telemedicine service in South Dakota. One of the applicants using this company, Ever Luizaga Coca, M.D., received a letter of warning from another State Board in 2016 for knowingly submitting an application that was not signed in the presence of the Notary Public. This applicant submitted an affidavit to the WVBOM that was also notarized in South Dakota by the service’s staff while he still resides in Pennsylvania, and the Good Moral Character statement submitted on his behalf was also notarized in South Dakota although the colleague resides in another state. The Committee requested his appearance at its July 2017 meeting. Dr. Luizaga Coca appeared before the Licensure Committee in support of his application. After a thorough discussion with Dr. Luizaga Coca, Dr. Lakin moved that Dr. Luizaga Coca’s application be placed on hold pending receipt of a duly authorized affidavit and Good Moral Character Statement. Dr. Steele seconded the motion, and the motion carried.

At its March 2017 meeting, the Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Saeed Fatenejad, M.D. Dr. Fatenejad was requested to appear before the Committee at its May 2017 meeting, however, was unable to meet with the Committee. The Committee requested his appearance at its July 2017 meeting. Dr. Fatenejad appeared before the Licensure Committee in support of his application. After a thorough discussion with Dr. Fatenejad, Ms. Hays moved that Dr. Fatenejad take and pass the SPEX exam prior to further determination of his application for reactivation of licensure, and that his application be placed on hold pending receipt of the exam results. Dr. Lakin seconded the motion, and the motion carried.

At its May 2017 meeting the Licensure Committee reviewed and discussed the application for a permanent medical license of Anil Dutt, M.D. Dr. Dutt was requested to appear before the Licensure Committee at its July 2017 meeting. Dr. Dutt appeared before the Committee in support of his application. After a thorough discussion with Dr. Dutt, Dr. Steele moved that the Committee recommend that the Board approve Dr. Dutt for licensure pending payment of the mandatory PICF assessment fee. Ms. Hays seconded the motion, and the motion carried.

At its May 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Jeremiah William Hayanga, M.D. The Committee
recommended that Dr. Hayanga be notified that he does not meet the current qualifications for licensure eligibility and offer him the opportunity to withdraw his application. When given the opportunity to withdraw, Dr. Hayanga converted his application for permanent licensure to an application for medical school faculty licensure and appeared before the Licensure Committee in support of his application. After a thorough discussion with Dr. Hayanga, Dr. Lakin moved that the Committee recommend that the Board approve Dr. Hayanga for medical school faculty licensure. Dr. Duncan seconded the motion, and the motion carried.

At its May 2017 meeting, the Licensure Committee reviewed and discussed the application for reinstatement of the permanent medical license of Gianna Joanne Link, M.D. Dr. Link was requested to appear before the Committee at its July 2017 meeting. Dr. Link appeared in support of her application. After a thorough discussion with Dr. Link, Dr. Lakin moved that Dr. Link undergo a neuropsychological and audiological evaluations at the Board’s expense prior to any further determination of her application for reinstatement of her medical license; and that Dr. Link’s application be placed on hold pending receipt of reports from the evaluating physicians. Ms. Hays seconded the motion, and the motion carried.

At its May 2017 meeting, the Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Anthony Todde Securo, M.D. Dr. Securo was requested to appear before the Licensure Committee at its July 2017 meeting. Dr. Securo appeared in support of his application. After a thorough discussion with Dr. Securo, Dr. Lakin moved that the Committee recommend that the Board approve Dr. Securo for reactivation of licensure through proposed Consent Order with the following terms, conditions, limitations and restrictions: 1) Dr. Securo shall not practice pain management or work in a pain management clinic, and shall refer patients with chronic pain, as necessary, to a pain management specialist or licensed clinic; 2) In the event that Dr. Securo regains a DEA registration which permits the prescribing of schedule II and III controlled substances he shall not prescribe controlled substances to any patient at an amount more than the morphine equivalent daily dose (MEDD) of 30mg and such prescriptions shall not be for more than one (1) week of medication per procedure; 3) Prior to prescribing, administering, ordering or dispensing any controlled substances, Dr. Securo shall detail in full, in the patient’s file, the examination performed and diagnosis reached in the particular patient’s file. Dr. Securo shall specifically record all physical data of the patient and detail the exact nature of his evaluation of the patient. In addition to this
requirement, Dr. Securo agrees to comply with all record keeping requirements of the Board; 4) At six month intervals after the date of entry of this Consent Order, the Board may, in its discretion, query Dr. Securo’s controlled substance prescribing practices with the West Virginia Board of Pharmacy’s Controlled Substance Monitoring Database and/or similar state or federal entities in surrounding states to monitor Dr. Securo’s compliance with the prescribing restrictions imposed by this Order; 5) Dr. Securo acknowledges that it is a best practice to chart in the medical record the name of the chaperone and/or female staff member present whenever he conducts a breast examination, gynecological examination, or any other medical test or procedure which requires contact with or exposure of the breast or genitals. Dr. Securo agrees that he will strictly comport with this practice and will always chart the name of the female staff member/chaperone present for all such medical procedures; 6) Dr. Securo shall maintain current and accurate contact information with the Board, including home address, preferred mailing address, all practice addresses in West Virginia and e-mail address. Dr. Securo shall provide the Board with any changes or additions to his contact information within 5 days of any such change; 7) Within ten days of commencing practice at any place of practice in West Virginia, and for so long as the practice restrictions imposed by this Consent Order remain in place, Dr. Securo shall provide a complete copy of the fully executed Consent Order, to any and all employers and places where he practices and/or has privileges in West Virginia; 7) Dr. Securo shall appear before the Licensure Committee on an annual basis, at the discretion of the Board, to discuss his practice of medicine and/or his compliance with the terms of his probation or this Consent Order; and 8) After Dr. Securo has been in active practice in West Virginia for one full year, he may petition to the Board to modify and/or lift the practice restrictions related thereto which are imposed by this Order. Ms. Hays seconded the motion, and the motion carried.

Alvin Chan Wee, M.D. appeared before the Licensure Committee in support of his application for an extraordinary circumstances medical license. After a thorough discussion with Dr. Wee, Ms. Hays moved that the Licensure Committee recommend to the Board that the Board approve Dr. Wee’s application for licensure pursuant to WV Code § 30-3-10(e) based on the following findings:

1. The applicant has exceptional education, training and practice credentials, including:

   a. Establishing and eight years of experience serving as the Program Director of the Kidney and Kidney/Pancreas Program at St. Vincent Hospital in Indianapolis,
Indiana, a satellite transplant program for the Cleveland Clinic, during which time the program has substantively contributed to a significant decrease in the kidney transplant wait time for the state of Indiana with the program itself having the second shortest wait time in the region;

b. Over ten years of clinical experience in Kidney and Pancreas Transplantation, including laparoscopic living donor nephrectomies;

c. Serving as a Living Donor Primary Surgeon for the Kidney and Kidney/Pancreas Program at St. Vincent Hospital in Indianapolis, Indiana;

d. Appointment as Assistant Professor for the Cleveland Clinic Lerner College of Medicine;

e. Serving as the Region 10 Representative for United Network for Organ Sharing;

f. Completion of a two year Renal/Pancreas Transplant Fellowship at the Glickman Urological and Kidney Institute at the Cleveland Clinic; and

g. Publication in the subject matter area of transplant medicine, including pancreas transplantation.

2. The applicant’s practice in the state would be beneficial to the public welfare. Currently, there are no physicians in West Virginia performing live donor kidney transplants, and only one physician performing deceased donor kidney transplants. Dr. Wee performs live and deceased donor kidney transplants, and his licensure would provide access to live donor kidney transplants to residents of this state.

3. The availability of live donor kidney transplant procedures can affect the length of transplant wait times for West Virginia patients, and can maximize opportunities and outcomes for certain patient populations.

4. The applicant received six years of postgraduate training outside of the United States and its territories, including four years of urologic surgery. Additionally, Dr. Wee completed one year of ACGME postgraduate medical training in internal medicine and two years of fellowship training in Renal/Pancreas Transplant at the Glickman Urological and Kidney Institute at the Cleveland Clinic.

5. The applicant’s education and initial post-graduate training occurred outside of the United States and are not, standing alone, substantially equivalent to the requirements of licensure in this state, however the totality of his education, training, and practice credentials are substantially equivalent to the requirements of licensure established in W. Va. Code §30-3-10(f).
6. The applicant has no disciplinary action which would render him ineligible for an extraordinary circumstances license.

7. The applicant is eligible for a restricted license in extraordinary circumstances.

Ms. Hays further moved that the Committee recommend that Dr. Wee be approved for an extraordinary license limited according to practice location at the locations of Charleston Area Medical Center, Charleston, West Virginia, and that the applicant's license shall be restricted to the practice of transplant surgery. Dr. Sheth seconded the motion, and the motion carried.

Steven Michael Fish, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Fish, Dr. Steele moved that the Committee recommend that the Board approve Dr. Fish for licensure. Ms. Hays seconded the motion, and the motion carried.

At its May 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Wayne Ernest Tobin, M.D. Dr. Tobin was requested to appear before the Licensure Committee at its July 2017 meeting. Dr. Tobin submitted a request to waive the requirement of his appearance and updated his application to state he has practiced clinically in his most recent employment, which was stated as administrative employment in error on his initial application. After review and discussion of this additional information, Dr Lakin moved that the Committee recommend that the Board accept his intern year of postgraduate training as satisfactorily verified and approve Dr. Tobin for licensure pending payment of the mandatory PICF assessment fee based on the following factors: Dr. Tobin's residency training was verified and he holds lifetime Board certification in Neurology. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Peter Matthew Gannon, M.D. After a thorough discussion, it was the determination of the Committee that Dr. Gannon appear before the Licensure Committee at its September 2017 meeting in support of his application.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Maryam Hussain, M.D. After a thorough discussion, Dr. Sheth
moved that the Committee recommend that the Board approve Dr. Hussain for licensure pending satisfactory receipt of evidence of completion of her third year of postgraduate training and her payment of the mandatory PICF assessment fee. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent license of Deborah Sue Davis, M.D. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board accept the evidence of CME completion submitted by Dr. Davis as satisfactory, and approve Dr. Davis for activation of licensure. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent license of Deborah Lynn Chadwick (formerly Green-Chadwick), M.D. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board accept the evidence of CME completion submitted by Dr. Chadwick as satisfactory, and approve Dr. Chadwick for reactivation of licensure. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed information relating to the potential violation of a Consent Order. Dr. Lakin moved that the Committee refer the matter to the Complaint Committee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of David Austin Bennion, Jr., M.D. After a thorough discussion, Ms. Hays moved that the Committee recommend that the Board approve Dr. Bennion for licensure pending satisfactory receipt of evidence of completion of his intern year of postgraduate training. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Kyle Matthew Burner, M.D. After a thorough discussion, Ms. Hays moved that the Committee recommend that the Board approve Dr. Bennion for licensure pending satisfactory receipt of evidence of completion of his intern year of postgraduate training. Dr. Sheth seconded the motion, and the motion carried.
After review and discussion, the Committee acted to approve the following two forms as revised:

Drug Dispensing Registration Application
Charitable Exemption Authorization

Board staff provided information regarding the 2017 licensure renewal period for all podiatric physicians; medical doctors with the last names beginning with M – Z; and any associated drug dispensing registrations. Renewal began on May 3, 2017, with paper applications being available for submission. After nearly a month delay, on-line applications were implemented for the medical doctors with the last names beginning with M – Z. The following renewal applications were processed:

Active MDs: 2846 (16% decrease)
Inactive MDs: 203
Active DPMs: 109 (7% decrease)
Inactive DPMs: 6
Volunteer MDs: 8

Drug Dispensing Registrations: 227
PLLs: 136

Ms. Thompson provided the Licensure Committee with a list of applicants who have submitted applications in the past year who have not completed the application process. Five applicants failed to meet licensure eligibility requirements and twenty-one have failed to provide or cause to be provided all necessary documentation to complete his or her application.

The Licensure Committee reviewed and discussed the list of compliant applications which did not require an appearance or individualized discussion, which includes one-hundred seventy-five (175) initial medical doctor applications, two initial podiatric physician applications and one reactivation of medical license application. There are also two applications pending receipt of the mandatory PICF assessment fee and 1 pending receipt of an official USMLE transcript from the FSMB, not the applicant. In addition there are four initial applicants for summer camp licensure. Dr. Steele moved that the Committee recommend that the Board approve the applicants for licensure as indicated. Dr. Duncan seconded the motion and the motion carried.
The Licensure Committee determined by consensus to adjourn, there being no further business.

Mustafa Rahim, M. D.
Chair of the Licensure Committee
WEST VIRGINIA BOARD OF MEDICINE
LICENSURE COMMITTEE AGENDA
September 9, 2017

CALL TO ORDER

LICENSURE COMMITTEE REVIEW AND ACTION

Approval of Minutes of July 8, 2017 meeting

APPEARANCES

1. Alsoutary, Khalil Mohammad 11:00 a.m.
2. Bleggi, Albert Mark 11:15 a.m.
3. Oates, John Martin 11:30 a.m.

LUNCH BREAK

DISCUSSIONS

4. Gannon, Peter Mathew
5. Almaraz, Gilbert
6. Agarwal, Ankush
7. Kocher, Robert Paul
8. Kamat, Sunil Gurudas
9. Joshi, Dhruv
10. Luizaga Coca, Ever
11. Spears, Gregory Lynn
12. Thomas, David Elmer
13. Gomez, Joel Eleazar
14. Jaramillo, Victor
15. Wolz, Dean Eric
16. Wright, Stephanie Anne
17. Mason, Bert E.
18. Donley, Darrell Lee
19. Fatenejad, Saeed
20. Securo, Anthony Todd
21. Policy on Background Check Status
22. USMLE exam attempt limits for initial licensure
23. IMLC Update
24. Parker, Jason Alexis – Add-on
25. Miro, Santiago – Add-on
A meeting of the West Virginia Board of Medicine Licensure Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 9th day of September, 2017, at 11:00 a.m.

The following Committee members were present:

Mustafa Rahim, M.D., Chair
Harry E. Duncan, Jr., M.D.
Beth Hays, M.A.
Ashish P. Sheth, M.D.

The following Committee members were absent:

Carrie Lakin, D.P.M.
Wes Steele, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Sheree J. Thompson

Dr. Rahim called the meeting to order. A motion was made by Dr. Duncan, and seconded by Ms. Hays, to approve the minutes of the July 8, 2017, Licensure Committee meeting. The motion carried.

Khalil Mohammad Alsoutary, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Alsoutary, Dr. Sheth moved that the Committee recommend that the Board approve Dr. Alsoutary for licensure pending receipt of the PICF assessment fee. Ms. Hays seconded the motion, and the motion carried.

Albert Mark Bleggi, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Bleggi,
Dr. Sheth moved that the Committee recommend that the Board approve Dr. Bieggi for licensure pending receipt of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

Martin John Oates, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Oates, Dr. Duncan moved that the Committee recommend that the Board approve Dr. Oates for licensure pending receipt of the PICF assessment fee. Dr. Sheth seconded the motion, and the motion carried.

At its July 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Peter Matthew Gannon, M.D. Dr. Gannon was requested to appear before the Committee at its September 2017 meeting. When notified of his requested appearance, Dr. Gannon submitted a request to withdraw his application. Dr. Sheth made a motion to recommend that the Board permit Dr. Gannon to withdraw his application. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Gilbert Almaraz, M.D. After a thorough discussion, Dr. Sheth moved that the Committee recommend that the Board approve Dr. Almarez for licensure pending receipt of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Ankush Agarwal, M.D. After a thorough discussion, Dr. Sheth moved that the Committee recommend that the Board approve Dr. Agarwal for licensure. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Robert Paul Kocher, M.D. After a thorough discussion, Dr. Duncan moved that Dr. Kocher appear before the Licensure Committee at its November 2017 meeting. Ms. Hays seconded the motion, and the motion carried.
The Licensure Committee reviewed and discussed the application for a permanent medical license of Sunil Gurudas Kamat, M.D. After a thorough discussion, Ms. Hays moved that the Committee recommend that the Board approve Dr. Kamat for licensure. Dr. Sheth seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Dhruv Joshi, M.D. After a thorough discussion, Dr. Sheth moved that the Committee recommend that the Board approve Dr. Joshi for licensure. Ms. Hays seconded the motion, and the motion carried.

At its May 2017 meeting, the Licensure Committee reviewed and discussed a group of applications that have been submitted through a telemedicine service in South Dakota. One of the applicants using this company, Ever Luizaga Coca, M.D., received a letter of warning from another State Board in 2016 for knowingly submitting an application that was not signed in the presence of the Notary Public. This applicant submitted an affidavit to the WVBOM that was also notarized in South Dakota by the service’s staff while he still resides in Pennsylvania, and the Good Moral Character statement submitted on his behalf was also notarized in South Dakota although the colleague resides in another state. The Committee requested his appearance at its July 2017 meeting. Dr. Luizaga Coca appeared before the Licensure Committee in support of his application. Dr. Luizaga Coca’s application was placed on hold pending receipt of a duly authorized affidavit and Good Moral Character Statement, which was received and reviewed by the Committee at its September 2017 meeting. After review, Dr. Sheth moved that the Committee recommend that the Board approve Dr. Luizaga Coca for licensure pending receipt of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Gregory Lynn Spears, M.D. After a thorough discussion, Dr. Sheth moved that the Committee recommend that the Board approve Dr. Spears for licensure pending receipt of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of David Thomas Elmer, M.D. After a thorough discussion, Dr. Sheth moved that the Committee recommend that the Board approve Dr. Elmer for licensure pending
receipt of a copy of his medical school diploma, copy of his certificate of postgraduate training and receipt of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Joel Eleazar Gomez, M.D. After a thorough discussion, Dr. Duncan moved that the Committee recommend that the Board approve Dr. Gomez for licensure pending receipt of the PICF assessment fee. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Victor Jaramillo, M.D. After a thorough discussion, Dr. Sheth moved that the Committee recommend that the Board approve Dr. Jaramillo for licensure pending receipt of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Dean Eric Wolz, M.D. After a thorough discussion, Ms. Hays moved that the Committee recommend that the Board approve Dr. Wolz for licensure pending receipt of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Stephanie Anne Wright, M.D. After a thorough discussion, Dr. Sheth moved that the Committee recommend that the Board approve Dr. Wright for licensure. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent pediatric license of Bert E. Mason, D.P.M. After a thorough discussion, Dr. Sheth moved that the Committee recommend that the Board accept the evidence of CME completion submitted by Dr. Mason as satisfactory, and approve Dr. Mason for activation of licensure. Ms. Hays seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent license of Darrell Lee Donley, M.D. After a thorough discussion, Dr. Sheth moved that the Committee recommend that the Board accept the evidence of CME completion
submitted by Dr. Donley as satisfactory, and approve Dr. Donley for activation of licensure. Ms. Hays seconded the motion, and the motion carried.

At its March 2017 meeting, the Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Saeed Fatenejad, M.D. Dr. Fatenejad was requested to appear before the Committee at its May 2017 meeting, however, was unable to meet with the Committee. Dr. Fatenejad met with the Committee in July 2017. Thereafter, the Committee requested that Dr. Fatenejad take and pass the SPEX exam prior to further determination upon his application for reactivation of licensure. Dr. Fatenejad did not respond to the Committee prior to the September 2017 meeting. Ms. Hays moved that Dr. Fatenejad’s application remain on hold and that he be given the opportunity to pass the SPEX exam or to request the withdrawal his application prior to the Committee taking final action upon his application in November 2017. Dr. Sheth seconded the motion, and the motion carried.

After his appearance at the Licensure Committee’s July 2017 meeting, the Board offered Anthony Todd Securo, M.D. reactivated licensure contingent upon his acceptance of a Consent Order with the following terms, conditions, limitations and restrictions: 1) Dr. Securo shall not practice pain management or work in a pain management clinic, and shall refer patients with chronic pain, as necessary, to a pain management specialist or licensed clinic; 2) In the event that Dr. Securo regains a DEA registration which permits the prescribing of schedule II and III controlled substances he shall not prescribe controlled substances to any patient at an amount more than the morphine equivalent daily dose (MEDD) of 30mg and such prescriptions shall not be for more than one (1) week of medication per procedure; 3) Prior to prescribing, administering, ordering or dispensing any controlled substances, Dr. Securo shall detail in full, in the patient’s file, the examination performed and diagnosis reached in the particular patient’s file. Dr. Securo shall specifically record all physical data of the patient and detail the exact nature of his evaluation of the patient. In addition to this requirement, Dr. Securo agrees to comply with all record keeping requirements of the Board; 4) At six month intervals after the date of entry of this Consent Order, the Board may, in its discretion, query Dr. Securo’s controlled substance prescribing practices with the West Virginia Board of Pharmacy’s Controlled Substance Monitoring Database and/or similar state or federal entities in surrounding states to monitor Dr. Securo’s compliance with the prescribing restrictions imposed by this Order; 5) Dr. Securo acknowledges that it is a best practice to chart in the medical record the name of the chaperone.
and/or female staff member present whenever he conducts a breast examination, gynecological examination, or any other medical test or procedure which requires contact with or exposure of the breast or genitals. Dr. Securo agrees that he will strictly comport with this practice and will always chart the name of the female staff member/chaperone present for all such medical procedures; 6) Dr. Securo shall maintain current and accurate contact information with the Board, including home address, preferred mailing address, all practice addresses in West Virginia and e-mail address. Dr. Securo shall provide the Board with any changes or additions to his contact information within 5 days of any such change; 7) Within ten days of commencing practice at any place of practice in West Virginia, and for so long as the practice restrictions imposed by this Consent Order remain in place, Dr. Securo shall provide a complete copy of the fully executed Consent Order, to any and all employers and places where he practices and/or has privileges in West Virginia; 7) Dr. Securo shall appear before the Licensure Committee on an annual basis, at the discretion of the Board, to discuss his practice of medicine and/or his compliance with the terms of his probation or this Consent Order; and 8) After Dr. Securo has been in active practice in West Virginia for one full year, he may petition to the Board to modify and/or lift the practice restrictions related thereto which are imposed by this Order. Dr. Securo did not respond to the proposed Consent Order prior to the September 2017 Committee meeting. It was the consensus of the Committee to offer Dr. Securo the opportunity to execute the Consent Order or request the withdrawal of his application prior to the Committee taking final action upon his application at its November 2017 meeting.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Jason Alexis Parker, M.D. After a thorough discussion, Ms. Hays moved that the Committee recommend that the Board approve Dr. Parker for licensure pending receipt of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Santiago Miro, M.D. After a thorough discussion, Dr. Duncan moved that the Committee recommend that the Board approve Dr. Miro for licensure pending receipt of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

Board staff requested direction on the processing of applications which have discrepancies between information reported on an application and the information provided on an
applicant's criminal history record check report. The Committee directed staff that when discrepancies are satisfactorily resolved by the applicant, staff should exercise discretion in determining whether the application warrants review by the Licensure Committee.

Board staff asked for clarification on the policy instituted in January 2013 regarding the six-attempt limit to pass any of the USMLE exam steps. It was the consensus of the Licensure Committee that if an applicant has required more than six attempts to pass any one of the USMLE exam steps prior to 2013, the application should be reviewed by the Licensure Committee. However, if the applicant has more than six attempts on any step of the USMLE exam after January 2013, the applicant is ineligible for licensure.

Board staff updated the Committee on the status of Interstate Medical Licensure Compact (IMLCC) applications. The following six applicants, listed along with their state of principal licensure, were granted permanent medical licensure through an IMLCC application between the July and September Board meetings:

- Behrens, Jacob M.          Wisconsin
- Dillard, Shelia Diane     Alabama
- Joseph Gordon Krainin     Kansas
- Gina Alexandra McRae      Alabama
- Joyce Geneva Moore        Kansas
- Mark Daniel Yovichin      Idaho

Also, the Board has received eight requests for Letters of Qualification (LOQ) to be issued by the Board as the state of principal licensure. Of these, three applications are pending completion and two may be ineligible for a LOQ. LOQs were issued to:

- Gregory Dresel Clarke, M.D.
- Matt Wade Lambert, M.D.
- Sushil M. Sethi, M.D.

The Licensure Committee reviewed and discussed the list of applications which did not require an appearance or individualized discussion, which includes seventy-one initial medical doctor applications, one initial podiatric physician application and four reactivation of medical license applications. There are also two applications pending receipt of the mandatory PICF assessment fee. Dr. Sheth moved that the Committee recommend that the Board approve the applicants for licensure as indicated. Dr. Duncan seconded the motion, and the motion carried.
The Licensure Committee determined by consensus to adjourn, there being no further business.

Mustafa Rahim, M. D.
Chair of the Licensure Committee

ADJOURNMENT
APPLICANTS FOR PERMANENT LICENSURE - Physicians

September 11, 2017

Abdelqader, Abdelhai
Abid, Ayesha
Adelman, Avram Eli
Allgaier, Jeffrey Todd
Al-Qawasmi, Halima
Archar, Eric James
Arekapudi, Smitha
Aromin, Jourdan Tyler

Balla, Sudarshan
Bryant, Keisha Kadesha

Cartagena, Jr., Rafael
Chacko, Binu Thomas
Clarkson, Mackenzie James
Cundiff, Courtney Anne

Davis, Sean Germaine
Dilcher, Brian Zachary

Elkamberg, Hussam Mohamed Aly Iskander
Estaphan, Nevine Albert Naguib
Fleming, Michael James

Galvan Turner, Valerie Biana
Garcia, Chanel Amber
Garg, Shweta
Geist, Derik Josef
Graumann, Martin P.
Green, Thomas John

Hammad, Walid Mohamed Fawzy Mohamad
Hollander, Susan Lindsay
Hornsby, Kristan Michelle

Jacob, Sneha
Judhan, Rudy Jewan

Khan, Nadia N.
Kotsko, Jude David
Kumar, Mukesh
Kupferberg, David Howard
Lastrapes, Scott Christopher
Lee, Brent Robert
Lenahan, Susan Ellen
Liubicich, Jeffrey Felice
Lull, Lisa Schiller

McBeth, Ryan Kent
McLeod, Nathanael David
Moczygemba, Roger Michael
Mohiuddin, Atif Zaher
Moufarrege, Ghassan Toufic

Neidhardt, Jessica Marie
Nicolwala, Hormuz Adil
Onuigbo, Sunny Nduka

Papani, Ravikanth
Parrino, Michael Patrick Howard
Pickett, Jason Raine

Randazzo, William Thoburn
Rathore, Sulaiman Aziz
Reinsel, Tom E.
Rothman, Richard Brian
Rouse, Eden Maria

Saenz, Monica Lisa
Sanjeevi, Arunkumar
Sargent, Donald Lee
Schulman, Rebecca Lauren
Schwartz, Andrew William
Shmookler, Aaron Daniel
Shou, Jason
Sreeharikesan, Suppiramaniam
Swackhammer, Randy Lee

Tan, Mary Aldrene Lee
Vu, Hang Thanh

Waldeck, Kate Marie
Ward, Richard James
Wardell, Richard Mark
Wynn, Vander Mark
Zelenak, Timothy Gerald
REACTION APPLICANTS WHOSE LICENSE HAS NOT BEEN ACTIVE FOR
MORE THAN ONE YEAR - Physician

Chesnut, Joy Cruz
Elbash, Ahmad Feras
Petty, Gary Joe
Teferra, Ethiopia

APPLICANT FOR PERMANENT LICENSURE – Podiatric Physician

Bosia, Kathryn June

APPLICANTS FOR PERMANENT LICENSURE – Physician
Approve pending receipt of PICF Assessment Fee

Musa, Abdullahi Mohamad Mukhtar
Peralta, Brannon Phillip Dumag
WEST VIRGINIA BOARD OF MEDICINE
LICENSURE COMMITTEE AGENDA

November 11, 2017

CALL TO ORDER

LICENSURE COMMITTEE REVIEW AND ACTION

Approval of Minutes of September 9, 2017 meeting

Consent Order Update

Securo, Anthony Todd

APPEARANCES

1. Kocher, Robert Paul  11:15 a.m.
2. Davidson, Amy Alise  11:30 a.m.

LUNCH BREAK

3. Harris, Robert Roy  12:30 p.m.
4. Schindzielorz, Adam Hubert  12:50 p.m.
5. Caldwell, Scott Wilbert  1:15 p.m.
6. Halsey, Kayla Donn  1:30 p.m.

DISCUSSIONS

7. Fatenejad, Saeed
8. Abdelkarim, Ahmed Rabie
9. Guerrero, Manuel Carlos
10. Link, Gianna Joanne
11. Parsons, Michael Patrick
12. Update on Policy regarding Background Checks
13. Podiatry Scope of Practice Inquiry
14. IMLCC Update
15. Winters, Jr., Charles – Add-on
16. Carl, Beverly Ann – Add-on
17. Frank, Julia Bess – Add-on
18. Clinton, II, Gilbert Niles – Add-on
19. Cannon, Carrie Sue – Add-on
20. Musgrove, Kelsey Aleen – Add-on
A meeting of the West Virginia Board of Medicine Licensure Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 11th day of September, 2017, at 11:50 a.m.

The following Committee members were present:

Mustafa Rahim, M.D., Chair
Harry E. Duncan, Jr., M.D.
Wes Steele, M.D.

The following Committee member was absent:

Carrie Lakin, D.P.M.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Sheree J. Thompson

Dr. Rahim called the meeting to order. A motion was made by Dr. Duncan, and seconded by Dr. Steele, to approve the minutes of the September 9, 2017, Licensure Committee meeting. The motion carried.

The Committee received an update concerning the matter of Anthony Todd Securo, M.D. At its July 2017 meeting, the Board offered Dr. Securo reactivated licensure contingent upon his acceptance of a Consent Order with the following terms, conditions, limitations and restrictions: 1) Dr. Securo shall not practice pain management or work in a pain management clinic, and shall refer patients with chronic pain, as necessary, to a pain management specialist or licensed clinic; 2) In the event that Dr. Securo regains a DEA registration which permits the prescribing of schedule II and III controlled substances he shall not prescribe controlled substances to any patient at an amount more than the morphine equivalent daily dose (MEDD) of 30mg and such prescriptions shall not be for more than one (1) week of medication per procedure; 3) Prior to prescribing, administering, ordering or dispensing any controlled
substances, Dr. Securo shall detail in full, in the patient’s file, the examination performed and
diagnosis reached in the particular patient’s file. Dr. Securo shall specifically record all physical
data of the patient and detail the exact nature of his evaluation of the patient. In addition to this
requirement, Dr. Securo agrees to comply with all record keeping requirements of the Board; 4) At six month intervals after the date of entry of this Consent Order, the Board may, in its
discretion, query Dr. Securo’s controlled substance prescribing practices with the West Virginia
Board of Pharmacy’s Controlled Substance Monitoring Database and/or similar state or federal
entities in surrounding states to monitor Dr. Securo’s compliance with the prescribing restrictions
imposed by this Order; 5) Dr. Securo acknowledges that it is a best practice to chart in the
medical record the name of the chaperone and/or female staff member present whenever he
conducts a breast examination, gynecological examination, or any other medical test or procedure
which requires contact with or exposure of the breast or genitals. Dr. Securo agrees that he will
strictly comport with this practice and will always chart the name of the female staff
member/chaperone present for all such medical procedures; 6) Dr. Securo shall maintain current
and accurate contact information with the Board, including home address, preferred mailing
address, all practice addresses in West Virginia and e-mail address. Dr. Securo shall provide the
Board with any changes or additions to his contact information within 5 days of any such change;
7) Within ten days of commencing practice at any place of practice in West Virginia, and for so
long as the practice restrictions imposed by this Consent Order remain in place, Dr. Securo shall
provide a complete copy of the fully executed Consent Order, to any and all employers and places
where he practices and/or has privileges in West Virginia; 7) Dr. Securo shall appear before the
Licensure Committee on an annual basis, at the discretion of the Board, to discuss his practice of
medicine and/or his compliance with the terms of his probation or this Consent Order; and 8)
After Dr. Securo has been in active practice in West Virginia for one full year, he may petition to
the Board to modify and/or lift the practice restrictions related thereto which are imposed by this
Order. After extending the opportunity to execute the Consent Order at its September 2017
meeting, Dr. Securo entered into a Consent Order with the Board to reactivate his license with the
above terms on October 26, 2017.

Robert Paul Kocher, M.D. appeared before the Licensure Committee in support
of his application for a permanent medical license. After a thorough discussion with Dr. Kocher,
Dr. Duncan moved that the Committee recommend that the Board approve Dr. Kocher for
licensure pending receipt of the PICF assessment fee. Dr. Steele seconded the motion, and the motion carried.

Amy Alise Davidson, D.P.M. appeared before the Licensure Committee in support of her application for a permanent podiatric license after leaving her postgraduate training prior to completion in October 2009. After a thorough discussion with Dr. Davidson, Dr. Duncan moved that Dr. Davidson’s application be placed on hold pending her completion of a skills assessment by CPEP at her own expense. Dr. Steele seconded the motion, and the motion carried.

Robert Roy Harris, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Harris, Dr. Steele moved that the Committee recommend that the Board approve Dr. Harris for licensure pending receipt of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

Adam Hubert Schindzielorz, M.D. appeared with attorney representation before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Schindzielorz, Dr. Steele moved that the Committee recommend that the Board approve Dr. Schindzielorz for licensure. Dr. Duncan seconded the motion, and the motion carried.

Scott Wilbert Caldwell, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Caldwell, Dr. Duncan moved that the Committee recommend that the Board approve Dr. Caldwell for licensure. Dr. Steele seconded the motion, and the motion carried.

Kayla Dawn Halsey, M.D. appeared before the Licensure Committee in support of her application for a permanent medical license. After a thorough discussion with Dr. Halsey, Dr. Duncan moved that the Committee recommend that the Board approve Dr. Halsey for licensure. Dr. Steele seconded the motion, and the motion carried.

At its March 2017 meeting, the Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Saeed Fatenejad, M.D. Dr.
Fatenejad was requested to appear before the Committee at its May 2017 meeting, however, was unable to meet with the Committee. Dr. Fatenejad met with the Committee in July 2017. Thereafter, the Committee requested that Dr. Fatenejad take and pass the SPEX exam prior to further determination upon his application for reactivation of licensure. Dr. Fatenejad did not respond to the Committee prior to the September 2017 meeting. The Committee determined that Dr. Fatenejad’s application remain on hold and that he be given the opportunity to pass the SPEX exam or to request the withdrawal his application prior to the Committee taking final action upon his application in November 2017. Dr. Fatenejad submitted a request to withdraw his application. Dr. Steele moved to recommend that the Board permit Dr. Fatenejad to withdraw his reactivation application. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Ahmed Rabie Abdelkarim, M.D. After a thorough discussion, Dr. Duncan moved that the Committee recommend that the Board approve Dr. Abdelkarim for licensure. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Manuel Carlos Guerrero, M.D. After a thorough discussion, Dr. Duncan moved that the Committee recommend that the Board approve Dr. Guerrero for licensure. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent license of Charles Winter, Jr., M.D. After a thorough discussion, Dr. Steele moved that the Committee recommend that the Board accept the evidence of CME completion submitted by Dr. Winter as satisfactory, and approve Dr. Winter for activation of licensure pending receipt of DC license verification and receipt of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Beverly Ann Carl, M.D. After a thorough discussion, Dr. Steele moved that the Committee recommend that the Board accept the evidence of Dr. Carl’s first two years of medical school education as satisfactorily verified by the transcript of her graduating
medical school verification from the University of Pittsburgh School of Medicine and approve Dr. Carl for licensure. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Julia Bess Frank, M.D. After a thorough discussion, Dr. Steele moved that the Committee recommend that the Board approve Dr. Frank for licensure. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Gilbert Niles Clinton, II, M.D. After a thorough discussion, Dr. Duncan moved that Dr. Clinton appear before the Licensure Committee at its January 2018 meeting. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Kelsey Aleen Musgrove, M.D. After a thorough discussion, Dr. Duncan moved that Dr. Musgrove appear before the Licensure Committee at its January 2018 meeting. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Michael Patrick Parsons, M.D. Prior to the meeting, Dr. Parsons requested his application be placed on hold. It was the consensus of the Committee to allow Dr. Parson’s application to be held until further notice or until it expires.

At its May 2017 meeting, the Licensure Committee reviewed and discussed the application for reinstatement of the permanent medical license of Gianna Joanne Link, M.D. Dr. Link was requested to appear before the Committee at its July 2017 meeting. Dr. Link appeared in support of her application. After a thorough discussion with Dr. Link, the Committee moved that Dr. Link undergo a neuropsychological and audiological evaluations at the Board’s expense prior to any further determination of her application for reinstatement of her medical license, and that Dr. Link’s application be placed on hold pending receipt of reports from the evaluating physicians. At its November meeting the Committee was provided with Dr. Link’s Board approved audiological evaluation, however, information from the neuropsychological evaluating physician stated that Dr. Link left early from her first scheduled appointment and did not keep her
second scheduled appointment. It was the consensus of the Committee that Dr. Link’s application for reinstatement of licensure remain on hold pending receipt of the completed neuropsychological evaluation to be completed by a Board approved physician at Dr. Link’s expense.

The Licensure Committee discussed a request from a former licensee whose license was administratively suspended for no evidence of CME completion in June 1994. The physician requested status be changed to an expired status for the purpose of eligibility for ABFM recertification examination. The Committee also reviewed incomplete reactivation applications previously submitted by the licensee and Board correspondence informing the physician of the necessity of submitting a complete application for reactivation of licensure to change her licensure status. After a thorough discussion, the Committee instructed staff to inform the requestor that the requirements for reactivation of licensure have not changed and that a complete application for reactivation of licensure is required to change licensure status.

The Licensure Committee discussed FBI guidelines discussing the results of a criminal record check with applicants. Staff will continue to seek additional information and clarification to resolve this issue in a manner consistent with other medical Boards across the country.

The Licensure Committee reviewed a written request regarding the scope of practice for podiatric physicians. As a result of the discussion, Dr. Steele moved that staff respond to the requestor with information on the statutory scope of practice and that the procedures identified fall within the scope, depending upon the specific patient presentation.

Board staff updated the Committee on the status of Interstate Medical Licensure Compact (IMLCC) applications. The following nine applicants, listed along with their state of principal licensure, were granted permanent medical licensure through an IMLCC application between the September and November Board meetings:

<table>
<thead>
<tr>
<th>Name</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crepps, Jr., Joseph Thomas</td>
<td>WI</td>
</tr>
<tr>
<td>Garg, Narendra</td>
<td>IL</td>
</tr>
<tr>
<td>Jacobs, Richard Randall</td>
<td>IL</td>
</tr>
</tbody>
</table>
Kumar, Madhuresh
Marks, Allan Steven
Marvin, Leigh Jennifer
Pandit, Meenakshi
Rudy, George Barrett
Wantuck, James Matthew

Also, the Board has received seven requests for Letters of Qualification (LOQ) to be issued by the Board as the state of principal licensure. Of these, three applications are pending completion. Two LOQs were issued to:

Jennifer Lynn Brown, M.D.
Andrew Christian Retzinger, M.D.

Two LOQ Denials were issued to:

Adam Jared Kaplan, M.D.
Hussain El-Sayed El-khatib, M.D.

The Licensure Committee reviewed and discussed the list of applications which did not require an appearance or individualized discussion, which includes fifty-eight initial medical doctor applications two reactivation of medical license applications. There are also three applications pending receipt of the mandatory PICF assessment fee and one application pending receipt of Illinois license verification and the PICF assessment fee. Dr. Duncan moved that the Committee recommend that the Board approve the applicants for licensure as indicated. Dr. Steele seconded the motion, and the motion carried. A list of all approved applicants are incorporated into these minutes.

The Licensure Committee determined by consensus to adjourn, there being no further business.

[Signature]
Mustafa Rahim, M. D.
Chair of the Licensure Committee
APPLICANTS FOR PERMANENT LICENSURE - Physicians

November 13, 2017

Abraham, Andrew Jacob
Brown, Sherry Bernita
Chinbuah, Egya Nyameke
Collins-Gibbard, Roslinde Mary
Corman, Adam Ransford
DeBerry, Jason Wayne
Diamond, Amy R.
Din, Farid Ud
Doumit, Jimmy
Dunkle-Blatter, Stephanie Erlynn
Eckert, Thomas Francis
Egli, Kenneth James
Fogle, William Albert
Fowler, Mariecken Verspoor
Friegling, Ted David
Gates, James Lawrence
Gounder, Celine Rani
Gross, Michal
Howell, Keith Andre
Levine, Myron Arnold
Marcovici, Iacob
Marcuccio, Elisa
McLain, Kelly Lynn
McQuade, Elizabeth Anne
Mehyar, Lubna Shafiq Naim
Mitros, Mark Michael
Monastiriotis, Spyridon
Moore, Fletcher Brady
Murphy, Dewey Scott

Oneal, Cindy Marie
Overton, III, Clayton Justus
Patel, Paulina Narendra
Patterson, Eltanya Angelita
Piris, Adriano
Poole, Edward Charles
Pulido, Bernard Joseph Navarro

Ramos, Peter
Reddy, Srikar Thummala

Sadia, Umama
Salas, Stephanie Ann
Sasidharan Nirmala, Nishanth
Scott, IV, Frank Duncan
Seaman, David Edward
Shanlikian, George Harry
Sharif, Khalid Saud
Sheikh, Zubeda Begum
Shiflett, Brandon Scott
Slusher, Laura Austin

Turner, Meghan Thompson
Turnier, Anne-Marie

Verhoeven, Pieter Alexander
Vucelik, Andrew William

Weir, Robert Edward Peter
White, Kevin Daniel
Whitley, Danielle
Williams, Carlin Arel
Yeh, David Li-Ten
Young, Rebekah Lynn

**REACTIVATION APPLICANT WHOSE LICENSE HAS NOT BEEN ACTIVE FOR MORE THAN ONE YEAR – Physicians**

Hutchens, Kelli Ann
Samanie, David Keith

**APPLICANT FOR PERMANENT LICENSURE – Physicians**

Approve pending receipt of PICF Assessment Fee

Jovanovich, Alexander
Moore, Carisa Hines
Wang, Clifford Tau

**APPLICANT FOR PERMANENT LICENSURE – Physician**

Approve pending receipt of Illinois license verification and PICF fee

McCollester, Sarah M.
WEST VIRGINIA BOARD OF MEDICINE
LICENSED COMMITTEE AGENDA
January 6, 2018

CALL TO ORDER

LICENSED COMMITTEE REVIEW AND ACTION

Approval of Minutes of November 11, 2017 meeting

APPEARANCES

1. Kooshkabadi, Ali
   10:45 a.m.
2. Clinton, II, Gilbert Niles
   11:00 a.m.
3. Musgrove, Kelsey Aleen
   11:20 a.m.
4. Mees, Sandor
   11:40 a.m.

LUNCH BREAK

DISCUSSIONS

5. Munkalia, Ibrahim Abu
6. Hendrix, Tina Maria
7. Shrestha, Bipin Lal
8. Alwaal, Amjad Hassan
9. Haranath, Sai Praveen
10. Seemaladinne, Nirupama
11. Link, Gianna Joanne
12. Update on Policy regarding Background Checks
13. IMLCC Update
14. Fromberg, David – add-on
15. Lake, Dianah Thelma – add-on
16. Paidipaty, Butchi Babu – add-on
A meeting of the West Virginia Board of Medicine Licensure Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 6th day of January 2018, at 10:30 a.m.

The following Committee members were present:

Mustafa Rahim, M.D., Chair
Harry E. Duncan, Jr., M.D.
Carrie Lakin, D.P.M.
David A. Mullins, M.D.
Wes Steele, M.D.
Russell O. Wooton, Esq.

The following Committee member was absent:

Rev. Janet Harman

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Deputy Director/General Counsel
Greg S. Foster, Board Attorney
Sheree J. Thompson

Dr. Rahim called the meeting to order. Dr. Rahim welcomed new Committee Members Dr. Mullins and Mr. Wooton. A motion was made by Dr. Duncan, and seconded by Dr. Steele, to approve the minutes of the November 11, 2017, Licensure Committee meeting. The motion carried.
Ali Kooshkabadi, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Ali, Dr. Lakin moved that the Committee recommend that the Board approve Dr. Ali for licensure. Dr. Duncan seconded the motion, and the motion carried.

At its November 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Kelsey Aileen Musgrove, M.D. Dr. Musgrove was requested to appear before the Committee at its January 2018 meeting. Dr. Musgrove appeared before the Licensure Committee. After a thorough discussion with Dr. Musgrove, Dr. Lakin moved that the Committee recommend that the Board approve Dr. Musgrove for licensure. Mr. Wooton seconded the motion, and the motion carried.

Sandor Mecs, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Mees, Dr. Steele moved that Dr. Mees’ application be placed on hold pending receipt of additional information. Dr. Mullins seconded the motion, and the motion carried.

At its November 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Gilbert Niles Clinton, II, M.D. Dr. Clinton was requested to appear before the Committee at its January 2018 meeting, however, Dr. Clinton notified the Committee he was unable to attend due to a work schedule conflict and requested his appearance be rescheduled. Dr. Duncan moved that Dr. Clinton appear before the Licensure Committee at its March 2018 meeting. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Ibrahim Abu Munkalia, M.D. After a thorough discussion, Dr. Steele moved that the Committee recommend that the Board approve Dr. Munkalia
for licensure pending receipt of the PICF assessment fee. Dr. Duncan seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent license of Tina Marie Hendrix, M.D. After a thorough discussion, Dr. Mullins moved that the Committee recommend that the Board accept the evidence of CME completion submitted by Dr. Hendrix as satisfactory and approve Dr. Hendrix for activation of licensure. Mr. Wooton seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Bipin Lal Shrestha, M.D. After a thorough discussion, Dr. Duncan moved that the Committee recommend that the Board approve Dr. Shrestha for licensure pending receipt of the PICF assessment fee. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Amjad Hassan Alwaal, M.D. After a thorough discussion, Dr. Steele moved that the Committee recommend that the Board approve Dr. Alwaal for licensure. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Sai Praveen Haranath, M.D. After a thorough discussion, Dr. Duncan moved that the Committee recommend that the Board approve Dr. Haranath for licensure. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Nirupama Seemaladinne, M.D. After a thorough discussion, Mr. Wooton moved that the Committee recommend that the Board approve Dr. Seemaladinne for licensure pending receipt of satisfactory evidence of completion of
her third year of accredited postgraduate training and the PICF assessment fee. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of David B. Fromberg, M.D. After a thorough discussion, Dr. Mullins moved that the Committee recommend that the Board approve Dr. Fromberg for licensure. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Dianah Thelma Lake, M.D. After a thorough discussion, Dr. Lakin moved that the Committee recommend that the Board approve Dr. Lake for licensure. Mr. Wooton seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Butchi Babu Paidipaty, M.D. After a thorough discussion, Dr. Steele moved that Dr. Paidipaty appear before the Committee at its March 2018 meeting. Dr. Lakin seconded the motion, and the motion carried.

At its May 2017 meeting, the Licensure Committee reviewed and discussed the application for reinstatement of the permanent medical license of Gianna Joanne Link, M.D. Dr. Link was requested to appear before the Committee at its July 2017 meeting. Dr. Link appeared in support of her application. After a thorough discussion with Dr. Link, the Committee moved that Dr. Link undergo a neuropsychological and audiological evaluations at the Board’s expense prior to any further determination of her application for reinstatement of her medical license, and that Dr. Link’s application be placed on hold pending receipt of reports from the evaluating physicians. At its November meeting the Committee was provided with Dr. Link’s Board approved audiological evaluation, however, information from the neuropsychological evaluating physician stated that Dr. Link left early from her first scheduled appointment and did not keep her second scheduled appointment. It was the consensus of the
Committee that Dr. Link’s application for reinstatement of licensure remain on hold pending receipt of the completed neuropsychological evaluation to be completed by a Board approved physician at Dr. Link’s expense. As no response was received from Dr. Link, Dr. Duncan moved that her application remain on hold pending additional information or follow-up action by Dr. Link. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee discussed FBI guidelines for communicating with applicants regarding the results of a criminal record check. The Board had previously been advised that communications about record check results required the applicant to appear in person at the Board. Mr. Spangler reported that staff met with representatives of the WV State Police in December 2017 on this issue. As a result, the Board’s process for communicating with applicants regarding criminal record background checks has expanded to include contact via skype if the applicant can provide proof of identity during the video communication.

Board staff updated the Committee on the status of Interstate Medical Licensure Compact (IMLCC) applications. The following six applicants, listed along with their state of principal licensure, were granted permanent medical licensure through an IMLCC application between the November 2017 and January 2018 Board meetings:

- Campbell, John David  
  AZ
- Collins, James Ivan Collins  
  AZ
- Hasenyager, Carol Ann  
  WI
- Prabhu, Maitreyi Ramrao  
  AZ
- Toh, Benjamin Teong  
  IL
- Youssef, Nancy Hany  
  IL

During this period two Letters of Qualification (LOQs) were issued to:

Jacqueline Joy Krause, M.D.
Sean Michael Rogers, M.D.

Three LOQ applications are pending.
The Licensure Committee reviewed and discussed the list of applications which did not require an appearance or individualized discussion, which includes fifty-six initial medical doctor applications, five reactivation of medical license applications and one initial podiatric physician application. Dr. Mullins moved that the Committee recommend that the Board approve the applicants for licensure as indicated. Dr. Duncan seconded the motion, and the motion carried. A list of all approved applicants are incorporated into these minutes.

The Licensure Committee determined by consensus to adjourn, there being ADJOURNMENT no further business.

Mustafa Rahim, M. D.
Chair of the Licensure Committee
APPLICANTS FOR PERMANENT LICENSURE - Physicians

January 8, 2018

Abou Mrad, Romy
Adam, Nazir Ahmed
Akiko, Michelle N.
Almutairi, Heba
Aly, Jasmine M.
Amin, Md. Shahrriar
Bakinde, Nicolas
Bandak, Ghassan Salim Issa
Beaver, Thomas Richard
Benning, Ethan Michael
Bernard, Jonathan David
Boils, Christie
Bondalapati, Naveen Kumar Reddy
Boyd, Jr., Charles Edward
Bronstein, Yulia
Clayton, Frederick Paul
Colletti, Richard
Deppe, Scott Allen
Doyle, John Joseph
Fadakar, Paul K.
Glass, Daniel Matthew
Gonzalez, Celsio Emil
Grover, Robert
Gyulai, Ferenc Emil
Hennigar, Randolph Alexander
Hinkle, David Miguel
Huff, Mary Wood
Jahan, Ishrat
Johnson, Ryan Edward
Kapoor, Mohit
Khan, Akhtar Sultan
Kollins, Kevin Michael
Krish, Sonia Nagesh
Kuperman, Michael Benjamin
Laferla, John James
Lasure, Benjamin Lee
Le, Andrew Toan
Lee, Allen Sanghun
Mastores, Scott Frank
McCarthy, Paul Joseph
Middleman, Edward Louis
Nandwani, Veena
APPLICANTS FOR PERMANENT LICENSURE – Physicians cont.

Pratt, Alan Goodale
Rezai, Ali R.
Rich, Jr., David Howard
Roberts, Edmond Alan Vernon
Roy, Aviral
Saraiya, Rupali
Scott, Grant Robert
Singh, Kartik
Singh, Meenu
Stavens, Gerasimos Stefanatos
Stern, Joel Benjamin
Stokes, Robert Fraser
Vidwans, Malavika Aniruddha
Zavaleta, Ernesto Gustavo

REACTIVATION APPLICANT WHOSE LICENSE HAS NOT BEEN ACTIVE FOR MORE THAN ONE YEAR – Physicians

Bardes, Allison Grace
Bardes, James Migliaccio
Someshwar, Jean Ruth
Strafford, James Craigmiles
Uihlein, Thomas William

APPLICANT FOR PERMANENT LICENSURE – Podiatric Physician

Yeaman, William Edward Daniel
WEST VIRGINIA BOARD OF MEDICINE
LICENSURE COMMITTEE AGENDA
March 10, 2018

CALL TO ORDER

LICENSURE COMMITTEE REVIEW AND ACTION

Approval of Minutes of January 6, 2018 meeting

APPEARANCES

1. Paidipaty, Butchi Babu
   10:45 a.m.
2. Clinton, II, Gilbert Niles
   11:00 a.m.
3. Cheyuo, Cletus
   11:15 a.m.

LUNCH BREAK

4. Ali, Khurram Nawaz
   1:00 p.m.

DISCUSSIONS

5. Mohan, Kinila T.
6. Martinez, Jr., Jesus Alfredo
7. Ajjarapu, Esther S. V.
8. AlJasmi, Mohammed Abdulaziz
9. Letts, Gary Saint Aubyn
10. Alasil, Tarek
11. Molinar, Alldo Antonio
12. Radwan, Walid Mohamed
13. Parsons, Michael Patrick
14. Mecs, Sandor
15. Link, Gianna Joanne
16. Davidson, Amy Alise
17. HB 4027 Creating an Education Permit for MD Resident
18. SB 499 Requiring One Year of Certain Approved Postgraduate
   Clinical Training for Persons with Foreign Medical Degrees (two
   years total instead of three)
19. SB576 Relating to PFCF fee extension
20. SB313 Waiving Occupational Fees and Licensing Requirements for
    Certain Low-Income Individuals, Military Families, and Young
    Workers
21. IMLCC Update
22. Zellman, David Julius – Add-on
23. Grolman, Dennis Michael – Add-on
24. Jackson, Linda Carol – Add-on
25. Board Policy Review on Applicant’s License Verifications – Add-on
WEST VIRGINIA BOARD OF MEDICINE
Licensure Committee Meeting Minutes
March 10, 2018

A meeting of the West Virginia Board of Medicine Licensure Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 10th day of March 2018, at 10:55 a.m.

The following Committee members were present:

Mustafa Rahim, M.D., Chair
Rev. Janet Harman
Carrie Lakin, D.P.M.
David A. Mullins, M.D.
Wes Steele, M.D.

The following Committee members were absent:

Harry E. Duncan, Jr., M.D.
Russell O. Wooton, Esq.

The following Staff members were present:

Mark A. Spangler, Executive Director
Jamie S. Alley, Deputy Director/General Counsel
Greg S. Foster, Board Attorney
Sheree J. Thompson, Supervisor of Licensing

Dr. Rahim called the meeting to order. Dr. Rahim welcomed new Committee Member Rev. Harman. A motion was made by Dr. Lakin, and seconded by Dr. Steele, to approve the minutes of the January 6, 2018, Licensure Committee meeting. The motion carried.
Butchi Babu Paidipaty, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Paidipaty, Rev. Harman moved that the Committee recommend that the Board approve Dr. Paidipaty for licensure pending receipt of his satisfactorily amended application for licensure to include information that the Board received from third party sources and which he inadvertently omitted from the application form because it was previously provided by others and payment of the PICF assessment fee. Dr. Lakin seconded the motion, and the motion carried.

At its November 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Gilbert Niles Clinton, II, M.D. Dr. Clinton was initially requested to appear before the Committee at its January 2018 meeting, which was rescheduled to the March 2018 Licensure Committee meeting due to a January work schedule conflict. After a thorough discussion with Dr. Clinton, Dr. Mullins moved that Dr. Clinton’s application be placed on hold pending his submission of an amended application for the Committee’s review. Dr. Lakin seconded the motion, and the motion carried.

Cletus Cheyuo, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Cheyuo, Dr. Steele moved that the Committee recommend that the Board approve Dr. Cheyuo for licensure. Dr. Lakin seconded the motion, and the motion carried.

Khurram Nawaz Ali, M.D. appeared before the Licensure Committee in support of his application for reactivation of his permanent medical license. After a thorough discussion with Dr. Ali, Dr. Lakin moved that the Committee recommend that the Board approve Dr. Ali for activation of licensure. Dr. Steele seconded the motion, and the motion carried.
The Licensure Committee reviewed and discussed the application for a permanent medical license of Kinila T. Mohan, M.D. After a thorough discussion, Dr. Mullins moved that the Committee recommend that the Board approve Dr. Mohan for licensure pending receipt of the PICF assessment fee. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for reactivation of the permanent license of Jesus Alfredo Martinez, Jr., M.D. After a thorough discussion, Dr. Steele moved that the Committee recommend that the Board accept the evidence of CME completion submitted by Dr. Martinez as satisfactory and approve Dr. Martinez for activation of licensure pending receipt of the PICF assessment fee. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Ester S. V. Ajjarapu, M.D. After a thorough discussion, Dr. Mullins moved that the Committee recommend that the Board approve Dr. Ajjarapu for licensure. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Mohammed Abdulaziz AlJasmi, M.D. After a thorough discussion, Dr. Mullins moved that the Committee recommend that the Board approve Dr. AlJasmi for licensure. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Gary Saint Aubyn Letts, M.D. After a thorough discussion, Dr. Mullins moved that the Committee recommend that the Board approve Dr. Letts for licensure. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Tarek Alasil, M.D. After a thorough discussion, Dr. Lakin
moved that Dr. Alasil appear before the Committee at its May 2018 meeting. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Alddo Antonio Molinar, M.D. After a thorough discussion, Dr. Mullins moved that Dr. Molinar appear before the Committee at its May 2018 meeting. Rev. Harman seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed correspondence received from Walid Mohamed Radwan regarding his October 8, 2015 Consent Order, which restricted his medical practice to his residency. Rev. Harman moved that Dr. Radwan appear before the Committee at its May 2018 meeting. Dr. Steele seconded the motion, and the motion carried.

At its November 2017 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Michael Patrick Parsons, M.D. Prior to the meeting, Dr. Parsons requested his application be placed on hold. It was the consensus of the Committee to allow Dr. Parson’s application to be held in abeyance per the applicant’s request. Dr. Parsons has since submitted a request to withdraw his application for licensure. Dr. Steele moved to recommend that the Board permit Dr. Parsons to withdraw his application. Dr. Lakin seconded the motion, and the motion carried.

At its January 2018 meeting, Sandor Mecs, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with the applicant, Dr. Mecs’ application was placed on hold pending receipt of additional information. Thereafter, Dr. Mecs submitted a request to withdraw his application for licensure. Dr. Steele moved to recommend that the Board permit Dr. Mecs to withdraw his application. Dr. Lakin seconded the motion, and the motion carried.
The Licensure Committee reviewed and discussed the application for a permanent medical license of David Julius Zelman, M.D. After a thorough discussion, Dr. Mullins moved that the Committee recommend that the Board approve Dr. Zelman for licensure. Dr. Steele seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Dennis Michael Grolman, M.D. After a thorough discussion, Dr. Mullins moved that Dr. Grolman appear before the Committee at its May 2018 meeting. Rev. Harman seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Linda Carol Jackson, M.D. After a thorough discussion, Dr. Lakin moved that the Committee recommend accepting Dr. Jackson’s work history as satisfactory and approve for licensure based on the following factors: (1) practicing in the US territory of Virgin Islands since March 2011; (2) fully and actively licensed in two other states; (3) the applicant is ABMS certified; and (4) she passed the SPEX exam in July 2013. Dr. Steele seconded the motion, and the motion carried.

At its November 2017 meeting, Amy Alise Davidson, D.P.M. appeared before the Licensure Committee in support of her application for a permanent podiatric license after leaving her postgraduate training prior to completion in October 2009. After a thorough discussion with Dr. Davidson, Dr. Davidson’s application was placed on hold pending her completion of a skills assessment by CPEP at her own expense. Dr. Davidson has not responded to the letter notifying her of the request for a skills assessment. Dr. Davidson’s application remains on hold and no action was taken by the Committee.

At its May 2017 meeting, the Licensure Committee reviewed and discussed the application for reinstatement of the permanent medical license of Gianna
Joanne Link, M.D. Dr. Link appeared before the Committee at its July 2017 meeting. After a thorough discussion with Dr. Link, the Committee moved that Dr. Link undergo neuropsychological and audiological evaluations, at the Board’s expense, prior to any further determination on her application for reinstatement of medical licensure, and that Dr. Link’s application be placed on hold pending receipt of reports from the evaluating physicians. At its November meeting the Committee was provided with Dr. Link’s Board approved audiological evaluation, however, information from the neuropsychological evaluating physician stated that Dr. Link left early from her first scheduled appointment and did not keep her second scheduled appointment. It was the consensus of the Committee that Dr. Link’s application for reinstatement of licensure remain on hold pending receipt of the completed neuropsychological evaluation to be completed by a Board approved physician at Dr. Link’s expense. As no response was received from Dr. Link through March of 2018, Dr. Link’s application remains on hold and no action was taken by the Committee.

Board staff updated the Licensure Committee on the status of HB 4027 Creating an Education Permit for Allopathic Physician Residents; SB 499 Requiring Two Years of Certain Approved Postgraduate Clinical Training for Persons with Foreign Medical degrees; SB 576 Relating to Patient Injury Compensation Fund and SB 313 Waiving Occupational Fees and Licensing Requirements for Certain Low-Income Individuals, Military Families, and Young Workers.

Board staff informed the Committee that the completion of several pending medical license applications is being delayed by the lengthy turnaround time for another medical board to provide primary source verification of its licensees status to our Board. Staff confirmed with staff from the other board that verifications are currently being processed approximately 11 weeks after receipt. Staff advised the Committee that the Executive Director would send a letter to the other board regarding concerns with the delayed response time and its impact on applicants.
Board Staff updated the Committee on the status of Interstate Medical Licensure Compact (IMLCC) applications. The following eight applicants listed along with their state of principal licensure were granted permanent medical licensure through an IMLCS application between the January and March 2018 Board meetings:

Jennifer Kim Bogan  
Cedric Emden Davis, II  
Mark Nutter Griffith  
Johara Adam Hassan  
Vikas Jain  
Gary Stewart Meredith  
James Albert Meserow  
Troy Lane Potthoff

AZ  
AZ  
WI  
IL  
IL  
AZ  
IL  
NE

During this period three Letters of Qualification were issued to:

Mohamad Bassam Haffar  
Camille Marie Ristroph  
Krzysztof Maciej Sobieraj

During this period one request for Letter of Qualification was denied:

Jamie Lee Cichon

The Licensure Committee reviewed and discussed the list of applications which did not require an appearance or individualized discussion, which includes fifty-seven initial medical doctor applications, two initial medical doctor applications pending receipt of the PICF assessment fee, and two initial podiatric physician applications. Dr. Mullins moved that the Committee recommend that the Board approve the applicants for licensure as indicated. Dr. Steele seconded the motion, and the motion carried. A list of all approved applicants are incorporated into these minutes.

The Licensure Committee determined by consensus to adjourn, there being ADJOURNMENT no further business.

Mustafa Rahim, M.D.  
Chair of the Licensure Committee
APPLICANTS FOR PERMANENT LICENSURE - Physicians

March 12, 2018

Almradi, Amro
Anderson, Stuart Douglas
Argila, Jaime Sa Moreira De
Ashfaq, Sadaf
Aynampudi, Achuta Ram
Banyas, Jeffrey Brian
Boone, Brian Anthony
Chow, Joseph Lin-Yun
Critelli, Kristen Marie
Elchico, Melanie Chang
Ernst, Karen Darfler
Fetty, Lora Beth
Gever, Deborah Lynn
Griffin, Peter Louis
Ha, Tuan Xuan
Hasou, Dona Tawfig
Heng, Tia
Hidalgo, Richard Manalo
Hoffman, Todd Mark
Housmand, Farnaz
Iremashvili, Viacheslav
Islam, Tina
Kim, Susanne Sugeen
Labahn, Jacob Keenan
Levin, Andrew David
Lewis, Diana Patricia
Misiaszek, Richard Alexander
Morgan, Alicia Ann
Musser, William Stuart
Newbold, Vivien Louise Ruth
Ojha, Ajitesh
Olin, Annette Corinne
Onwochei, Francis Onwudimisho
Oppong, Cletus Kobiah
Patel, Rahul Nileshkumar
Patrick, Casey Dawn
Patterson, James Willis
Purnell, Phillip Ryan
Rached, Kristina Kimberley
Rehman, Azeem Abdul
Ross, Gary Dean
APPLICANTS FOR PERMANENT LICENSURE – Physicians cont.

Salim, Jawad Ahmed
Seidler, Molly Elizabeth
Shaffiq, Asad
Soltani, Sanaz Nicky
Stakic, Josif
Tambakis-Odom, Constance Roseann
Thapa, Jhapat Bahadur
Tomlin, Brett Alan
Trecha, Gregory Todd
Venard, Neil Alden
Wanko, Sam Obi
Whipp, Kylen Pierce
Whyte, Authrine Chevanne
Wilson, Jon Daniel
Woodard, Jr., William Leicester
Yates, Paul Andrew

APPLICANT FOR PERMANENT LICENSURE – Physicians
Approve pending receipt of PICF Assessment Fee

Valdez Murua, Honorio Manuel
Zeb, Irfan

APPLICANT FOR PERMANENT LICENSURE – Podiatric Physicians

Allen, Amber Marie
Hollnagel, JennaLouise
WEST VIRGINIA BOARD OF MEDICINE

LICENSENCE COMMITTEE AGENDA with Add-ons

May 5, 2018

CALL TO ORDER

LICENSENCE COMMITTEE REVIEW AND ACTION

Approval of Minutes of March 10, 2018 meeting

APPEARANCES

1. Tarek Alasil - reschedule  July 2018
2. Richard Mendel  11:00 a.m.
3. Aldo Antonio Molinar  11:15 a.m.
4. Cynthia Erin Prather  11:30 a.m.

LUNCH BREAK

5. Dennis Michael Grolman - reschedule  July 2018
6. Matthew Steven Zell  1:00 p.m.
7. Walid Mohamed Radwan  1:15 p.m.
   Paulo Artur Fontes - Add-on  1:30 p.m.

DISCUSSIONS

8. Kim Bridgette Jones-Fearing
9. Mark Daniel Fierro
10. Benjamin Jay Bryant
11. Gregory Arnold Nelcamp
12. John Willard Horns
13. Justin Alexander Saunders
14. Kevin Gerard Hibbett
15. Podiatric Scope of Practice Inquiry
16. HB 4027 Creating an Education Permit for MD Resident
17. SB 499 Requiring One Year of Certain Approved Postgraduate
   Clinical Training for Persons with Foreign Medical Degrees (two
   years total instead of three)
18. SB576 Relating to PICF fee extension
19. IMLCC Update
20. Mohammed Ahmed Abdel Salam Osman - Add-on
21. Diana Whiteman Muldrow - Add-on
22. Gita Haddadi - Add-on
23. David Douglas Schram - Add-on
24. Christopher Paul Graviss - Add-on
25. Casey John Jason - Add-on
WEST VIRGINIA BOARD OF MEDICINE
Licensure Committee Meeting Minutes
May 5, 2018

A meeting of the West Virginia Board of Medicine Licensure Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 5th day of May 2018, at 10:55 a.m.

The following Committee members were present:

Mustafa Rahim, M.D., Chair
Carrie Lakin, D.P.M.
David A. Mullins, M.D.
Russell O. Wooton, Esq.

The following Committee members were absent:

Harry E. Duncan, Jr., M.D.
Rev. Janet Harman

The following Staff members were present:

Mark A. Spangler, Executive Director
Jamie S. Alley, Deputy Director/General Counsel
Greg S. Foster, Board Attorney
Sheree J. Thompson, Supervisor of Licensing

Dr. Rahim called the meeting to order. A motion was made by Dr. Lakin, and seconded by Dr. Mullins, to approve the minutes of the March 10 2018, Licensure Committee meeting. The motion carried.

At its March 2018 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Tarek Alasil, M.D. Dr. Alasil was
requested to appear before the Committee at its May 2018 meeting, however, was unable to change his work schedule. Dr. Alasil’s appearance has been rescheduled for the Committee’s July 2018 meeting.

Richard Mendel, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Mendel, Dr. Mullins moved that Dr. Mendel’s application be placed on hold pending resolution of the suspended-lapsed status of his Michigan medical license and receipt of additional information. Dr. Lakin seconded the motion, and the motion carried.

At its March 2018 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Aldo Antonio Molinar, M.D. Dr. Molinar was requested to appear before the Committee at its May meeting. After a thorough discussion with Dr. Molinar, Dr. Mullins moved that the Committee recommend that the Board approve Dr. Molinar for licensure pending payment of the PICF assessment fee. Dr. Lakin seconded the motion, and the motion carried.

Cynthia Erin Prather, M.D. appeared before the Licensure Committee in support of her application for reactivation of her permanent medical license. After a thorough discussion with Dr. Prather, Dr. Lakin moved that Dr. Prather’s application be placed on hold pending receipt of notification of passage of the Special Purpose Licensing Exam (SPEX) and receipt of a proposed plan for reentry to practice. Dr. Mullins seconded the motion, and the motion carried.

At its March 2018 meeting, the Licensure Committee reviewed and discussed the application for a permanent medical license of Dennis Michael Grolman, M.D. Dr. Grolman was requested to appear before the Committee at its May 2018 meeting, however, he was unexpectedly unavailable. Dr. Grolman’s appearance was rescheduled for the July 2018 Committee meeting.
Matthew Steven Zell, M.D. appeared before the Licensure Committee in support of his application for a permanent medical license. After a thorough discussion with Dr. Zell, Dr. Mullins moved that the Committee recommend that the Board approve Dr. Zell for licensure. Mr. Wooton seconded the motion, and the motion carried.

Walid Mohamed Radwan, M.D. appeared before the Licensure Committee to discuss a matter related to his current Consent Order. After its discussion with Dr. Radwan, the Committee took no action.

Paulo Artur Chaves Fontes, M.D. appeared before the Licensure Committee in support of his application for a medical school faculty license. After a thorough discussion with Dr. Fontes, Dr. Lakin moved that the Committee recommend that the Board approve Dr. Fontes for medical school faculty licensure pending receipt of the original sealed verification of his training. Mr. Wooton seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the applications for a permanent medical license of Mark Daniel Fierro, M.D., Kim Bridgett Jones-Fearing, M.D., Christopher Paul Graviss, M.D., John Willard Horns, M.D., and Casey John Jason, M.D. After a thorough discussion of each application, Dr. Lakin moved that the Committee recommend that the Board approve Drs. Fierro, Jones-Fearing, Graviss, Horns, and Jason for licensure. Dr. Mullins seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the applications for a permanent medical license of Diana Whiteman Muldrow, M.D. and David Douglas Schram, M.D. After a thorough discussion of both applications, Dr. Lakin moved that the Committee recommend that the Board approve Drs. Muldrow and Schram for licensure pending receipt of the PICF assessment fee. Dr. Mullins seconded the motion, and the motion carried.
The Licensure Committee reviewed and discussed the applications for reactivation of the permanent license of Kevin Gerard Hibbett, M.D. and Justin Alexander Saunders, M.D. After a thorough discussion of both applications, Dr. Mullins moved that the Committee recommend that the Board accept the evidence of CME completion submitted by Drs. Hibbett and Saunders as satisfactory and approve Drs. Hibbett and Saunders for activation of licensure pending receipt of the PICF assessment fee. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Gita Haddadi, M.D. After a thorough discussion, Mr. Wooton moved that the Committee recommend that the Board accept Dr. Haddadi’s medical school education verification from Isfahan University in Iran as satisfactorily verified and approve her for licensure based on the following factors: there is currently no diplomatic relationship between the Iranian and US governments; Isfahan University has not complied with the requests for verification of education from the FCVS; and in accordance with current Board policy, two of Dr. Haddadi’s classmates have submitted notarized letters attesting to graduating from medical school with her. Dr. Lakin seconded the motion, and the motion carried.

The Licensure Committee reviewed and discussed the application for a permanent medical license of Mohammed Ahmed Abdel Salam Osman, M.D. Dr. Osman requested early licensure prior to the next scheduled Board meeting on July 9, 2018 because his fellowship begins July 1, 2018. As an international medical graduate he will complete his third year of residency by June 30, 2018. Accordingly, the Committee took no action and Dr. Osman’s application will be pending approval at the July Board meeting.

The Licensure Committee reviewed and discussed the applications for a permanent medical license of Benjamin Jay Bryant, M.D. and Gregory Arnold Nelcamp, M.D. After a thorough discussion, Dr. Mullins moved that Drs. Bryant and Nelcamp
appear before the Committee at its July 2018 meeting. Mr. Wooton seconded the motion, and the motion carried.

Two separate inquiries were made by podiatric physician licensees relating to the supervision of hyperbaric oxygen wound treatment by podiatric physicians. The Committee informed the staff to respond that the podiatric scope of practice is outlined in the Medical Practice Act, and the matter of hyperbaric oxygen therapy supervision as a local practice credentialing issue.

Board staff informed the Licensure Committee that the passage of HB 4027 Creating an Education Permit for Allopathic Physician Residents will require Rules to be drafted to allow for issuance of Resident Education Permits. The passage of SB 499 Requiring Two Years of Certain Approved Postgraduate Clinical Training for Persons with Foreign Medical degrees (instead of three) becomes effective June 7, 2018, and SB 576 Relating to Patient Injury Compensation Fund was extended the effective period through the 2021 renewal period. SB 313 Waiving Occupational Fees and Licensing Requirements for Certain Low-Income Individuals, Military Families, and Young Workers did not pass during the regular legislative session.

Board Staff updated the Committee on the status of Interstate Medical Licensure Compact (IMLCC) applications. The following eight applicants listed along with their state of principal licensure were granted permanent medical licensure through an IMLCS application between the March and May 2018 Board meetings:

- John David Harrington, NE
- Heather Dawn Hawthorne, KS
- Omar Krad, IL
- Jane Eleanor Lykins, AZ
- Rastislav Osadsky, AZ
- Lee Douglass Roberson, AL
- Adam Justin Rodos, IL
- Diya Hassan Tantawi, WI
During this period four Letters of Qualification were issued to:

Samir Agarwal
Wesley Lee Asbury, Jr.
Sean Thomas Keesee
Hang Thanh Vu

During this period two requests for Letter of Qualification were denied due to ineligibility:

Ronald Jay Innerfield
Stephen Ray Smith

The Licensure Committee reviewed and discussed the list of applications which did not require an appearance or individualized discussion, which includes seventy-seven initial medical doctor applications, five initial medical doctor applications pending receipt of the PICF assessment fee, one reactivation of medical licensure and two initial pediatric physician applications. Dr. Mullins moved that the Committee recommend that the Board approve the applicants for licensure as indicated. Dr. Lakin seconded the motion, and the motion carried. A list of all approved applicants are incorporated into these minutes.

The Licensure Committee determined by consensus to adjourn, there being no further business.

ADJOURNMENT

[Signature]
Kenneth Dean Wright, P.A.-C.
Acting Chair of the Licensure Committee
APPLICANTS FOR PERMANENT LICENSURE - Physicians

May 5, 2018

Anil Agarwal
Farzad Amiri
Soon Bahrami
Cortney Rae Ballengee
Elizabeth Marianne Bass
Bonny Lorraine Beck
Katherine Marie Beckett
Michael D. Berven
Anthony Michael Briningstool
Benjamin Keith Brooks
Thomas Darrell Carico
Antonios Emanuel Chryssos
Craig Daniel Clark
Mircea N. Coca
Neil Russell Copeland
Jonathan David Cuda
Heman Kirit Dave
Marek Tadeusz Didluch
Susan Victoria Ellor
Cherie Darlene Ertha
Kirmanj Muhammad Faraj
Linda Ann Friehling
Gayle Ann Galan
Juanita Garces
Salwa Morcos Gendi
Christopher Alan Gisler
Kenneth Alan Griggs
Priyadarshan Gupta
Shipra Gupta
Srilekha Sudha Hota
Bruce Oliver Hough
Ronald Jay Innerfield
Vishal Hitendrabhai Jariwala
Russell Oliver Kozik
Richard Scott Krupkin
Elizabeth Jane May
Bruce McNeil Milburn, Jr.
Stephen Lawrence Miller
Melissa Ann Moore
Marco Naguib
Suman Narasimhamurthy
APPLICANTS FOR PERMANENT LICENSURE – Physicians cont.

Arbi Nazarian
Matthew David Nicholls
Matthew David Nitz
Orestis Pappas
Claire Elizabeth Paxton
David Matthew Paxton
Lucas Benjamin Payor
Colleen Megan Pettrey
Behdod Poushanchi
Apoorv Prasad
Wasiq Faraz Rawasia
Travis Logan Rearick
Andrew Mark Reibach
Syed Muhammad Azfar Rizvi
Brian Edwin Rose
Neil Bruce Rosenshein
Amit Arun Sangave
Mahdis Sarrafi
Katherine Blaney Seachrist
Sonya Colleen Seccuro
Rohan Vipulkumar Shah
Marlana Renee Sheridan
Robert Paul Smith
Anthony Francis Steratore
Levi Daniel Stevens
Suraj Suku
Bonnie Heather Templeton
Parthasarathy Deenadayalan Thirumala
Jacklyn Bichthuy Tran-Nguyen
Sean Robert Tubens
Wallisa Tejarnette Vaughn
Jeffrey Lawrence Werchowski
Philip Matthew Yargosz
Yosaf Zeyed
Sasa Zivkovic
Candace Foley Zubricky

APPLICANT FOR REACTIVATION OF PERMANENT LICENSURE –
Physician:

Sean Matthew Porbin
APPLICANTS FOR PERMANENT LICENSURE – Physicians
Pending Receipt of the PICF Fee:

Toks Ebiyon Macarthy
Mark Daniel Miller
Matthew Scott Ruyle
Terry Gene Sanders, II
David Shi

APPLICANT FOR PERMANENT LICENSURE
– Podiatric Physicians:

Jeffrey Addison Michael
Daniel Robert Wright
Legislative Committee
Meeting Agendas and Minutes
CALL TO ORDER

Approval of Minutes

- May 7, 2017

Agenda Items:

- Legislative Rules 11 CSR 1A, 11 CSR 1B and 11 CSR 5
- Legislative Rule 11 CSR 6
- Review of Provision Relating to Advertising in 11 CSR 1A
- Senate Bill 1014 / Proposed Amendments to 11 CSR 1B
- Special Meetings for Legislative and Emergency Rule-Making
- Licensure Fees
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 9th day of July, 2017, at 10:15 a.m.

The following Committee members were present:

Beth Hays, M.A., Chair
Ahmed Faheem, M.D.
K. Dean Wright, P.A.-C.

The following Committee members were absent:

Reverend O. Richard Bowyer
David Mullins, M.D.

The following staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Jamie C. Frame

The following consultant was present:

Andy Wessels

Ms. Hays called the meeting to order. Dr. Faheem moved that the minutes of the May 7, 2017 meeting be approved. Mr. Wright seconded, and the motion carried.

Mr. Spangler reported to the Committee that the Board’s amended legislative rules 11 CSR 1A, Licensing and Disciplinary Procedures for Physicians and Podiatric Physicians, 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, and Continuing Education for Physician Assistants, and 11 CSR 5, Dispensing of Prescription Drugs by Practitioners, became effective on July 5, 2017.
Mr. Spangler reported that Board staff have filed Notice of a Comment Period on Proposed Rule 11 CSR 6, *Continuing Education for Physicians and Podiatrists*, with the Secretary of State’s Office. The Board is accepting written comments on the proposed amendments to this rule through 4:30 p.m. on Friday, July 21, 2017. To date, no comments have been received.

Mr. Spangler reported that the State of Ohio currently allows for patient testimonials to be included in physician advertising. Our current Board rules provide that advertising which uses patient testimonials is not in the public interest and therefore is prohibited. It is possible that during the 2018 legislative session there may be efforts to permit the use of patient testimonials in physician advertising in West Virginia. Board staff will research surrounding state rules and regulations regarding the utilization of patient testimonials in advertising and will report back to the Committee at a future meeting.

Mr. Spangler reported to the Committee that Board staff have worked diligently on proposed amendments to 11 CSR 1B, *Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants*. The proposed amendments to this rule include changing “supervising physician” to “collaborating physician” and “supervision” to “collaboration” throughout, removing the requirement that a physician assistant maintain national certification through the National Commission on Certification of Physician Assistants, granting physician assistants global signature authority, modernizing the continuing education language to be consistent with the continuing education language for medical doctors and pediatric physicians, and provides that if an initial license is granted within thirty days prior to licensure renewal, the license renewal be waived for that cycle. Additionally, the proposed rule modifies sections relating to requirements that a collaborating physician be on-site. Following discussion, Mr. Wright moved that modifications be made to the proposed rule as follows: (1) the words “and/or orders” be added to the end of 9.5.c.3., so that this section reads as “Do not resuscitate forms and /or orders.” and (2) that 9.5.f. be added to read as follows
“Governmental forms as permitted by law including, but not limit to, parking applications for mobility impaired persons.” Mr. Wright further moved that the Committee recommend that the Board approve the revision of 11 CSR 1B as modified, and authorize staff to move forward with promulgation of the rule. Dr. Faheem seconded, and the motion carried.

Danny Scalise, Executive Director of the West Virginia State Medical Association, joined the meeting as a guest at this time.

Mr. Spangler reported that action will need to be taken with regard to 11 CSR 6, Continuing Education for Physicians and Podiatrists, and 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants, prior to the September 2017 meeting. Dr. Faheem moved that the Committee request that the Board authorized the Legislative Committee to act on behalf of the Board regarding 11 CSR 6 and 11 CSR 1B, and to convene special meetings to do so as appropriate. Mr. Wright seconded, and the motion carried.

Mr. Spangler reported the P. Bradley Hall, M.D., Executive Director of the West Virginia Medical Professional Health Program (WVMPHP), has requested that the Board of medicine licensure fees be increased in the amount of $100.00 per licensee per renewal cycle to assist in funding the WVMPHP. Any increase in licensure fees would require legislative action. This matter will be presented to the Executive / Management Committee for consideration.

There being no further business to consider, Dr. Faheem moved that the meeting be adjourned. Mr. Wright seconded, and the motion carried.

ADJOURNMENT

Beth Hays, M.A.
Chair of the Legislative Committee
WEST VIRGINIA BOARD OF MEDICINE
Legislative Committee Agenda
July 24, 2017 at 4:30 p.m.

CALL TO ORDER

- Legislative Rulemaking
  - 11 CSR 6 – Continuing Education for Physicians and Podiatrists

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 24th day of July, 2017, at 4:30 p.m.

The following Committee members attended the meeting via teleconference:

Beth Hays, M.A., Chair
Reverend O. Richard Bowyer
Ahmed Faheem, M.D.
David Mullins, M.D.

The following Committee member was absent:

K. Dean Wright, P.A.-C.

The following staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Jamie C. Frame

Ms. Hays called the meeting to order.

Mr. Spangler reported to the comment period with regard to proposed amendments to 11 CSR 6, Continuing Education for Physicians and Podiatrists, ended at 4:30 p.m. on Friday, July 21, 2017. There were no comments received regarding the proposed amendments to the rule. Ms. Alley reported to the Committee that the following modifications were requested by the Secretary of State’s Office:

1. The sunset provision language in 1.5. was changed from “This rule shall terminate and have no further force or effect on July 1, 2027” to “This rule shall terminate and have no further force or effect upon the expiration of five years from its effective date.”; and
2. Corrections to rule formatting.
Additionally, staff identified minor typographical errors regarding numbering, which it recommends be corrected in the agency approved version of the rule.

Following discussion, Dr. Faheem moved that the Committee authorize Board staff to move forward with the Agency Approved Filing of the Rule with modifications requested by the Secretary of State’s Office and with the typographical corrections as described. Dr. Mullins seconded, and the motion carried.

There being no further business to consider, the meeting adjourned.

Beth Hays, M.A.
Chair of the Legislative Committee
CALL TO ORDER

Agenda Items:

- Legislative Rule 11 CSR 1B
- Medical Liability Review Panel

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Legislative Committee Minutes
August 21, 2017

A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 21st day of August, 2017, at 4:30 p.m.

The following Committee members attended the meeting via teleconference:

    Beth Hays, M.A., Chair
    Reverend O. Richard Bowyer
    Ahmed Faheem, M.D.
    David Mullins, M.D.

The following Committee member was present:

    K. Dean Wright, P.A.-C.

The following staff members were present:

    Mark A. Spangler, M.A.
    Jamie S. Alley, Esq.
    Jamie C. Frame

The following staff member attended the meeting via teleconference:

    Andrew R. Wessels

Ms. Hays called the meeting to order.

Mr. Spangler reported that the purpose of today's meeting is to consider and review the comments that were received with regard to the Board's proposed amendments to 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants. Prior to today's meeting a copy of each of the comments that were received was made available to Board members to review.
Mr. Spangler reported that on July 11, 2017, board staff filed a Notice of Comment Period on Proposed Rule 11 CSR 1B. The Notice established a thirty-day comment period on the proposed rule, which concluded at 4:30 p.m. on Thursday, August 10, 2017. During the comment period, the Board received eighteen written comments from the following individuals and/or entities:

<table>
<thead>
<tr>
<th>Commenter</th>
<th>Date Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. John P. Lubicky, MD</td>
<td>July 25, 2017</td>
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<tr>
<td>2. Cara Sedney</td>
<td>July 25, 2017</td>
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<tr>
<td>3. Thomas S. Miller, MD</td>
<td>July 25, 2017</td>
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<td>4. Richard Vaglienti, MD</td>
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<td>5. Diane Rader, PA-C</td>
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<td>6. Robert Johnstone, MD</td>
<td>July 25, 2017</td>
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<tr>
<td>7. Michelle Abe, DO</td>
<td>July 26, 2017</td>
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<tr>
<td>8. Ashley Clay, MS, PA-C</td>
<td>July 26, 2017 and August 8, 2017</td>
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<tr>
<td>9. Alok Gopal, MD, DBMA</td>
<td>July 26, 2017</td>
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<tr>
<td>10. Yashica Shah</td>
<td>July 26, 2017</td>
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<tr>
<td>11. Tahira Masood, MD</td>
<td>July 29, 2017</td>
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<tr>
<td>12. Mary Gainer, MD</td>
<td>August 1, 2017</td>
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<tr>
<td>13. Alan W. Cashwell, MD</td>
<td>August 2, 2017</td>
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<tr>
<td>14. West Virginia Association of Physician</td>
<td>August 9, 2017</td>
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<tr>
<td>Assistant Board of Directors</td>
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<tr>
<td>15. Nicholas Vance, MS, PA-C</td>
<td>August 10, 2017</td>
</tr>
<tr>
<td>16. American Academy of PAs</td>
<td>August 10, 2017</td>
</tr>
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Following a thorough review and consideration of each of the comments received, Mr. Wright moved that the Committee approve the Board’s proposed rule 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants, with the
following modifications: (1) include that admission orders are within the scope of physician assistant signatory authority if permitted by the place of practice in 9.5.a.; (2) amend 9.5 to include subdivision 9.5.g. durable medical equipment in the enumerated list of documents within the signature authority of a physician assistant; (3) clarify that physician assistants are authorized to engage in appropriate collaboration with other treatment team members in 9.9; (4) change “supervision” to “collaboration” in 10.5.d.; (5) change “supervisory” to “collaborative” in 10.8; (6) insert the word American in front of Academy of Family Physicians in 13.2.a.; and (7) insert the word American in front of Academy of Family Physicians in 13.2.b. Mr. Wright further moved that the Committee ratify the Summary of Comments Received Regarding Proposed Amendments to 11 CSR 1B and Response of the West Virginia Board of Medicine as set forth in the attachment to these minutes and authorize staff to move forward with the Agency Approved Filing of the Rule as attached hereto. Dr. Mullins seconded, and the motion carried.

Mr. Spangler reported to the Committee that he and Mr. Wessels attended the Joint Committee on Health meeting held earlier today, where he presented information concerning the Board’s research into Medical Liability Review Panels to the Committee. During his presentation, Mr. Spangler reiterated that the Board of Medicine is not the appropriate entity to house a Medical Liability Review Panel. Board staff will continue to monitor any future legislative efforts regarding this issue, and will report back to the Committee as necessary.

There being no further business to consider, Reverend Bowyer moved that the meeting be adjourned. Mr. Wright seconded, and the motion carried.

Beth Hays, M.A.
Chair of the Legislative Committee
August 22, 2017

SUMMARY OF COMMENTS RECEIVED REGARDING PROPOSED AMENDMENTS TO 11 CSR 1B AND RESPONSES OF THE WEST VIRGINIA BOARD OF MEDICINE

On July 11, 2017, the West Virginia Board of Medicine filed a Notice of Comment Period on a Proposed Rule, 11 CSR 1B. The Notice established a thirty day comment period on the proposed rule, which concluded at 4:30 p.m. on August 10, 2017. During the comment period, the Board received eighteen comments from the following sixteen individuals/entities:

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<td>13. Alan W. Cashwell, MD</td>
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<tr>
<td>14. West Virginia Association of Physician Assistant Board of Directors</td>
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<td>15. Nicholas Vance, MS, PA-C</td>
<td>August 10, 2017</td>
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<td>16. American Academy of PAs</td>
<td>August 10, 2017</td>
</tr>
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</table>

1 Copies of all comments received by the Board are attached hereto.
The Board has reviewed all comments received, and on August 21, 2017, the following responses were authorized. A copy of this summary is being provided to each commenter. The Board extends its sincere appreciation and gratitude to all individuals and groups who took the time to review and comment upon the proposed amendments to 11 CSR 1B.

**General Comments**

One commenter indicated that she feels that while SB1014 and the Board’s proposed amendments are a step in the right direction, the regulatory hoops involved in practicing as a physician assistant in West Virginia are burdensome, and disadvantage physician assistants as compared to nurse practitioners. By way of a follow-up submission, this commenter also indicated that she supports the statement of the AAPA regarding Optimal Team Practice, which supports the removal of laws and regulations that require a PA to have and/or report a supervisory, collaborating or other specific relationship with a physician in order to practice. This commenter does not believe that SB1014 or the Board’s proposed amendment to 1B reflect this ideal. [8]

One commenter supports the proposed amendments, as it is a “burden to the daily lives of physicians trying to keep their head above the water on a daily basis taking care of patients.” [9]

Another commenter, who indicates that she has experience working with excellent physician assistants, is concerned that increased independence and less stringent oversight of physician assistants, particularly in rural areas where there are fewer specialists and a need for a vast fund of medical knowledge to treat a variety of medical conditions, will not benefit patients. [12]

While also offering some specific proposed modifications to the proposed amendments, another commenter “supports and commends this significant revision and modernization of PA practice in West Virginia.” [16]

**Response:** The Board appreciates the broad spectrum of general comments it has received. The changes which increase physician assistant independence, and which are incorporated in the Board’s amendments, implement the provisions of SB1014. This bill sought to ensure parity between physician assistants and advance practice registered nurses, specifically with regard to prescribing and signature authority. No changes were made to the Board’s proposed rule amendments based upon these comments.

**Specific Comments**

**Modification of Terminology from Supervising/Supervising Physician to Collaboration/Collaborating Physician and the Definition of Collaboration (Section 2)**

Section 2 of the proposed amended rule incorporates SB1014 terminology into the definitions section to facilitate the transition from the term “supervision” to the term “collaboration” in the

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2 The bracketed number reference provided after a comment summary identifies the commenter by reference to the itemized list at the beginning of this summary.
description of the working relationship between a physician assistant and a physician. Collaboration is defined in subdivision 2.1.i as:

2.1.i. "Collaboration" means overseeing the activities of, and accepting responsibility for, the medical services rendered by a physician assistant. Constant physical presence of the collaborating physician is not required as long as the collaborating physician and physician assistant are, or can be, easily in contact with one another by telecommunication. Collaboration does not require the personal presence of the collaborating physician at the place or places where services are rendered.

Two commenters expressed serious concerns about changing the physician/physician assistant dynamic from “supervision” to “collaboration.” The first commenter indicated that she does not support the changes as written, specifically to the extent that the amendments change “the role of physicians from ‘supervising’ to ‘collaborating.’” This commenter contends that “being legally responsible for, and overseeing, PA is, by definition, ‘supervision.’ She further opines that the change in terminology “diminishes the very real responsibility of the physician supervisor.” [2] The second commenter indicated that changing the term “supervising” to “collaborating” “implies that we as physicians would also be asking their opinions on our own patients,” and that this legislation is “leading down a dangerous path” towards independent practice by physician assistants. This commenter considers the proposed amendments, and the bill upon which they are based, as diminishing patient safety by permitting expanded practice by physician assistants. [7]

Without specific reference to the change in terminology from supervising to collaborating, a third commenter wrote that it would be dangerous for patient safety to permit physician assistants to practice without physician supervision. [10]

Response: The transition from “supervision” to “collaboration” was decided by the legislature during the first special session and incorporated into SB1014. The proposed amendments to Series 1B reflect this statutory change. No changes were made to the Board’s proposed rule amendments based upon these comments.

A fourth commenter wrote that the “definition of ‘collaboration’ is essentially the same as ‘supervision.’” There should be definition at beginning defining collaboration as other states have defined it. 2.1.i and 10.1 definitions of collaboration could be added, as the current draft definition in 2.1.B is not reflective of the term collaboration.” This commenter did not offer any specific proposed language for the modification of the definition of “collaboration.” [14]

Response: Subdivision 2.1.b is the definition of alternate collaborating physician, not the definition of collaboration. Subdivision 2.1.i, which the commenter favorably references, provides a definition for collaboration. It is accurate that the definition of collaboration is similar to the current definition of supervision. The proposed definition of collaboration incorporates the statutory definition of collaboration adopted by the legislature in SB1014. No changes were made to the Board’s proposed rule amendments based upon this comment.
Reporting NCCPA Status on License Renewal (Sections 5)

Pursuant to SB1014, PAs are no longer required to maintain continuous NCCPA certification to maintain licensure with the Board, and NCCPA certification is no longer required to renew a license. The Board’s proposed amended rule comports with this change in statute. As set forth in Section 5, NCCPA certification is no longer required for renewal. The Board’s amended rule does require, however, that a PA report his or her NCCPA status on his or her renewal application.

In pertinent part, Subsection 5.6, provides:

5.6. The Board’s physician assistant renewal application form shall include, and applicants must provide, the following information:

***

5.6.f. Documentation of current and continuous The renewal applicant’s NCCPA certification status;

One commenter “finds the general requirement for PAs to report their NCCPA certification status and the mandate to do so as a license renewal applicant unnecessary and inequitable.” The commenter points out that physicians are not required to report board certification status for license renewal, and equates NCCPA certification to Board certification. The commenter proposes that subdivision 5.6.f be stricken from the proposed amendments in its entirety. [16]

Response: While the Board appreciates this thoughtful comment, it does not consider the collection of NCCPA certification status unnecessary or inequitable. Unlike, physicians, who are not required to be board certified for licensure, a physician assistant must hold NCCPA certification to obtain an initial license to practice as a physician assistant in West Virginia. Collection of information regarding continuing certification status permits the Board to maintain accurate information on licensees after initial licensure, and ensures that the appropriate professional designation is utilized by the Board when identifying physician assistants on the Board’s website, and elsewhere. (A physician assistant with NCCPA certification may use the professional designation of “P.A.-C. whereas a physician assistant without current certification uses the professional designation of “P.A.”). No changes were made to the Board’s proposed rule amendments based upon this comment.

Reporting Loss of NCCPA Status (Section 6)

For the PA profession, certification status determines whether a PA uses the professional designation of PA or PA-C, and the Board uses the appropriate designation to identify licensees on the Board’s website and in other correspondence. Section 6 is amended to remove the provision that a license terminates if NCCPA certification is lost. However, the amendment maintains the requirement that a licensee report loss of NCCPA certification.
Proposed Section 6 provides:

§11-1B-6. Termination of License Reporting of NCCPA Certification Status.

6.1. A licensed physician assistant must immediately notify the Board, in writing, upon losing NCCPA certification if the licensee is no longer certified by the NCCPA. Failure to immediately report the loss of NCCPA certification shall constitute unprofessional, dishonorable and/or unethical conduct which may result in the imposition of discipline against the licensee. Notification to the Board shall be considered to have occurred as required if such notification is received within one five business days of the effective date of the loss of end date of the licensee’s NCCPA certification.

6.2. If a licensee is no longer certified by the NCCPA, his or her license automatically terminates without notice to the physician assistant the licensee shall utilize the professional designation of PA, and shall immediately cease use of the professional designation of PA-C.

6.3. Upon loss of NCCPA certification and/or license termination, a physician assistant must immediately cease practicing as a physician assistant and notify all supervising physicians of the loss of NCCPA certification, licensure and Board authorization to practice. All practice agreement authorizations issued by the Board automatically terminate with the expiration of NCCPA certification and the termination of licensure.

6.4. A physician assistant becomes eligible for reinstatement of a terminated license once he or she becomes recertified by the NCCPA.

One commenter proposes that subsection 6.1 be stricken in its entirety. The commenter writes that the inclusion of a mandatory reporting requirement, which makes failure to report loss of NCCPA certification a disciplinary offense, could have the potential to affect the livelihood of a physician assistant who unintentionally failed to make the requisite report. [16]

Response: The Board understands the concerns raised by the commenter, but has determined that immediate reporting of loss of NCCPA certification is sufficiently important to support the reporting requirements set forth in subsection 6.1. A physician assistant’s certification status may change for a variety of reasons, including revocation of NCCPA certification for disciplinary reasons. Timely reporting of the loss of NCCPA certification, in certain circumstances involving disciplinary revocations, may assist the Board in discharging its responsibility to protect the public. At a minimum, it permits the Board to maintain up-to-date and accurate professional designation information on all physician assistant licensees. After thoughtful consideration of this comment, the Board has concluded that the equities lie in favor of maintaining the provisions of subsection 6.1 without further amendment.
Summary of Comments Received Regarding Proposed Amendments to 11 CSR 1B and Responses of the WVBOM Page 6 of 13

Physician Assistant Scope of Practice/Signature Authority (Section 9)

This section sets forth the general scope of practice of a physician assistant. The modifications to this section relate to the transition from the term “supervision” and its variants to “collaboration” at its variants. The amendments also incorporate the expansion of signature authority adopted by the legislature in SB1014.

One commenter asked how the term “stable condition” is “being defined” in subdivision 9.1.g. [14]

This subdivision reads:

9.1. A physician assistant shall have, as a minimum, the knowledge and competency to perform the following core duties under with appropriate physician supervision collaboration:

***

9.1.g. Make decisions regarding data gathering and appropriate management and treatment of patients being seen for the initial evaluation of a problem or the follow-up evaluation of a previously diagnosed and stabilized condition:

Response: The language of subdivision 9.1.g has not been amended, and has been part of Series 1B for several years. The term “stabilized condition” is defined at the practice level in collaboration with the practice location and collaborating physician.

The commenter also indicated that the language of 9.1.q. “has not been completed the way it is written” and the “and” at the end of the subdivision should be removed. [14]

Response: Subsection 9.1 begins an enumerated list of core duties physician assistants should be educated and trained to perform with appropriate physician collaboration. Subdivision 9.1.q. is the next to last subdivision of this enumerated list (Subdivision 9.1.r is the last subdivision). The referenced “and” is properly included. No changes were made to the Board’s proposed rule amendments based upon this comment.

The Board received three comments regarding Subsection 9.5, which relates to physician assistant signature authority.

Proposed subsection 9.5 provides:

9.5. Unless prohibited by the place of practice, a physician assistant may sign orders to be countersigned later by his or her supervising physician as set forth in an authorized practice agreement. A physician assistant may provide an authorized signature, certification, stamp, verification, affidavit or endorsement on documents within the scope of his or her practice, including, but not limited to the following:
9.5.a. Unless prohibited by the place of practice, a physician assistant may sign orders within the scope of his or her practice, including discharge orders for patients personally treated by the physician assistant;

9.5.b. Medical certifications for death certificates if the physician assistant has received training on the completion thereof;

9.5.c. Instruments related to scope and limitation of treatment, including:

9.5.c.1. Physician orders for life sustaining treatment;

9.5.c.2. Physician orders for scope of treatment and

9.5.c.3. Do not resuscitate forms and/or orders.

9.5.d. Disability medical evaluations and/or certifications for persons with disabilities in support of a hunting or fishing permit;

9.5.e. Utility company forms or certifications requiring maintenance of utilities regardless of ability to pay; and

9.5.f. Governmental forms as permitted by law including, but not limited to parking applications for mobility impaired persons.

One commenter opposes giving physician assistants any signature authority and suggests that this change, in concert with other set forth in SB1014 would result in “legalized quackery” and physician assistants, nurse practitioners and psychologists replacing or supplanting physicians. [11].

Response: The signature authority set forth in the proposed amendments to Section 9 are consistent with the expansion of signature authority as set forth in SB1014, and are appropriate to the education, training and experience of physician assistants.

One commenter asked whether the provisions of Section 9.5 authorize physician assistants to sign orders for durable medical equipment, as authority to sign orders for DME is not explicitly set forth in subsection 9.5. [14]

Response: As set forth in the subsection, this is not intended to be an exhaustive list. However, for clarity, and in consideration of this comment, the Board has modified its proposed amendments to include durable medical equipment as subdivision 9.5.f.

Another commenter suggests modifying Subdivision 9.5.a to include “admission and/or discharge” orders to clarify that PAs may admit and discharge patients they personally treat. The commenter asserts that the language would be helpful if a suspended CMS rule that limits reimbursement to
practitioners authorized to admit patients by state law/rules and hospital bylaws is re instituted in the future. [15]

Response: Having considered this comment, the Board has elected to modify the language of subdivision 9.5.a as follows:

9.5.a. If permitted by the place of practice, a physician assistant may sign orders within the scope of his or her practice, including admission and/or discharge orders for patients that the physician assistant has been involved in treating:

The modified language makes it clear physician assistants may sign orders, including admission and discharge orders within the PA’s scope of practice and as permitted by the practice location and so long as the physician assistant has participated in the treatment of the patient. This ensures maximum flexibility at the practice level, which is the appropriate place for such a determination to be made.

One commenter suggested specific modification to Subsection 9.9. [15]

The Board’s proposed amended 9.9 reads:

9.9. A physician assistant may not independently delegate a task assigned to him or her by his or her supervising collaborating physician to another individual.

The commenter proposes that this section be modified as follows:

9.9. A physician assistant may not independently delegate a task assigned to him or her by his or her supervising collaborating physician to another individual. Nothing shall prohibit a PA from delegating orders including but not limited to: registered nurses, licensed practical nurses, medical technicians, medical assistants, radiology technologists, etc.

The commenter suggests that the proposed modified language “may help clarify that a PA may provide orders to be carried out by nursing and/or ancillary staff within their education and training.”

Response: Subsection 9.9 is designed to deal with tasks delegated by a collaborating physician to a physician assistant. The addition of language relating to the delegation of orders to this section would be confusing. The Board has concluded that lawfully issued orders of a PA will be delegated as appropriate at the practice location through regular processes, and specific language would not operate to enhance the authority of lawfully issued orders. However, and in light of this comment, the Board has considered whether subsection 9.9 could be read to constrain full collaboration with other team members, and has therefore modified subsection 9.9 to reflect the ability, and necessity, of a physician assistant appropriately engaging and collaborating with other health care providers. The modified language is:
9.9. A physician assistant may not independently delegate a task assigned to him or her by his or her supervising collaborating physician to another individual. Nothing in this subsection shall prohibit a physician assistant from engaging in appropriate collaboration with other treatment team members.

Responsibilities of the Collaborating Physician (Section 10)

The Board received two comments regarding Subdivision 10.5.d. Proposed 10.5.d provides:

10.5.d. Periodic, in person, education and review sessions discussing specific conditions, protocols, procedures and specific patients shall be held by the supervising collaborating physician for the physician assistant under his or her supervision in accordance with the terms of an authorized practice agreement. For physician assistants in the first six months of an authorized practice agreement and who have practiced as a physician assistant for less than one year, such periodic in person meetings must occur monthly. The supervising collaborating physician and physician assistant must retain written documentation of these meetings.

One commenter asks whether the “in person” requirement of this subsection applies to all physician assistants, or only to PAs who have been practicing for less than one year. [8]

Another commenter raised a similar question about this un-amended portion of this section (erroneously referencing subdivision 10.5.d as 12.5.d). The commenter asks: “is the extent of ‘collaboration’ between the PA and Physician automatically transitioning to a frequency to be defined at the practice level once the 6 month parameter has been met for newly practicing PAs (without further petitioning the board)” [14].

Response: The provisions of subdivision 10.5.d referenced by the commenters are currently in effect, and have not been modified by the Board’s proposed amendments. The in-person requirement for periodic education and review sessions applies to all physician assistants, and can transition from monthly after the first year of practice without petitioning the Board. No changes were made to the Board’s proposed rule amendments based upon these comments.

A commenter identified one instance of “supervision” that has not been amended to ‘collaboration’ in subdivision 10.5.d and one instance of “supervisory” that has not been amended to “collaborative” in subsection 10.8. [14]

Response: The Board appreciates the commenter identifying these needed modifications, and the Board’s agency approved version of 11 CSR 1B incorporates modifications to 10.5.d and 10.8 to change supervision/supervisory to collaboration/collaborative.

Prescribing Authority for Physician Assistants (Section 12)
Summary of Comments Received Regarding
Proposed Amendments to 11 CSR 1B and
Responses of the WVBOM
Page 10 of 13

The Board's proposed amendments to Section 12 implement the expansion in prescribing authority authorized by SB1014 to ensure parity between PAs and APRNs. All of the comments the Board received regarding this section related to the expansion in prescribing authority. Proposed Subsection 12.3 provides:

12.3. On an annual basis, the Board shall approve and publish on its website a list classifying pharmacologic categories of all drugs which physician assistants are prohibited from prescribing. This list shall, at a minimum, prohibit physician assistants from prescribing:

12.3.a. Schedules I and II of the Uniform Controlled Substances Act;

12.3.b. Greater than a non-refillable seventy-two hour supply of a drug listed under Medications listed under Schedule III of the Uniform Controlled Substances Act are limited to a 30 day supply without refill;

12.3.c. Antineoplastics and chemotherapeutic agents used in the active treatment of cancer, and

12.3.d. Radio-pharmaceuticals, general anesthetics, and radiographic contrast materials; and

12.3.e. General Anesthetics.

One commenter indicated that "if the board is contemplating making it easier for PAs to prescribe opioids, I'm totally against it," and concluded that PAs "should not be given the right to prescribe narcotics for chronic pain." [3] A second commenter requested that the Board "consider replacing the opioid prescribing portion with even stricter limitations." [7] A third commenter indicated that, based upon her personal knowledge and a comparison of the education received by physicians and physician assistants, it is "not ok to allow them [PAs] to prescribe meds without a physician overseeing their work." This commenter is concerned about drug interactions which may occur pursuant to unsupervised PA prescribing. [10] A fourth commenter also disfavors an expansion in physician assistant, nurse practitioner and/or psychologist prescribing authority. [11]

Response: The prescribing authority incorporated into Subsection 12.3 is based upon statute, and is consistent with the education, training and experience of the physician assistant profession. These amendments do not authorize physician assistants to prescribe Schedule II narcotic/opioid medications. To prescribe medications within the physician assistant formulary, a PA must have an authorized practice agreement with a collaborating physician which delegates prescribing authority. No changes were made to the Board's proposed rule amendments based upon this comment.

Another commenter commented that physician assistants should have all of the privileges that a nurse practitioner has for medications and procedures and any other modality." [4]
Summary of Comments Received Regarding Proposed Amendments to 11 CSR 1B and Responses of the WVBOI

Page 11 of 13

Response: SB1014 and the associated proposed amendments to Series 1B provides prescribing parity between PAs and APRNs. No changes were made to the Board's proposed rule amendments based upon this comment.

Another commenter advocates permitting physician assistants to write for Schedule IIs, and eliminating the prohibition on no refills for Schedule III medications. This commenter works with a PA and APRN, who he believes could appropriately prescribe Schedule II medications. He further suggests that expanding prescriptive authority would help fill a critical need for psychiatric patients. [13]

Response: SB1014 prohibits PAs from prescribing Schedule II medications, and prohibits refills for Schedule III medication. The Board's proposed amendments to Series 1B are in accord with this statutory prohibition.

An additional commenter wrote: "12.3 and 12.3.B conflict with each other, we feel the first appears most appropriate." [14]

Draft Response: Subsection 12.3 indicates that the Board will create an exclusionary formulary regarding the categories of medications and drugs physician assistants may not prescribe. This subsection then identifies, and enumerates, in subdivisions, the categories of medications which physician assistants are prohibited from prescribing by statute, and which must be part of the exclusionary formulary. Subsection 12.3 and 12.3.b are not in conflict. No changes were made to the Board's proposed rule amendments based upon this comment.

Continuing Education (Section 13)

The Board received three comments regarding continuing education. Proposed Subsections 13.1 and 13.2 provide:

13.1. Successful completion of a minimum of one hundred hours of continuing education satisfactory to the Board during the preceding two-year period is required for the biennial renewal of a physician assistant license.

13.2. Types and categories of continuing medical education satisfactory to the Board for physician assistants are:

13.2.a. Continuing medical education designated as Category I by either the American Medical Association, American Academy of Physician Assistants or the Academy of Family Physicians.

13.2.b. Continuing medical education designated as Category II by either the American Medical Association, American Academy of Physician Assistants or the Academy of Family Physicians. A maximum of fifty hours of continuing medical education credit may be awarded for this category of activity.
13.2.c Obtaining a master’s degree from an accredited program of instruction for physician assistants within one year of the expiration of an initial license. A maximum of one hundred hours of continuing education credit may be awarded for this category of activity, but a physician assistant shall only be awarded ninety-seven hours of credit if the physician assistant is a mandatory participant in the continuing education activity described in subsection 13.3 of this rule.

13.2.d. Passing a recertification examination by the NCCPA during the reporting period. A maximum of one hundred hours of continuing medical education credit may be awarded for this category of activity, but a physician assistant shall only be awarded ninety-seven hours of credit if the physician assistant is a mandatory participant in the continuing education activity described in subsection 13.4 of this rule.

There are no other types or categories of continuing education activity for physician assistants satisfactory to the Board.

One commenter sought clarification regarding whether the Academy of Family Physicians is the same as the American Academy of Family Physicians. [5]

**Response:** These are the same entity. For clarity, the agency approved version of the rule includes modifications to 13.2.a and 13.2.b which insert the word American in front of Academy of Family Physicians.

One commenter indicated that it is important to have strict standards of continuing education of physician assistants. [12]

**Response:** The Board agrees that health professionals, including physician assistants, should have high continuing education standards which provide for meaningful and useful continuing education. The Board believes the requirements of this section are consistent with that goal. Accordingly, no changes were made to the Board’s proposed rule amendments based upon this comment.

Another commenter suggested that the Board modify this section to accept proof of NCCPA certification in satisfaction of CME requirements (except for the three hour drug diversion best practice prescribing CME). This commenter would also modify 13.2.b to remove the requirement that a licensee may only obtain 50 hours of credit for Category II CME, permitting all CME to be Category II. The commenter suggests that such a modification would also eliminate the need for 13.2.d. The commenter also suggest permitting submission of proof of NCCPA certification in satisfaction of CME would eliminate the need for a PA to notify the Board within five business days of losing NCCPA certification. [15]

**Response:** While the Board appreciates these comments, it has elected not to incorporate any of the proposed suggestions. The Board notes that PAs who elect to maintain NCCPA certification will need to complete the same number continuing education hours as required by this rule, so a large number, if not all, continuing education hours will serve dual purposes for the certified PA.
Summary of Comments Received Regarding
Proposed Amendments to 11 CSR 1B and
Responses of the WVBOM
Page 13 of 13

However, now that continued certification is not a requirement of license renewal, it is important
to ensure that clear and unequivocal categories of continuing education are explicitly defined, and
which apply to all licensees, regardless of certification status. Additionally, there is a substantial
difference in Category II CME and Category I, and the Board has determined that a maximum of
50 hours of category II will be accepted per continuing education cycle. Finally, and for all of the
reasons set forth hereinabove at pages five and six, even if the Board had adopted the proposed
amendments, they would not have obviated the need for NCCPA certification status at times other
than renewal. No changes were made to the Board’s proposed rule amendments based upon these
comment.

Questions

In the form of comments, the Board also received the following questions:

“Where does the Board stand on this bill? Support or not?” [1]

Response: The Board favors permitting physician assistants to utilize their education, training
and experience to provide quality healthcare to West Virginia’s citizens as part of a health care
team and in collaboration with a physician. The Board believes that SB1014 and the Board’s
proposed amendments to Series 1B facilitate that goal.

One commenter asked whether the proposed rules would apply to “anesthesiology assistants, a
particular subcategory of physician assistants.” [6]

Response: The West Virginia Board of Medicine does not license or certify any specialty or
subspecialty of physician or physician assistant practice. A physician assistant license is a general
license to practice as a physician assistant pursuant to an authorized practice agreement and in
collaboration with a collaborating physician. The changes to Series 1B would apply to all
physician assistant license holders licensed by the Board.

A third commenter asked what the scope of PAs will be regarding medical cannabis. [8]

Response: The West Virginia Bureau of Public Health is responsible for the implementation of
the Medical Cannabis Act. It is the Board’s understanding, based upon a review of SB386, that
physicians are the only health practitioner who may register to issue certifications to patients for
the medical use of cannabis. The proposed amendments to Series 1B do not address this issue and
do not establish any role for physician assistants in the issuance of medical cannabis certifications.

In conclusion, based upon the comments received, the Board’s agency approved filing contains
seven modifications as set forth hereabove.
-----Original Message-----
From: Lubicky, John [mailto:jlubicky@hs.c.wvu.edu]
Sent: Tuesday, July 25, 2017 9:18 PM
To: Spangler, Mark A <Mark.A.Spangler@wv.gov>
Subject: New PA rules

Where does the board stand on this bill? Support or not?
Sent from my iPhone

John P. Lubicky, MD
-----Original Message-----
From: Sedney, Cara [mailto:csedney@hs.c.wvu.edu]
Sent: Tuesday, July 25, 2017 5:38 PM
To: Spangler, Mark A <Mark.A.Spangler@wv.gov>
Subject: Comment regarding 11 CSR 1B

Hello,
This is a comment regarding legislative rule 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants. I do not support the changes as written, specifically changing the role of physicians from "supervising" to "collaborating". While I recognize and support the role of PAs in the care of West Virginia's patients, being legally responsible for, and overseeing, PAs is, by definition, "supervision". While good physician/PA relationships are obviously collaborative in nature, the change in terminology diminishes the very real responsibility of the physician supervisor.
Thanks for the opportunity to comment,
Cara Sedney

Sent from my iPhone
From: Thomas [mailto:tsmillermt@gmail.com]
Sent: Tuesday, July 25, 2017 5:01 PM
To: Spangler, Mark A <Mark.A.Spangler@wv.gov>
Subject: New rules proposed by board.

Very hard for me to determine what rules are being changed. If the board is contemplating making it easier for PAs to prescribe opioids, I'm totally against it. We should be making it harder to prescribe opioids, except for treating terminal cancer pain. PAs should not be given the right to prescribe narcotics for chronic pain.

Thomas S Miller, MD
Fairmont, WV
Sent from Mail for Windows 10
Physician assistants should have all privileges that a nurse practitioner has for medication and procedures and any other modality. They should have absolute parity with ANPs.

Rick Vaglianti MD

Sent from my iPhone

On Jul 25, 2017, at 1:55 PM, WV Board of Medicine <bomnewsletter@wv.gov> wrote:

COMMENT PERIOD UNDER WAY FOR PROPOSED AMENDMENTS TO BOARD OF MEDICINE RULE 11 CSR 1B

During the First Special Session of 2017, the Legislature passed SB1014. This bill makes changes to the West Virginia Code that relate to physician assistant practice in West Virginia. SB1014 authorizes the Board of Medicine to engage in rulemaking, including emergency rule making, to implement these legislative changes. The bill was signed by Governor Justice on June 19, 2017, and becomes effective on September 7, 2017.

The West Virginia Board of Medicine is currently accepting written comments on proposed amendments to the Board’s legislative rule 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants. The proposed changes to this rule are intended to implement the provisions of SB1014, including an expansion of PA prescriptive authority and signature authority. To view the proposed rule please click here.

All comments must be received by 4:30 p.m. on August 10, 2017, and should be submitted to:

Mark A. Spangler, Executive Director
West Virginia Board of Medicine
101 Dee Drive, Suite 103
Charleston, West Virginia 25311
Mark.A.Spangler@wv.gov

Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.
Hello Mr. Spangler

I reviewed the proposal draft of 11SCR1B and had a comment with sections 13.2a and 13.2b. The section discussed where CME hrs could be obtained. The Academy of Family Physician was mentioned. I receive a monthly home study activity for 5 CME hrs a month, but use The American Academy of Family Physicians-AAFP. I did not know how specific this list will be to obtain our CME hrs. I was not sure if the two different titles were interchangeable: The Academy of Family Physicians versus The American Academy of Family Physicians. I live and work in a rural area, and don't attend many conferences. I like the home study program with AAFP. I would like the proposed bill to include the AAFP for CME hrs.

I have been a practicing PA since 1994, and have been certified by the NCCPA numerous times. I am due to take the exam next year, but realize if new bill goes into effect, will no longer need the certification. I was under impression that the CME hrs still needed to be logged under NCCPA, but reading proposal, would need to be logged or ready for audit by the WVBOM. Let me know when convenient if my understanding is correct.

Best Regards
Diane Rader, PA-C
From: Johnstone, Robert [mailto:johnstone@wvmmedicine.org]
Sent: Tuesday, July 25, 2017 2:37 PM
To: Spangler, Mark A <Mark.A.Spangler@wv.gov>
Subject: FW: Comment Period Under Way for Proposed Amendments to Board of Medicine Rule 11 CSR 1B

Does this apply to anesthesiologist assistants, a particular category of physician assistants? I know most states have them, and am not sure what rules apply to them in WV. Seems like an opportunity to better define their situation in WV.

Robert Johnstone, MD
Morgantown

From: WV Board of Medicine [mailto:comments@wvmed.gov]
Sent: Tuesday, July 25, 2017 1:30 PM
To: Johnstone, Robert
Subject: Comment Period Under Way for Proposed Amendments to Board of Medicine Rule 11 CSR 1B

**COMMENT PERIOD UNDER WAY FOR PROPOSED AMENDMENTS TO BOARD OF MEDICINE RULE 11 CSR 1B**

During the First Special Session of 2017, the Legislature passed SB1014. This bill makes changes to the West Virginia Code that relate to physician assistant practice in West Virginia. SB1014 authorizes the Board of Medicine to engage in rulemaking, including emergency rule making, to implement these legislative changes. The bill was signed by Governor Justice on June 19, 2017, and becomes effective on September 7, 2017.

The West Virginia Board of Medicine is currently accepting written comments on proposed amendments to the Board’s legislative rule 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants. The proposed changes to this rule are intended to implement the provisions of SB1014, including an expansion of PA prescriptive authority and signature authority. To view the proposed rule please click [here](#).

All comments must be received by 4:30 p.m. on August 10, 2017, and should be submitted to:

Mark A. Spangler, Executive Director
West Virginia Board of Medicine
101 Dee Drive, Suite 103
Charleston, West Virginia 25311
Mark.A.Spangler@wv.gov

Commenter 6
From: Chellie Abe <chellie.abe@gmail.com>
Date: July 26, 2017 at 10:41:37 PM EDT
To: mark.a.spangler@wv.gov
Subject: 11CSR1B

Mr. Spangler,
I am a Family Medicine Physician in Martinsburg, WV. I am very upset by the adjustments to 11CSR1B. Physician Assistants are by title - Physician Assistants. They need constant supervision. Just like Nurse Practitioners do. They do not have the training or expertise to practice independently. Their training lacks a strong science background and they work off of algorithms developed to make medicine "bread and butter". They are not able to think outside the box and their critical thinking skills are often lacking. I can't tell you the number of times I have been told that a mid levels providers at an urgent care completely missed the boat on a serious diagnosis and the patient was sent home with narcotics and antibiotics, neither of which was needed. Removing the limits on prescriptions for controlled substances will only worsen our state's current opioid epidemic. Changing the word "supervising" to "collaborating" implies that we as physicians would also be asking their opinions on our own patients. That is not going to happen. Our role is to supervise. This legislation is leading down a dangerous path where once again, like the Nurse Practitioners, an non qualified group will be working towards independent practice. The only people that are going to suffer are the patients. Our families. Please consider replacing the opioid prescribing portion with even stricter limitations. Change the wording back to supervising because that is truly what needs to be happening for safe patient care.

Sincerely,
Michelle Abe, DO
I also fully support this statement from the AAPA regarding Optimal Team Practice:

"It also supports the removal of state laws and regulations that require a PA to have and/or report a supervisory, collaborating or other specific relationship with a physician in order to practice."

I do not feel that the proposed bill neither reflects this ideal nor promotes the possibility of this becoming reality.

Kind Regards,

Ashley Clay, MS, PA-C | Physician Assistant | Medcor, Inc.
ashley.clay@medcor.com | ashley.clay@akcin.com | Medcor, Inc.
6065 Kyle Lane Huntington, WV 25702 | 12 Vision Lane Leseage, WV 25537
Huntington South Office: 304.733.8655 | Huntington North Office: 304.733.8318
Huntington South and North Fax: 815.759.5245
Mr. Spangler--

I've reviewed the amendments to the proposal regarding Physician Assistant practice. I have a few concerns with some of the amendments, in particular:

"10.5.d. Periodic, in person, education and review sessions discussing specific conditions, protocols, procedures and specific patients shall be held by the supervising collaborating physician for the physician assistant under his or her supervision in accordance with the terms of an authorized practice agreement. For physician assistants in the first six months of an authorized practice agreement and who have practiced as a physician assistant for less than one year, such periodic in person meetings must occur monthly. The supervising collaborating physician and physician assistant must retain written documentation of these meetings."

The areas of concern are: requirements to be "in person" as well as if this is intended to be for all new authorized practice agreements OR only those new practice agreements with PAs who have been practicing for less than 1 year.

Also, as a PA with concrete roots to WV, I am concerned for the overall growth of the PA profession. I feel that this proposed amendment is in the right direction, but I also feel that PAs are restricted significantly when compared to NPs. Just yesterday I was discussing with my employer regarding per diem coverage. They have a PA applicant, but secondary to such strict requirements from the BOM they have elected to hire a NP instead of the more qualified PA for this position. I see this happening across various practices in WV and I fear that this will ultimately result in me moving from the state that I was born, raised, and educated. I love WV and I love practicing medicine as a PA, but the hoops we (as a profession) are having to jump thru to even be in the same ball park as other PAs in other states is getting cumbersome. I fear that rural Appalachia will continue to be in serious need of medical providers, but secondary to constraints on regulations-- this will remain an issue.

When I initially heard about the Senate Bill regarding this issue, I was extremely hopeful. Now, as time as passed and the proposals have been examined, I am hopeful that they will continue to evolve (because personally I feel as though we are making positive steps, but great strides are required in order to advance the PA profession and ensure that myself and other PAs can remain in WV and flourish).

Thanks,
From: Ashley Clay [mailto:ashley.clay@medcor.com]
Sent: Tuesday, August 08, 2017 10:51 AM
To: Spangler, Mark A <Mark.A.Spangler@wv.gov>
Subject: Additional question

I also wanted to include a question regarding medical marijuana:

What will the scope of the PA-C be in regards to this new introduction into WV?

Ashley Clay, MS, PA-C | Physician Assistant | Medcor, Inc.
ashley.clay@medcor.com | ashen.clay@almon.com | Medcor, Inc.
6065 Xyle Lane Huntington, WV 25702 | 2 Vision Lane Lesage, WV 25537
Huntington South Office: 304.733.8655 | Huntington North Office: 304.733.8318
Huntington South and North Fax: 815.759.5245
Dear sir,

I support this amendment as it is a bid burden to the daily lives of physicians trying to keep their head above the water on a daily basis taking care of patients.

thanking you in anticipation

alok gopal, MD, DBMA
Director Pain service Winchester medical center
Senior executive NSPC
From: yashica shah [mailto:yashicasah@gmail.com]
Sent: Wednesday, July 26, 2017 2:19 PM
To: Spangler, Mark A <Mark.A.Spangler@wv.gov>
Subject: Amendment to 11 CSR 1B

Dear West Virginia Board of Medicine

Please consider the safety of the patients in West Virginia and do not allow physician assistants to practice without physician supervision- it would be very dangerous.
I am a physician and I studied alongside PA students and our training does not even compare. It is not ok to allow them to prescribe meds without a physician overseeing their work. Drug interactions can cause severe irreparable damage and their training does not have the rigor and the depth required to do this safely - my uncle has been a victim of this and now his kidneys are failing - he was told it was due to his diabetes when in reality he was receiving the wrong combination of meds - this was picked up by an MD but a little too late! please protect the citizens of West Virginia!

Sincerely

Yashica Shah

Sent from my iPhone
From: tahira masood <mutural@comail.com>
Date: July 29, 2017 at 4:09:29 PM EDT
To: WV Board of Medicine <bhonnewletter@wv.gov>, "Mark.A.Spangler@wv.gov"
      <Mark.A.Spangler@wv.gov>
Subject: Re: Comment Period Under Way for Proposed Amendments: Sorry, No way

Dear Mr. Spangler,

I am currently outside USA. Due to some internet problems, I am not having access to the details of legislature SB1014B through WV board of medicine website and otherwise also.

However I am penning down my opinion very honestly about the prescriptive or signature authority to physician assistants or nurse practitioners and even psychologists.

SORRY, NO PRESCRIPTIVE OR SIGNATURE AUTHORITY COULD BE OR SHOULD BE GIVEN TO PHYSICIAN ASSISTANTS BE IT RESTRICTED?

THIS IS LEGALIZING OF QUACKERY; THAT IS QUACK PRACTICE.

THIS WOULD ALSO LEAD TO CROSSING OF BOUNDARIES OR LIMITS BY THE PHYSICAN ASSISTANTS WHO WOULD TRY TO OVER RIDE THE RECOMMENDATIONS OF PHYSICIANS JUST TO SHOW THAT THEY ARE QUITE EXPERTS WITHOUT DOING MEDICAL STUDIES LIKE US PHYSICIANS WHO STUDY FOR HOURS AND YEARS AND SACRIFICE LOT OF RECREATIONAL ACTIVITIES JUST FOR THIS PROFESSION.
SAME IS FOR NURSE PRACTITIONERS AND PSYCHOLOGISTS WHO ALSO COULD NOT/SHOULD BE ALLOWED TO PRESCRIBE
THIS PRACTICE WOULD LEAD TO UNNECESSARY HASSLE AND UNCOMFORTABLE WORKING ENVIRONMENT DUE TO THE UNDERLYING TUSSLE OF WHO IS THE EXPERT AND ULTIMATELY MAKE THE DOCTOR RUN AWAY OR RESIGN.

I AM A FOREIGN DOCTOR( MUSLIM, PAKISTANI).
WHEREVER I HAVE PRACTICED OUTSIDE PAKISTAN, ONE THING IS COMMON BESIDES GENDER DISCRIMINATION.

NATIVES FEEL FOREIGNERS ARE INVADING THEIR COUNTRY AND TAKING THEIR JOBS.

NATIVES CONSIDER THEMSELVES TO BE ENTITLED TO SUPERIOR TREATMENT.( SOMETHING NATURAL AS THEIR COUNTRY IS HIRING US AND GIVING US JOBS)

GENERALY ,NATIVES DON'T LIKE TAKING ORDERS OR FOLLOWING RECOMMENDATIONS FROM FOREIGN DOCTORS.

THIS IS NOT SOMETHING ONLY ABOUT AMERICANS .THIS IS SOMETHING I HAVE COME ACROSS EVEN WHEN I WAS WORKING IN A PREDOMINANETLY MUSLIM COUNTRY OUTSIDE PAKISTAN FROM 2014-2016.

WHEN IT COMES TO COMPLAINING OR ANYTHING WRONG HAPPENS TO THE PATIENTS, THE STAFF IS VERY QUICK TO PUT THE ENTIRE BLAME ON DOCTORS, EVEN IF CERTAIN STEP HAD BEEN TAKEN BY STAFF WITHOUT KNOWLEDGE OF THE ON CALL PHYSICIAN.

ALSO TO BE KEPT IN MIND NURSES AND PHYSIAN ASSISTANTS HAVE STRONG UNIONS AND LOBBIES AND THEY CAN CREATE PROBLEMS FOR DOCTORS VERY EASILY IF THEY WANT TO. So unofficially we treat them very nicely and give them the feeling that that they are our boss.

BRIEFLY , I WANT TO EMPHASIZE THAT NO SHORT CUTS COULD BE/SHOULD BE ALLOWED TO PEOPLE BE IT AMERICANS, IF THEY ARE NOT QUALIFIED AS DOCTORS /PHYSICIANS.

if physician assistants are going to be allowed prescriptive and signature authority, then tomorrow OT technicians will also ask that they should also be allowed to do major surgeries like cholecystectomy and appendectomy .

By years of assisting surgeons, OT technicians also know and learn lot of skills even if they do not have the bookish/theoretical knowledge

Does that make them surgeons or equivalent to surgeons?

I AM NOT IN FAVOUR OF THIS AT ALL.

IF WEST VORGINIA BOARD OF MEDICINE WANTS THIS TO HAPPEN, THEN THERE IS NO NEED TO HIRE DOCTORS, BE IT FOREIGN PHYSICIANS.
CLINICS COULD BE VERY WELL RUN BY PHYSICIAN ASSISTANTS AND NURSE PRACTITIONERS ALONE. WHY HIRE US THEN?

LOOK AT THE CASES OF MEDICARE FRAUD IN PAST 6 YEARS ALL OVER USA.
FIND OUT THE RATIO OF DOCTORS/PEOPLE INVOLVED: FOREIGNERS VERSUS AMERICANS.
ITS MORE AMERICANS INVOLVED IN MEDICARE FRAUD THEN FOREIGNERS PER MY KNOWLEDGE.

Summary:

I am against any prescriptive or signature authority to physician assistants or nurse practitioners and even psychologists, be it restricted.

Kindly please consider revoking/repealing any such bill that favors/legalizes quackery.

Sincerely,
Dr. Tahira Masood, MD.
License #23963.

From: WV Board of Medicine <info@wv.gov>
Sent: Tuesday, July 25, 2017 10:37 PM
To: mtahira1@hotmail.com
Subject: Comment Period Under Way for Proposed Amendments to Board of Medicine Rule 11 CSR 18

COMMENT PERIOD UNDER WAY FOR PROPOSED AMENDMENTS TO BOARD OF MEDICINE RULE 11 CSR 18

During the First Special Session of 2017, the Legislature passed SB1014. This bill makes changes to the West Virginia Code that relate to physician assistant practice in West Virginia. SB1014
authorizes the Board of Medicine to engage in rulemaking, including emergency rule-making, to
implement these legislative changes. The bill was signed by Governor Justice on June 19, 2017,
and becomes effective on September 7, 2017.

The West Virginia Board of Medicine is currently accepting written comments on proposed
amendments to the Board’s legislative rule 11 CSR 1B, Licensure, Disciplinary and Complaint
Procedures, Continuing Education, Physician Assistants. The proposed changes to this rule are
intended to implement the provisions of SB1014, including an expansion of PA prescriptive
authority and signature authority. To view the proposed rule please click here.

All comments must be received by 4:30 p.m. on August 10, 2017, and should be submitted to:

Mark A. Spangler, Executive Director
West Virginia Board of Medicine
101 Dee Drive, Suite 103
Charleston, West Virginia 25311
Mark.A.Spangler@wv.gov
Hi there Mark,

My name is Mary Gainer, I am an MD working in 2 different clinics in Preston county, Newburg Clinic and Rowlesburg Clinic. I currently supervise 2 PAs, one in each clinic. Both PAs are excellent and I enjoy working with them, however, I'm concerned about the new changes to their licensing rules. While I understand that care in rural areas is desperately needed, and I also realize that clinic and hospital administrators prefer hiring PAs because of the budget constraints, I firmly believe that PAs must be held to strict standards of continuing education and that increased independence and less stringent oversight will not benefit our patients. PAs have scant training, especially with the large scope of practice that is required of a rural doctor out here where we don't have specialists to rely on. I do not agree with the changes made to the licensure requirements for PAs, especially when they are practicing entirely under my medical license. You might find that doctors are less willing to supervise, or "collaborate", with PAs that are not held to the very best standards.

Thanks for the opportunity to share my thoughts.

Mary Gainer, MD
Dear Sir:

I have practiced for the past 7 years seeing primarily Medicaid mental health patients at the Appalachian Community Health Center. This clinic serves Randolph, Upshur, Barbour, and Tucker counties. I was recruited part time to this clinic in 2011 because of a shortage of providers. In 2013 I retired from my practice as a pathologist at Davis Medical Center in Elkins. I began with very little knowledge of the medications that I had to manage. During the last few years, though, I have been the only on site provider serving these 4 counties. Currently, there are part time Telemed services from one psychiatrist, one nurse practitioner, and one physician assistant. I am leaving the clinic at the end of this month because I have a faculty position at both Alderson Broaddus University in Philippi, WV and The George Washington University in DC to teach anatomy. My recommendation regarding the legislation is to expand prescribing authority to include Schedule II medications consistent with that of other states. There does not appear to be adequate psychiatric coverage especially in WV to meet demand. I have had the experience several times of trying to obtain psychiatric consultation for a student in my anatomy course. I can’t even get psychiatry offices to return my calls. I recently attended a psychopharmacology conference in DC where I was told that, the market being what it is, there are psychiatrists throughout the country that do not accept insurance of any kind. The restriction of NPs and PAs in writing Schedule II medications delays and potentially makes impossible the care of some rural patients. The prohibition of writing refills means that these patients have to have frequent appointments. Our clinic treats many children and some adults with stimulant medications such as Adderall, Concerta, etc., some of them long term. The PA and NP on staff are perfectly capable of managing these medications. Their knowledge of these drugs is better than mine and I trust their judgement completely. I appreciate the opportunity to send my comments.

Sincerely,

Alan W. Cashell, MD
cell: 304-642-9104
West Virginia Association of Physician Assistants

WVAPA comments for the BOM/BOOM regarding Drafted Rules

Mr. Spangler,

Below, please find our collective comments regarding the drafted rules for SB 1014 "Physician Assistant Modernization Act" for the board’s consideration.

- 2.1B Definition of “collaboration” is essentially the same as “supervision.” There should be definition at beginning defining “collaboration” as other states have defined it. 2.1i and 10.1 definitions of collaboration could be added, as the current draft definition in 2.1B is not reflective of the term “collaboration”

- 9.5 We did not see durable medical equipment included in the signature authority section, however the leader sentence refers to the following list as “including but not limited to”. Does this allow for an assumption that the PA signature authority also extends to DME? APRNs have this authority, thus the signature and billing “parity” should include DME,…we request clarification of this.

- Page 21 12.3 and 12.3B conflict with each other, we feel the first appears most appropriate

- Page 15 12.5D Is the extent of “collaboration” between the PA and Physician automatically transitioning to a frequency to be defined at the practice level once the 6 month parameter has been met for newly practicing Pas (without further petitioning of the board)?

- 10.5D the term “supervisor” should be changed to “collaborating physician”

- 9.1G how is “stable condition” being defined?

- 10.8 “supervisory” should be changed to “collaborative”

- 9.1Q the sentence has not been completed the way written. Would suggest omitting “and” and leaving as is otherwise

We look forward to responses from the board regarding the bulleted points contained above,

Respectfully,

West Virginia Association of Physician Assistant Board of Directors

Commenter 14
August 10, 2017

Mark A. Spangler, Executive Director
West Virginia Board of Medicine
101 Dee Dr., Suite 103
Charleston, WV 25311

Re: Comments for WVBOM Rule 11 CSR 1B

Dear Mr. Spangler,

I've had the pleasure to review the West Virginia Board of Medicine (WVBOM) proposed rules for 11 CSR 1B. I would like to take the time to make a few comments besides the ones submitted by the West Virginia Association of Physician Assistants (WVAPA).

Under section 11-1B-13, I would recommend adding that anyone holding current NCCPA certification be accepted as having the 100 hours of CME required for recertification. The PA can send confirmation with their application process. They would still be required to complete the 3 hours of Drug Diversion and Best Prescribing Practices as required in 11-1B-13.3. If they didn’t present current NCCPA certification, they would submit 100 hours of CME to the WVBOM. This would also allow the WVBOM to keep track of NCCPA certification. Then, there wouldn’t be a need for PAs to deliver that information within 5 days of certification loss, as written in 11-1B-6.1.

Additionally, in 11-1B-13, it may decrease confusion to state the following:

13.1 Successful completion of a minimum of one hundred hours of continuing education satisfactory to the Board during the preceding two-year period is required for the biennial renewal of a physician assistant license or current NCCPA certification.

13.2.a Continuing medical education designated as Category I by either the American Medical Association, American Academy of Physician Assistants or the Academy of Family Physicians. A minimum of 50 hours continuing medical education credit is required, which may include the 3 hours required CME stated in 13.3.

13.2.b. Continuing medical education designated as Category II by either the American Medical Association, American Academy of Physician Assistants or the Academy of Family Physicians. A maximum of fifty hours of continuing medical education credit may be awarded for this category of activity.

Commenter 15
13.2.d. Passing a recertification examination by the NCCPA during the reporting period. A maximum of one hundred hours of continuing medical education credit may be awarded for this category of activity, but a physician assistant shall only be awarded ninety-seven hours of credit if the physician assistant is a mandatory participant in the continuing education activity described in subsection 13.4 of this rule.

13.2.d wouldn’t be required since anyone with NCCPA certification must complete 100 hours CME every two years, with at least 50 being Category 1. Currently, passage of the recertification exam is required in only the 9th or 10th years of the 10 year cycle. By showing current NCCPA certification, it proves that all CME and any recertification testing has been completed to maintain certification.

Under 11-CSRO-1B-9.5.a, suggest adding admission orders to the sentence as well;

9.5.a. Unless prohibited by the place of practice, a physician assistant may sign orders within the scope of his or her practice, including admission and/or discharge orders for patients personally treated by the physician assistant.

A couple years ago, CMS created a rule stating that if state law/rules and hospital bylaws allowed for admissions and admitting orders by non-physicians, then they would accept them. This rule wasn’t intended to limit what PAs could do, but it would have had a large effect not allowing PAs or NPs to write admission orders for CMS covered patients. This rule has been indefinitely suspended. However, it would be helpful to clarify that both admission and discharge orders may be handled by PAs in case that rule is implemented at some time.

Under 11-CSRO-1B-9.9, I would suggest the following addition;

9.9. A physician assistant may not independently delegate a task assigned to him or her by his or her collaborating physician to another individual. Nothing shall prohibit a PA from delegating orders including but not limited to: registered nurses, licensed practical nurses, medical assistants, radiology technologists, etc.

This may help clarify that a PA may provide orders to be carried out by nursing and/or ancillary staff within their education and training.

I would like to thank you for the opportunity to provide comments and suggestions for proposed rule 11-CSRO-1B, and the hard work provided by the West Virginia Board of Medicine. Please feel free to contact me if you have any questions, or if I could be of any further assistance.

Regards,

Nicholas Vance, MS, PA-C
WVAPA Past President
August 10, 2017

Mark A. Spangler, Executive Director
West Virginia Board of Medicine
101 Dee Drive, Suite 103
Charleston, West Virginia 25311

Re: Proposed amendments to 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants

Dear Mr. Spangler,

The American Academy of PAs (AAPA) is the national professional society for PAs (physician assistants). In this capacity AAPA represents more than 115,500 PAs across all medical and surgical specialties throughout the United States, U.S. territories and the uniformed services. AAPA appreciates the opportunity to provide comments on the proposed rule to amend Title 11 Code of State Rules 1B to reflect the recent legislative changes enacted by Senate Bill 1014 during the 2017 1st Special Session of the 83rd Legislature.

In a time when more patients are seeking care, but a physician shortage looms, it is imperative that states enact laws and rules that more accurately reflect the way PA-physician teams practice medicine and assure that patients will have increased access to the care that they need.¹ AAPA supports and commends this significant revision and modernization of PA practice in West Virginia. AAPA shares the commitment to team-based collaborative practice between PAs and physicians that is demonstrated in these proposed amendments, as well as the improvements to provisions governing PA prescribing authority and form authentication, which are particularly important to patients and families in rural or medically underserved areas of the state. AAPA applauds the elimination of the requirement of passage of a high-stakes recertification examination as a condition of license renewal.

In accordance with the new law effective on September 7th, 2017 which provides the authority for these rules and any subsequent revisions pertaining thereto, this proposal accurately reflects

that PAs are no longer required to provide proof of current and continuous certification by the National Commission on Certification of PAs (NCCPA) as a condition of license renewal. However, these proposed rules would require renewal applicants to provide their NCCPA certification status to the Board. In addition, the proposal would mandate licensed PAs to immediately notify the Board in writing if they are no longer NCCPA certified. According to the proposed amendments, failure to report the loss of NCCPA certification constitutes unprofessional, dishonorable and/or unethical conduct which may result in disciplinary action against the licensee.

AAPA finds the general requirement for PAs to report their NCCPA certification status and the mandate to do so as a license renewal applicant unnecessary and inequitable. AAPA is also concerned that a PA’s unintentional failure or omission to make the requisite report has the potential to affect their livelihood via the subsequent imposition of disciplinary action, particularly for those PAs who work in facilities in which credentialing and privileging is required. Such unintentional omissions can also affect patient access to care since those PAs who will be subject to disciplinary action may be prevented by their facility from working. In short, the providing this information has no public protection value. Currently, physicians licensed by the Board are not required, either generally or as a condition of license renewal, to notify the Board of their board certification status or any change in certification status. As a result, in this regard, physicians cannot be accused of unprofessional, dishonorable and/or unethical conduct which may subject them to disciplinary action. In addition, the Board does not capture or maintain information for members of the public to determine if a physician is board certified in a particular specialty. In fact, the Board’s website requires such information to be obtained by calling the American Board of Medical Specialties (ABMS) directly or visiting the ABMS website. The same requirements and processes can and should be applied to PAs. Since current and continuous NCCPA certification is not required for license renewal, it is no longer relevant for the Board to require PAs to report a change in this status to the Board. Similar to physicians, the organization responsible for capturing, updating and affording members of the public with access to this information is more than sufficient. NCCPA is the appropriate repository of this information and already provides members of the public, including the Board, with the opportunity to determine if a PA is certified. Furthermore, the West Virginia rules as proposed, provide the Board with the authority to appropriately discipline any PA who misrepresents their certification status. For all the aforementioned reasons, AAPA proposes that the rules be amended as provided below. New language appears in bold underlined font; language that should be deleted has been struck through.

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2 W. Va. Code § 30-3-12 and W. Va. Code R. § 11-1A-10. Physicians renew their license upon paying a renewal fee, submission of an application, and certification of participation in and successful completion of continuing medical or pediatric education satisfactory to the Board.
4 Website for the National Commission on Certification of PAs, Verify PA Certification https://www.nccpa.net/verify-pa (Accessed August 8, 2017).
§11-1B-5. License Renewal.

[...]  

5.6. The Board's physician assistant renewal application form shall include, and applicants must provide, the following information:

[...]  

5.6.f. Documentation of current and continuous The renewal applicant's NCCPA certification status.

5.6.g. Certification of successful completion of all continuing education requirements;

5.6.h. An attestation by the physician assistant that, to the extent he or she has been authorized to work pursuant to a practice agreement during the last two years, the physician assistant has practiced under supervision and within the delegation of duties set forth in the licensee's authorized practice agreement(s); and

5.6.i. Other information required by the Board for renewal of a license.

[...]  

§11-1B-6. Termination of License Reporting of Loss of NCCPA Certification Status.

6.1. A licensed physician assistant must immediately notify the Board, in writing, upon losing NCCPA certification if the licensee is no longer certified by the NCCPA. Failure to immediately report the loss of NCCPA certification shall constitute unprofessional, dishonorable and/or unethical conduct which may result in the imposition of discipline against the licensee. Notification to the Board shall be considered to have occurred as required if such notification is received within one five business days of the effective date of the loss of end date of the licensee's NCCPA certification.

6.2. If a licensee is no longer certified by the NCCPA, his or her license automatically terminates without notice to the physician assistant. The licensee shall utilize the professional designation of PA, and shall immediately cease use of the professional designation of PA-C.
6.3. Upon loss of NCCPA certification and/or license termination, a physician assistant must immediately cease practicing as a physician assistant and notify all supervising physicians of the loss of NCCPA certification, licensure and Board authorization to practice. All practice agreement authorizations issued by the Board automatically terminate with the expiration of NCCPA certification and the termination of licensure.

6.4. A physician assistant becomes eligible for reinstatement of a terminated license once he or she becomes recertified by the NCCPA.

The Academy appreciates this opportunity to comment on the proposed rule. AAPA is readily available to provide additional information on PAs, and is eager to continually work with the Board to assure that PAs maintain and enhance their capacity as key resources in caring for the patients of West Virginia.

Sincerely,

Stephanie M. Radix, JD
Senior Director, Constituent Organization Outreach & Advocacy
§11-1B-1. General.

1.1. Scope. -- This rule relates to physician assistants and to their licensing, practice, complaint procedures and professional discipline, and continuing education.

1.2. Authority. -- W. Va. Code §30-1-7(a), §30-3E-3(a)(1)-(10), and W. Va. Code §30-1D-1(d).


1.4. Effective Date. -- July 1, 2017.

1.5. Sunset Date -- This rule shall terminate and have no further force or effect on July 5, 2022 upon the expiration of five years from its effective date.

§11-1B-2. Definitions.

2.1. For purposes of this rule, the following words and terms mean:

2.1.a. “Advanced duties” means medical acts that require additional training beyond the basic education program training required for licensure as a physician assistant.

2.1.b. “Alternate supervising collaborating physician” means one or more physicians or podiatrists podiatric physicians licensed in this state and designated by the supervising collaborating physician to provide supervision of collaboration with a physician assistant in accordance with an authorized practice agreement.

2.1.c. “Antineoplastics” means chemotherapeutic agents used in the active treatment of current cancer.

2.1.d. “Authorization to practice” means written notification from the Board that a physician assistant may commence practice pursuant to an authorized practice agreement.

2.1.e. “Authorized practice agreement” means a practice agreement which has been authorized by the Board.

2.1.f. “Board” means the West Virginia Board of Medicine.
2.1.g. "Chronic condition" is a condition which lasts three months or more, generally cannot be prevented by vaccines, can be controlled but not cured by medication and does not generally disappear. These conditions include anemia, anxiety, arthritis, asthma, bladder outlet obstruction, cardiovascular and pulmonary disease, cancer, controlled diabetes, epilepsy and seizures, thyroid disease, and obesity, and do not include chronic pain or any condition which requires antineoplastics excluded from the physician assistant formulary by law, all subject to the scope of practice of the physician assistant and supervising physician as set forth in W. Va. Code § 30-3E-1 et seq., section 9 of this rule, and the approved formulary.

2.1.h. "Collaborating Physician" means a doctor of medicine or podiatry fully licensed, without restriction or limitation, who collaborates with physician assistants.

2.1.i. "Collaboration" means overseeing the activities of, and accepting responsibility for, the medical services rendered by a physician assistant. Constant physical presence of the collaborating physician is not required as long as the collaborating physician and physician assistant are, or can be, easily in contact with one another by telecommunication. Collaboration does not require the personal presence of the collaborating physician at the place or places where services are rendered.

2.1.j. 2.1.k. “Controlled substances” means drugs that are classified by federal or state law in Schedules I, II, III, IV or V, as defined in W. Va. Code § 60A-2-204 through 212.

2.1.k. 2.1.l. "Core duties" means medical acts that are included in the standard curricula of accredited physician assistant education programs.

2.1.l. "Direct supervision" means the physician must be present on site and immediately available to furnish assistance and directions to the physician assistant.

2.1.m. 2.1.n. “Drug diversion training and best practice prescribing of controlled substances training” means training which includes all of the following:

2.1.m.1. 2.1.n.1. Drug diversion, including West Virginia statistics on prescription drug abuse and resulting deaths;

2.1.m.2. 2.1.n.2. Epidemiology of chronic pain and misuse of opioids;

2.1.m.3. 2.1.n.3. Indication for opioids in chronic pain treatment including general characteristics, toxicities and drug interactions;

2.1.m.4. 2.1.n.4. Examination of patient evaluation and risk assessment and tools to assess risk and monitor benefits;

2.1.m.5. 2.1.n.5. Initiation and ongoing management of chronic pain patient treated with opioid based therapies, including treatment objectives; monitoring and periodic review; referrals and consultations; informed consent; prescription of controlled substance agreements, urine
screens and pill counts; patient education on safe use, storage and disposal of opioids; discontinuation of opioids for pain due to lack of benefits or increased risks; documentation and medical records;

2.1.k.6. 2.1.1.6. Case study of a patient with chronic pain;

2.1.k.7. 2.1.1.7. Identification of diversion and drug seeking tactics and behaviors;

2.1.k.8. 2.1.1.8. Best practice methods for working with patients suspected of drug seeking behavior and diversion;

2.1.k.9. 2.1.1.9. Compliance with controlled substances laws and rules;

2.1.1.10. Training on prescribing and administration of an opioid antagonist.

2.1.k.10. 2.1.1.11. Registration with and use of the West Virginia Controlled Substances Monitoring Program established in West Virginia Code Chapter 60A, Article 9; and

2.1.k.11. 2.1.1.12. Maintenance of a record of attendance of each individual who successfully completes the drug diversion training and best practice prescribing of controlled substances training.

2.1.l. 2.1.m. “Endorsement” means a summer camp or volunteer endorsement to practice as a physician assistant as set forth in W. Va. Code §30-3E-1 et seq.

2.1.m. 2.1.n. “Health care facility” means any licensed hospital, nursing home, extended care facility, state health or mental institution, clinic or physician’s office.

2.1.n. 2.1.o. “Hospital” means a facility licensed pursuant to W. Va. Code §16-5B-1 et seq., and any acute-care facility operated by the state government that primarily provides inpatient diagnostic, treatment or rehabilitative services to injured, disabled or sick persons under the supervision of physicians and includes psychiatric hospitals.

2.1.o. 2.1.p. “License” means a license issued by the Board to a physician assistant applicant pursuant to the provisions of W. Va. Code §30-3E-1 et seq.

2.1.p. 2.1.q. “Licensee” means a physician assistant licensed pursuant to the provisions of W. Va. Code §30-3E-1 et seq. and the provisions of this legislative rule.

2.1.q. 2.1.r. “Licensure” means the approval of individuals by the Board to practice as a physician assistant to a medical doctor and/or pediatric or pediatric physician, and the process of application and consideration for this authorization.

2.1.r. 2.1.s. “NCCPA” means The National Commission on the Certification of Physician Assistants.
2.1.(t) “On-site collaboration” means the collaborating physician must be present on site and immediately available to furnish assistance and directions to the physician assistant.

2.1.(s) 2.1.(u) “Opioid” means natural and semi-synthetic derivatives of the opium poppy, as well as similar synthetic compounds that have analgesic or pain relieving properties because of their effects in the central nervous system. These include, but are not limited to, codeine, morphine, hydromorphone, hydrocodone, oxycodone, methadone, and fentanyl.

2.1.(t) 2.1.(v) “Osteopathic Board” means the West Virginia Board of Osteopathic Medicine.

2.1.(u) 2.1.(w) “Personal supervision collaboration” means the supervising collaborating physician must be in attendance in the room with the physician assistant throughout the rendering of care by the physician assistant.

2.1.(v) 2.1.(x) “Physician” means a doctor of allopathic or osteopathic medicine who is fully licensed by the Board or the Osteopathic Board to practice medicine or surgery in this state.

2.1.(w) 2.1.(y) “Physician Assistant” means a person who meets the qualifications set forth in the Physician Assistants Practice Act, W. Va. Code §30-3E-1 et seq., and is licensed to practice medicine under supervision in collaboration with a physician or podiatric physician.

2.1.(x) 2.1.(z) “Podiatrist Podiatric physician” means a physician of podiatric medicine who is fully licensed by the Board to practice podiatric medicine in this state.

2.1.(y) 2.1.(aa) “Practice Agreement” means a document that is executed between a supervising collaborating physician and a physician assistant pursuant to the provisions of Physician Assistants Practice Act, W. Va. Code §30-3E-1 et seq., and section 10 of this rule, and is filed with and approved by the Board.

2.1.(z) 2.1.(bb) “Prescription drug” or “legend drug” means a drug that may be dispensed under federal or state law only pursuant to the prescription of an authorized prescriber.

2.1.(aa) 2.1.(cc) “Primary place of practice” means each practice location where a physician assistant practices greater than twenty percent of his or her total monthly practice hours pursuant to an authorized practice agreement.

2.1.(bb) 2.1.(dd) “Protocol” means written treatment instructions established by a supervising collaborating physician for use by a physician assistant. The instructions should be flexible, in accordance with the setting where the physician assistant is employed.

2.1.(cc) “Supervision” means overseeing the activities of, and accepting responsibility for, the medical services rendered by a physician assistant.
2.1.ee. “Reporting period” means the two-year period preceding the renewal deadline for a license issued by the Board. Continuing education satisfactory to the Board must be obtained in each reporting period.

2.1.dd. “Supervising Physician” means a doctor of medicine or podiatry fully licensed, without restriction or limitation, who supervises physician assistants.

§11-1B-3. Qualification and Application for Licensure to Practice as a Physician Assistant.

3.1. Minimum qualifications for licensure as a physician assistant are set forth in West Virginia Code §30-3E-4.

3.2. An application for a license to practice as a physician assistant shall be completed on a form provided by the Board. The Board will not consider an application or decide upon the issuance of a license to an applicant until the complete application, including all third-party documentation or verification, is on file with the Board and the Board has had at least fifteen days to review the application. An application for licensure must be accompanied by payment of a nonrefundable application fee in an amount established by 11 CSR 4.

3.3. Applicants must provide the following information:

3.3.a. The applicant's name, e-mail address, home address, preferred mailing address and primary practice location address(es) and telephone numbers;

3.3.b. Demographic information of the applicant, such as date of birth, sex, etc.;

3.3.c. A photograph taken within the previous twelve months which substantially resembles the applicant;

3.3.d. A copy of the individual's birth certificate, certificate of naturalization, or passport to be used in identifying the applicant, and verifying his or her date of birth and the appropriate spelling of his or her name;

3.3.e. Documentation establishing that the applicant:

3.3.e.1. Obtained a baccalaureate or master's degree from an accredited program of instruction for physician assistants; or

3.3.e.2. Graduated from an approved program of instruction in primary health care or surgery prior to July 1, 1994; or

3.3.e.3. Was certified by the Board as a "Type B" physician assistant prior to July 1, 1983;

3.3.f. Documentation that the applicant has passed the Physician Assistant National Certifying Examination administered by the NCCPA and is currently certified by the NCCPA;
3.3.f. 3.3.g. Documentation and/or certification which establishes that the applicant does not hold a physician assistant license, certification or registration in any jurisdiction which is currently suspended or revoked;

3.3.g. 3.3.h. Information with respect to the applicant’s professional practice, character and fitness to practice as a physician assistant;

3.3.h. 3.3.i. Other information as determined by the Board which relates to whether the applicant is mentally and physically able to engage safely in practice as a physician assistant; and

3.3.i. 3.3.j. Additional information identified by the Board for licensure.

3.4. Beginning July 1, 2017, and in In addition to all of the requirements for licensure set forth elsewhere in this legislative rule, all applicants for an initial license to practice as a physician assistant in West Virginia shall request and submit to the Board the results of a state and a national criminal history record check.

3.5. The purpose of the criminal history record check is to assist the Board in obtaining information that may relate to the applicant’s fitness for licensure.

3.6. In addition to the State Police, the Board may contract with and designate a company specializing in the services required by this section instead of requiring the applicant to apply directly to the West Virginia State Police or similar out-of-state agency for the criminal history records checks. Provided, that any such company must utilize protocols consistent with standards established by the Federal Bureau of Investigation and the National Crime Prevention and Privacy Compact.

3.7. The applicant shall furnish to the State Police, or other organization duly designated by the Board, a full set of fingerprints and any additional information required to complete the criminal history record check.

3.8. The applicant is responsible for any fees required by the State Police, or other organization duly designated by the Board, for the actual costs of the fingerprinting and the actual costs of conducting a complete criminal history record check.

3.9. The Board may require the applicant to obtain a criminal history records check from a similar Board approved agency or organization in the state of the applicant’s residence, if outside of West Virginia.

3.10. The applicant shall authorize the release of all records obtained by the criminal history record check to the Board.

3.11. A criminal history record check submitted in support of an application for licensure must have been requested by the applicant no earlier than twelve months immediately prior to the Board’s receipt of the applicant’s electronic application for licensure.
3.12. An initial licensure application is not complete until the Board receives the results of a state and a national criminal history record check conducted by the State Police or another entity duly authorized by the Board. The Board shall not grant an application for licensure submitted by any applicant who fails or refuses to submit the criminal history record check required by this section.

3.13. Should criminal offenses be reported on an applicant's criminal history record check, the board will consider the nature, severity, and recency of offenses, as well as rehabilitation and other factors on a case by case basis for licensure.

3.14. The results of the state and national criminal history record check may not be released to or by a private entity except:

3.14.a. To the individual who is the subject of the criminal history record check;

3.14.b. With the written authorization of the individual who is the subject of the criminal history record check; or


3.15. Criminal history record checks and related records are not public records for the purposes of chapter twenty-nine-b of the West Virginia Code.

3.16. The Board may require an applicant to provide original documents and/or certified documents in support of an application for licensure. The application, together with all documents submitted, becomes the property of the Board and will not be returned.

3.17. An applicant may be required to appear before Board members at the meeting at which his or her application is to be considered.

3.18. The burden of satisfying the Board of the applicant's qualifications for licensure is upon the applicant. The Board may deny an application for a physician assistant license to any applicant determined to be unqualified for licensure by the Board.

§11-1B-4. Temporary License; Special Licenses and/or Endorsements.

4.1. If an applicant for licensure meets all of the qualifications for a license but is awaiting the next scheduled meeting of the Board for action upon his or her application, the applicant may request a temporary license. The Board may authorize its staff to issue temporary licenses to applicants who provide:

4.1.a. A written request that the applicant be issued a temporary license; and

4.1.b. A nonrefundable temporary license fee in an amount established by 11 CSR 4.
4.2. A temporary license expires six months after issuance or after the Board acts, whichever is earlier.

4.3. To the extent authorized by W. Va. Code §30-3E-15, a physician assistant licensed by this Board may apply for an endorsement to practice at a summer camp or as a volunteer at a community event by completing the application form prepared by the Board. No application fee shall be assessed. The Board may authorize its staff to issue summer camp and community event endorsements to an applicant who holds an unrestricted license issued by the Board and has submitted a complete and timely application.

4.4. To the extent authorized by W. Va. Code §30-3E-16, a physician assistant currently holding a license, registration or certification to practice in another jurisdiction may apply for an endorsement to practice at a summer camp or as a volunteer at a community event by completing the application form and submitting a fee equal to the fee set by the Board for a temporary license.

4.5. The Board will not consider an application for a summer camp or a community event volunteer license or endorsement made pursuant to W. Va. Code §30-3E-16 until the complete application is on file with the Board, the appropriate fee has been submitted, and the Board has had at least fifteen days to review the application.

4.6. To the extent authorized by W. Va. Code §30-1-21, a physician assistant currently holding a license, registration or certification to practice in another jurisdiction may apply for an authorization to serve as a volunteer without compensation for a charitable function for a period not to exceed ten days by submitting a Board approved authorization form at least ten days in advance of the charitable function. No fee shall be charged in association with requests made pursuant to this subsection. The Board may authorize its staff to authorize the charitable practice if the physician assistant meets the eligibility criteria set forth in W. Va. Code §30-1-21.

§11-1B-5. License Renewal.

5.1. With the exception of an initial license, a license to practice as a physician assistant is issued for a term of two years. An initial license expires on the thirty-first day of March in the next year established by the Board for physician assistant license renewal. Provided, that if an original license is issued within thirty days of an established renewal deadline, the initial license shall expire on the thirty-first day of March in the subsequent renewal year.

5.2. License renewal for all licensed physician assistants, regardless of the date the license was first issued, shall occur prior to April 1 of every odd year. A license shall expire, if not renewed by the renewal deadline, which shall be set by the Board and published on the Board’s website.

5.3. A physician assistant license shall be renewed upon timely submission of a fully completed renewal application form and payment of a nonrefundable renewal fee in an amount established by 11 CSR 4.

5.4. An online application is available through the Board’s website. A licensee shall maintain current contact information on file with the Board including: a preferred mailing address; a home
address; current practice locations; and a current e-mail address. A licensee shall notify the Board of any changes to such contact information within fifteen days of the change.

5.5. It is the responsibility of the licensee to acquire and submit renewal application forms. Failure of the licensee to receive a renewal application will not constitute justification for any physician assistant to practice on an expired license, even if the physician assistant is otherwise authorized to practice as a physician assistant under a current practice agreement.

5.6. The Board's physician assistant renewal application form shall include, and applicants must provide, the following information:

5.6.a. The applicant's name, e-mail address, home address, preferred mailing address and primary practice location address(es) and telephone numbers;

5.6.b. Demographic information of the applicant, such as date of birth, sex, etc.;

5.6.c. A statement concerning any disciplinary action taken against the applicant in the last two years in any jurisdiction;

5.6.d. Information with respect to the applicant's professional practice, character and fitness to practice as a physician assistant;

5.6.e. A statement of all other jurisdictions in which the applicant is licensed to practice as a physician assistant;

5.6.f. Documentation of current and continuous The renewal applicant's NCCPA certification status;

5.6.g. Certification of successful completion of all continuing education requirements;

5.6.h. An attestation by the physician assistant that, to the extent he or she has been authorized to work pursuant to a practice agreement during the last two years, the physician assistant has practiced under supervision and within the delegation of duties set forth in the licensee's authorized practice agreement(s); and

5.6.i. Other information required by the Board for renewal of a license.

5.7. The license of a physician assistant who fails to certify his or her successful completion of all continuing education requirements by the renewal deadline established by the Board shall automatically expire.

§11-B-6. Termination of License Reporting of NCCPA Certification Status.

6.1. A licensed physician assistant must immediately notify the Board, in writing, upon losing NCCPA certification if the licensee is no longer certified by the NCCPA. Failure to immediately report the loss of NCCPA certification shall constitute unprofessional, dishonorable and/or
unethical conduct which may result in the imposition of discipline against the licensee. Notification to the Board shall be considered to have occurred as required if such notification is received within five business days of the effective date of the loss or end date of the licensee’s NCCPA certification.

6.2. If a licensee is no longer certified by the NCCPA, his or her license automatically terminates without notice to the physician assistant the licensee shall utilize the professional designation of PA and shall immediately cease use of the professional designation of PA-C.

6.3. Upon loss of NCCPA certification and/or license termination, a physician assistant must immediately cease practicing as a physician assistant and notify all supervising physicians of the loss of NCCPA certification, licensure and Board authorization to practice. All practice agreement authorizations issued by the Board automatically terminate with the expiration of NCCPA certification and the termination of licensure.

6.4. A physician assistant becomes eligible for reinstatement of a terminated license once he or she becomes recertified by the NCCPA.

§11-1B-7. Reinstatement and Reactivation of an Expired or Terminated License.

7.1. A physician assistant may seek reinstatement of an expired license within one year of the expiration by submitting:

7.1.a. A complete reinstatement application with all required supporting documentation;

7.1.b. Proof that he or she is currently certified, and has been continuously certified during the preceding licensure period and expiration period, by the NCCPA—Certification that the renewal applicant has completed all required continuing education for the previous reporting period, and documentation satisfactory to the Board corroborating the applicant’s certification of continuing education compliance;

7.1.c. A renewal fee; and

7.1.d. A reinstatement fee equal to fifty percent of the renewal fee.

7.2. If greater than one year has passed since a physician assistant’s license automatically expired, the physician assistant may only reinstate by completing the application process and meeting all of the qualifications for an initial license. Former licensee shall apply anew for licensure pursuant to section 3 of this rule. If licensure is granted, the Board shall reactivate the license and reissue the individual’s original license number.

7.3. A physician assistant may seek reinstatement of an automatically terminated license within one year of termination by submitting:

7.3.a. A complete reinstatement application with all required supporting documentation;
7.3.b. Proof that the physician assistant has passed his or her most recent NCCPA certification and/or recertification examination and that he or she has had his or her NCCPA certification restored;

7.3.e. A reinstatement fee equal to fifty percent of the renewal fee; and

7.3.d. Any renewal application and fee which the physician assistant would have submitted had his or her license not automatically terminated;

7.4. If a physician assistant is not eligible for reinstatement of a terminated license within one (1) year of the termination date, the physician assistant may only reinstate by completing the application process and meeting all of the qualifications for an initial license.

§11-1B-8. Practice Requirements.

8.1. A physician assistant may not practice independent of a supervising collaborating physician.

8.2. To practice as a physician assistant under the supervision of in collaboration with a medical doctor or a pediatrician podiatric physician, a person must:

8.2.a. Be licensed as a physician assistant by the Board;

8.2.b. Submit a practice agreement on a form authorized by the Board with the appropriate fee;

8.2.c. Receive written authorization from the Board to practice pursuant to the submitted practice agreement; and

8.2.d. Limit Conform his or her practice to the delegated medical acts contained within the physician assistant’s authorized practice agreement.

§11-1B-9. Scope of Practice.

9.1. A physician assistant shall have, as a minimum, the knowledge and competency to perform the following core duties under with appropriate physician supervision collaboration:

9.1.a. Screen patients to determine the need for medical attention;

9.1.b. Review patient records to determine health status;

9.1.c. Take a patient history;

9.1.d. Perform a physical examination;

9.1.e. Perform development screening examinations on children;
9.1.f. Record pertinent patient data;

9.1.g. Make decisions regarding data gathering and appropriate management and treatment of patients being seen for the initial evaluation of a problem or the follow-up evaluation of a previously diagnosed and stabilized condition;

9.1.h. Prepare patient summaries;

9.1.i. Initiate requests for commonly performed initial laboratory studies;

9.1.j. Collect specimens for and carry out commonly performed blood, urine and stool analyses and cultures;

9.1.k. Identify normal and abnormal findings in patient history and physical examination and in commonly performed laboratory studies;

9.1.l. Initiate appropriate evaluation and emergency management for emergency situations; for example, cardiac arrest, respiratory distress, injuries, burns and hemorrhage;

9.1.m. Provide counseling and instruction regarding common patient problems and/or questions;

9.1.n. Execute documents at the direction of and for the supervising collaborating physician;

9.1.o. Perform clinical procedures such as, but not limited to:

9.1.o.1. Venipuncture;

9.1.o.2. Electrocardiogram;

9.1.o.3. Care and suturing of minor lacerations, which may include injection of local anesthesia;

9.1.o.4. Casting and splinting;

9.1.o.5. Control of external hemorrhage;

9.1.o.6. Application of dressings and bandages;

9.1.o.7. Removal of superficial foreign bodies;

9.1.o.8. Cardiopulmonary resuscitation;

9.1.o.9. Audiometry screening;
9.1.o.10. Visual screening; and

9.1.o.11. Carry out aseptic and isolation techniques;

9.1.p. Assist in surgery;

9.1.q. Prepare patient discharge summaries if physician assistant has been directly involved in patient care; and

9.1.r. Assist physician under personal supervision collaboration in a manner by which to learn and become proficient in new procedures.

9.2. In addition to core duties, a physician assistant may perform properly delegated medical acts within a medical specialty that he or she, by education, training and/or experience has the knowledge and competency to perform.

9.3. A physician assistant may pronounce death provided that:

9.3.a. The delegation of this duty is contained in his or her authorized practice agreement;

9.3.b. The physician assistant has a need to do so within his or her scope of practice; and

9.3.c. That the pronouncement is in accordance with applicable West Virginia law and rules.

9.4. A physician assistant may, under appropriate direction and supervision by a physician, augment the physician’s data gathering abilities in order to assist the supervising collaborating physician in reaching decisions and instituting care plans for the physician’s patients.

9.5. Unless prohibited by the place of practice, a physician assistant may sign orders to be countersigned later by his or her supervising physician as set forth in an authorized practice agreement. A physician assistant may provide an authorized signature, certification, stamp, verification, affidavit or endorsement on documents within the scope of his or her practice, including, but not limited to the following:

9.5.a. If permitted by the place of practice, a physician assistant may sign orders within the scope of his or her practice, including admission and/or discharge orders for patients that the physician assistant has been involved in treating;

9.5.b. Medical certifications for death certificates if the physician assistant has received training on the completion thereof;

9.5.c. Instruments related to scope and limitation of treatment, including:

9.5.c.1. Physician orders for life sustaining treatment;
9.5.c.2. Physician orders for scope of treatment; and

9.5.c.3. Do not resuscitate forms and/or orders.

9.5.d. Disability medical evaluations and/or certifications for persons with disabilities in support of a hunting or fishing permit;

9.5.e. Utility company forms or certifications requiring maintenance of utilities regardless of ability to pay;

9.5.f. Governmental forms as permitted by law including, but not limited to parking applications for mobility impaired persons; and

9.5.g. Durable medical equipment.

9.6. A supervising collaborating physician may delegate limited prescriptive authority to a physician assistant in accordance with the provision of sections 11 and 12 of this rule.

9.7. A physician assistant may not perform any services which his or her supervising collaborating physician is not qualified or, in a hospital setting, credentialed to perform, including the treatment of chronic conditions as defined in 2.1.g.

9.8. A physician assistant may not perform any services which are not included in his or her authorized practice agreement.

9.9. A physician assistant may not maintain an independent place of practice or independently bill patients for services provided.

9.10. 9.9. A physician assistant may not independently delegate a task assigned to him or her by his or her supervising collaborating physician to another individual. Nothing in this subsection shall prohibit a physician assistant from engaging in appropriate collaboration with other treatment team members.

9.11. 9.10. A supervising collaborating physician may, with due regard for the safety of the patient and in keeping with sound medical practice, delegate to the physician assistant those medical procedures and other tasks that are customary to the supervising collaborating physician's practice, subject to the limitations set forth in this section and the West Virginia Physician Assistants Practice Act, W. Va. Code §30-3E-1 et seq., and the training and expertise of the physician assistant.

§11-1B-10. Responsibilities of the Supervising Collaborating Physician.

10.1. A supervising collaborating physician is responsible for observing, directing and evaluating the work, records and practices performed by the physician assistant pursuant to an authorized practice agreement and is legally responsible for the practice of the physician assistant at all times.
10.2. A supervising collaborating physician may not permit a physician assistant to practice independently or maintain an independent place of practice.

10.3. A supervising collaborating physician is responsible for providing continuous supervision of the collaboration with the physician assistant.

10.4. Constant physical presence of the supervising collaborating physician is not required as long as the supervising collaborating physician and physician assistant are, or can be, easily in contact with one another by electronic communication, including but not limited to telecommunication.

10.5. Appropriate supervision collaboration shall include:

10.5.a. Active and continuing overview of the physician assistant's activities to determine that the supervising collaborating physician's directions are being implemented;

10.5.b. Immediate availability of the supervising collaborating physician, either in-person or by electronic communication of any kind, to the physician assistant for all necessary consultations;

10.5.c. Personal and regular review, at least quarterly, by the supervising collaborating physician of selected patient records upon which entries are made by the physician assistant. The supervising collaborating physician shall select patient records for review on the basis of written criteria established by the supervising collaborating physician and the physician assistant and the chart review shall be sufficient in number to assure adequate review of the physician assistant's scope of practice; and

10.5.d. Periodic, in person, education and review sessions discussing specific conditions, protocols, procedures and specific patients shall be held by the supervising collaborating physician for the physician assistant under his or her supervision collaboration in accordance with the terms of an authorized practice agreement. For physician assistants in the first six months of an authorized practice agreement and who have practiced as a physician assistant for less than one year, such periodic in person meetings must occur monthly. The supervising collaborating physician and physician assistant must retain written documentation of these meetings.

10.6. A supervising collaborating physician shall only delegate medical acts that are:

10.6.a. Within the scope of practice of the supervising collaborating physician;

10.6.b. Suitable to be performed by the physician assistant, taking into account the physician assistant's education, training and level of competence and experience; and

10.6.c. Included in the physician assistant's authorized practice agreement.
10.7. A patient being treated regularly for a life-threatening, chronic, degenerative, or disabling condition shall be seen by the supervising collaborating physician as frequently as the patient’s condition requires, and in accordance with the terms established in an authorized practice agreement.

10.8. It is the responsibility of the supervising collaborating physician to ensure that supervision collaboration is maintained in his or her absence. A supervising collaborating physician may designate alternate supervising collaborating physicians. To serve as an alternate supervising collaborating physician, an individual must hold an unrestricted license to practice medicine and surgery or podiatry in this state. An alternate supervising collaborating physician, jointly with the supervising collaborating physician, shall be legally responsible for the acts of a physician assistant which occur during periods of time where the alternate supervising collaborating physician is providing supervision for collaborating with the physician assistant. An alternate supervising collaborating physician shall accept supervisory collaborative responsibility for periods of time not to exceed the time-period specified in the practice agreement, which may not exceed forty-five days.

10.9. An alternate supervising collaborating physician shall supervise collaborate with the physician assistant in accordance with an authorized practice agreement and shall only delegate medical acts that are:

10.9.a. Contained within the authorized practice agreement; and

10.9.b. Within the scope of practice of both the supervising collaborating physician and the alternate supervising collaborating physician.

10.10. A supervising collaborating physician may enter into practice agreements with up to five physician assistants at any one time.

10.11. A physician is prohibited from serving as a supervising collaborating physician or alternate supervising collaborating physician for greater than five physician assistants at any one time. However, a physician practicing medicine in an emergency department of a hospital or a physician who supervises collaborates with a physician assistant who is employed by or on behalf of a hospital may provide supervision for collaborating with up to five physician assistants per shift if the physician has an authorized practice agreement in place with the supervising physician assistant or the physician has been properly authorized as an alternate supervising collaborating physician for each physician assistant.

10.12. In the event of the sudden departure, incapacity, or death of a supervising collaborating physician, a designated alternate supervising collaborating physician may assume the role of supervising collaborating physician in order to provide continuity of care for the patients of the former supervising collaborating physician. A physician who assumes the responsibility of supervising collaborating physician shall submit a complete practice agreement to the appropriate licensing board within fifteen days of assuming the responsibility.
§11-1B-11. Practice Agreements.

11.1. A proposed practice agreement shall be completed on a form provided by the Board and shall be accompanied by the appropriate fee. The fee for the submission of a practice agreement shall be one hundred dollars ($100) until such time as a different fee is established by 11 CSR 4.

11.2. The proposed practice agreement shall include:

11.2.a. A description of the qualifications of the supervising collaborating physician, the alternate supervising collaborating physicians, if applicable, and the physician assistant;

11.2.b. The scope of practice of the supervising collaborating physician;

11.2.c. The settings in which the physician assistant will practice and a list of the physician assistant’s primary place(s) of practice every location where the physician assistant will or may practice pursuant to delegation set forth in the practice agreement;

11.2.d. A description of the continuous physician supervision collaboration mechanisms that are reasonable and appropriate for the practice setting, and the experience and training of the physician assistant;

11.2.e. The delegated medical acts which the physician assistant will perform, including:

   11.2.e.1. Core duties;

   11.2.e.2. Advanced duties;

   11.2.e.3. Prescriptive privileges; and

   11.2.e.4. A description of any medical care the physician assistant will provide in an emergency, including a definition of an emergency;

11.2.f. An attestation by the supervising collaborating physician that the medical acts to be delegated are:

   11.2.f.1. Within the supervising collaborating physician’s scope of practice; and

   11.2.f.2. Appropriate to the physician assistant’s education, training and level of competence;

11.2.g. A description of how the physician assistant’s performance will be evaluated. An attestation by the collaborating physician that he or she will appropriately evaluate the practice of the physician assistant at regular intervals; and

11.2.h. Other information deemed necessary by the Board to carry out the provisions of the West Virginia Physician Assistants Practice Act, W. Va. Code §30-3E-1 et seq.
11CSR1B

11.3. To delegate one or more advanced duties, the practice agreement shall include:

11.3.a. For advanced duties to be performed at hospital or ambulatory surgical facility:

11.3.a.1. A description of the advanced duty and the education, training, and experience that qualifies the physician assistant to perform the advanced duty;

11.3.a.2. Certification that the supervising collaborating physician and physician assistant are credentialed by the hospital or ambulatory surgical facility; and

11.3.a.3. A copy of the approved delineation of duties from the governing board of the health care facility stating that the physician assistant has been approved by the facility to perform the advanced duty;

11.3.b. For all other practice locations:

11.3.b.1. A description of the advanced duties to be delegated;

11.3.b.2. Documentation of the specialized education, training or experience received by the physician assistant in order to perform the advanced duties; and

11.3.b.3. The level manner of supervision collaboration that the supervising collaborating physician will use when the physician assistant is performing the advanced duty.

11.4. A physician assistant may not commence practice pursuant to a practice agreement until he or she receives written authorization to practice from the Board.

11.5. Upon receipt of a proposed practice agreement and the appropriate fee the Board, through its staff, shall issue a letter of authorization to practice pursuant to the proposed practice agreement if:

11.5.a. The proposed practice agreement conforms to the requirements of this section;

11.5.b. The physician assistant holds an unrestricted license;

11.5.c. Based upon the submitted information, it appears that the physician assistant is able to perform the proposed delegated duties safely; and

11.5.d. The practice agreement only proposes the delegation of core duties and/or advanced duties:

11.5.d.1. Proposes the delegation of core duties in any practice setting; In a hospital or ambulatory surgical center which are included in the physician assistant’s delineation of duties approved by the practice location;
11.5.d.2. Proposes the delegation of advanced duties at a hospital or ambulatory surgical center; For which general approval protocol has been established by the Board and the physician assistant has met such protocol;

11.5.d.3. Proposes the delegation of advanced duties that the physician assistant has previously been authorized by the Board to perform;

11.5.d.4. Proposes only those advanced duties for which general approval protocol has been established by the Board and the physician assistant has met such protocol.

11.6. Proposed practice agreements which are not approved pursuant to the criteria established in subsection 11.5 of this rule shall be considered by the Board. The Board will not consider a proposed practice agreement until it has had at least fifteen days to review the application. When a practice agreement is to be reviewed by the Board because of the inclusion of certain proposed advanced duties, Board staff may issue the physician assistant authorization to practice pursuant to all portions of the practice agreement which do not require Board review.

11.7. Prior to making a determination with regard to a proposed practice agreement, the Board may request additional information from the supervising collaborating physician and/or the physician assistant, either through an appearance or through written documentation, to evaluate the proposed delegation of duties.

11.8. Where necessary to ensure patient safety, the Board may authorize a physician assistant to practice or perform certain medical acts under direct supervision on-site collaboration or personal supervision collaboration for a period of time so that the Board and the supervising collaborating physician may assess the ability of the physician assistant to perform the tasks safely.

11.9. The Board may decline to authorize a physician assistant to commence practice pursuant to a proposed practice agreement if the Board determines that:

11.9.a. The practice agreement is inadequate and/or incomplete;

11.9.b. The proposed delegation exceeds the appropriate scope of practice; or

11.9.c. The supervising collaborating physician and physician assistant have failed to establish that the physician assistant is able to perform the proposed delegated duties safely.

11.10. A new practice agreement, with the required fee, must be filed for approval by the Board if:

11.10.a. A supervising collaborating physician and physician assistant seek to change or add to the delegated medical acts in an approved practice agreement;

11.10.b. A supervising collaborating physician and physician assistant seek to change the physician assistant’s practice setting and/or principle place of practice;
11.10.c. A physician assistant seeks to enter into a practice agreement with a different supervising collaborating physician;

11.10.d. A physician assistant seeks to resume practice after reinstatement of licensure; or

11.10.e. The Board has requested the submission of a revised practice agreement as a result of any investigation, discipline or audit activity.

11.11. A supervising collaborating physician may amend a physician assistant’s authorized list of alternate supervising collaborating on a Board approved form without resubmitting the entire practice agreement for approval. The Board may designate a fee for the submission of changes to a physician assistant’s alternate supervisors collaborators. Any such fee shall be established by 11 CSR 4.

11.12. A physician assistant may simultaneously maintain practice agreements with more than one supervising collaborating physician if:

11.12.a. The physician assistant’s scope of professional duties requires multiple physician supervisors; or

11.12.b. The physician assistant has more than one employer.

11.13. A supervising collaborating physician or a physician assistant may terminate a practice agreement. A physician assistant shall immediately cease practicing upon the termination of a practice agreement. The physician assistant must notify the Board, in writing, within ten days of the termination of any practice agreement.

§11-1B-12. Delegation of Prescriptive Authority.

12.1. A supervising collaborating physician may delegate limited prescriptive authority to a physician assistant in a practice agreement if:

12.1.a. The physician assistant has obtained a baccalaureate or master’s degree from an approved program of instruction for physician assistants or has successfully completed an accredited course of instruction in clinical pharmacology approved by the Board of not less than four semester hours. The Board may grant up to one credit hour equivalent for two or more years of prescribing experience in other jurisdictions;

12.1.b. The physician assistant provides evidence of successful completion of a minimum of three hours of drug diversion training and best practice prescribing of controlled substances training through a Board approved course within two years prior to his or her application submission to the Board for limited prescriptive privileges; and

12.1.c. The supervising collaborating physician and physician assistant attest that:
12.1.c.1. The physician assistant has successfully completed the necessary requirements to be eligible to prescribe pursuant to a practice agreement;

12.1.c.2. All prescribing activities of the physician assistant shall comply with applicable federal and state law governing the practice of physician assistants the Board approved limitations on physician assistant prescribing;

12.1.c.3. All medical charts or records shall contain a notation of any prescriptions written by a physician assistant; and

12.1.c.4. All prescriptions, including electronic prescriptions, written by the physician assistant will include the physician assistant’s name and the supervising collaborating physician’s name, business address and business telephone number.

12.2. To delegate prescriptive authority, the supervising collaborating physician shall ensure that the practice agreement includes a clear delineation of the delegated authority and whether it includes the prescribing, administering, dispensing and/or ordering of drugs and/or medical devices.

12.3. On an annual basis, the Board shall approve and publish on its website a list classifying pharmacologic categories of all drugs which physician assistants are prohibited from prescribing. This list shall, at a minimum, prohibit physician assistants from prescribing:

12.3.a. Schedules I and II of the Uniform Controlled Substances Act;

12.3.b. Greater than a non-refillable seventy-two hour supply of a drug listed under Medications listed under Schedule III of the Uniform Controlled Substances Act are limited to a 30 day supply without refill;

12.3.c. Antineoplastics and chemotherapeutic agents used in the active treatment of current cancer; and

12.3.d. Radio-pharmaceuticals, general anesthetics and radiographic contrast materials;

12.3.e. General Anesthetics.

12.4. A practice agreement may not delegate the prescribing of a drug that the Board has prohibited physician assistants from prescribing.

12.5. A supervising collaborating physician who seeks to delegate prescribing authority to a physician assistant shall provide the physician assistant with treatment protocols which identify maximum prescribing dosages. Prescriptions written by a physician assistant shall be issued consistent with the supervising collaborating physician's directions and treatment protocol, and in no case may the dosage exceed the manufacturer’s recommended average therapeutic dose for the prescribed drug.
12.6. Each prescription and subsequent refills given by the physician assistant shall be entered on the patient's chart.

12.7. Physician assistants authorized to issue prescriptions for Schedules III through V controlled substances shall include the Federal Drug Enforcement Administration number issued to that physician assistant. The maximum amount of Schedule IV or Schedule V drugs shall be no more than ninety dosage units or a thirty-day supply, whichever is less, and may not authorize a refill.

12.8. A physician assistant shall, at the time of the initial prescription, record in the patient medical record the plan for continued evaluation of effectiveness of the controlled substance prescribed.

12.9. A physician assistant may administer local anesthetics.

12.10. Prescriptions for other legend drugs shall not be prescribed or refillable for a period exceeding six months, except that an annual supply of any drug, other than a controlled substance, may be prescribed for the treatment of a chronic condition other than chronic pain management. An annual supply may be prescribed or dispensed in smaller increments in order to assess the drug's therapeutic efficacy. The chronic disease being treated shall be noted on each such prescription by the physician assistant.

12.11. The prescription authorized by a physician assistant shall comply with the requirements of this rule and the requirements of the West Virginia Board of Pharmacy, other applicable state and federal laws, rules and regulations, and all applicable standards of care.

12.12. All prescriptions, including electronic prescriptions, written by the physician assistant will include the physician assistant's name, professional designation, practice location, telephone number, signature, license number issued by the Board, the collaborating physician's name, business address and business telephone number, and any other information required by state and federal law.

12.13. Within five business days following a Board meeting, the Board of Medicine shall provide the Board of Pharmacy with a list of physician assistants with limited prescriptive privileges along with the categories of drugs or drugs within a category that the physician assistant has been authorized to prescribe.

12.14. Nothing in this rule shall be construed to permit any physician assistant to independently prescribe or dispense drugs prescribe, administer, order or dispense medications outside of the delegation set forth in an approved practice agreement.

12.15. Physician assistants granted limited prescriptive privileges pursuant to an authorized practice agreement may accept professional samples as defined in 11 CSR 5 and may apply to be registered as a controlled substance dispensing practitioner as set forth in 11 CSR 5.

§11-1B-13. Continuing Medical Education Requirements.
13.1. A physician assistant is required to complete a minimum of one hundred hours of continuing education during each two-year licensure cycle. A minimum of fifty hours shall be designated as Category I by either the American Medical Association, American Academy of Physician Assistants or the Academy of Family Physicians. The remaining hours may be obtained from Category I or Category II.

13.2. Three hours of the required one hundred continuing education hours must include a Board approved course on drug diversion training and best practice prescribing of controlled substances training. If a physician assistant has not prescribed, administered or dispensed any controlled substances during a two-year licensure cycle, the physician assistant may, as part of his or her renewal application, request a waiver from the Board for this continuing education requirement. However, the training must be completed prior to the submission of any proposed practice agreement which includes the delegation of any prescriptive privileges or duties relating to the administration, ordering or dispensing of prescription drugs.

13.3. An applicant for licensure renewal shall timely submit to the Board a certification of the successful completion of the required hours of continuing education satisfactory to the Board during the preceding two-year period. The certification shall include an attestation by the renewal applicant that the continuing education certification is true and correct.

13.4. A licensee is required to provide supporting written documentation of the successful completion of the continuing education certified as received on the biennial renewal application form, if the Board issues a written request for such documentation. The licensee shall provide the Board with the written documentation so that it is received by the Board within thirty days of the licensee’s receipt of the written request.

13.5. Failure or refusal of a licensee to provide written documentation requested by the Board as set forth in subsection 13.4 of this rule is prima facie evidence of renewing a license to practice as a physician assistant by fraudulent misrepresentation and the licensee may be subject to disciplinary proceedings pursuant to sections 16 and 17 of this rule.

13.1. Successful completion of a minimum of one hundred hours of continuing education satisfactory to the Board during the preceding two-year period is required for the biennial renewal of a physician assistant license.

13.2. Types and categories of continuing medical education satisfactory to the Board for physician assistants are:

13.2.a. Continuing medical education designated as Category I by either the American Medical Association, American Academy of Physician Assistants or the American Academy of Family Physicians.

13.2.b. Continuing medical education designated as Category II by either the American Medical Association, American Academy of Physician Assistants or the American Academy of
Family Physicians. A maximum of fifty hours of continuing medical education credit may be awarded for this category of activity.

13.2.c Obtaining a master’s degree from an accredited program of instruction for physician assistants within one year of the expiration of an initial license. A maximum of one hundred hours of continuing education credit may be awarded for this category of activity, but a physician assistant shall only be awarded ninety-seven hours of credit if the physician assistant is a mandatory participant in the continuing education activity described in subsection 13.3 of this rule.

13.2.d. Passing a recertification examination by the NCCPA during the reporting period. A maximum of one hundred hours of continuing medical education credit may be awarded for this category of activity, but a physician assistant shall only be awarded ninety-seven hours of credit if the physician assistant is a mandatory participant in the continuing education activity described in subsection 13.4 of this rule.

There are no other types or categories of continuing education activity for physician assistants satisfactory to the Board.

13.3. Mandatory Continuing Education Activity for Physician Assistants. – As a prerequisite to license renewal, a physician assistant who has prescribed, administered, or dispensed any controlled substance pursuant to a West Virginia license during the reporting period shall complete a Board-approved continuing education activity for a minimum of three hours of drug diversion training and best practice prescribing of controlled substances training.

13.3.a. A physician assistant must complete this mandatory continuing education prior to submitting a proposed practice agreement which delegates prescribing authority or the authority to administer, order or dispense prescription drugs.

13.3.b. The Board-approved drug diversion training and best practice prescribing of controlled substances training shall satisfy three of the one hundred required hours of continuing education for the reporting period.

13.3.c. The Board shall maintain and publish on its website a current list of all educational activities which have been approved by the Board to satisfy the drug diversion training and best practice prescribing of controlled substances training continuing education requirement.

13.3.d. A renewal applicant who has not prescribed, administered, or dispensed any controlled substances pursuant to a West Virginia license during the reporting period may seek a waiver of this continuing education requirement by completing the required attestation and waiver request on the renewal application.

13.4. The Board shall include a certification of successful completion of required continuing education on its biennial renewal application. The certification shall require the renewal applicant to:

13.4.a. Certify successful completion of all required continuing education.
13.4.b. Attest to the truthfulness and accuracy of the renewal applicant's statements regarding continuing education activities;

13.4.c. Acknowledge that any license issued based upon the renewal application is based upon the truth and accuracy of the applicant's statements and that if false information is submitted in the application, such act constitutes good cause for the revocation of the renewal applicant's license to practice in the State of West Virginia; and

13.4.d. Sign and date the certification.

13.5. A license shall automatically expire if the certification required by subsection 13.4 is not submitted to the Board by the renewal deadline. An automatically expired license shall remain expired until a licensee successfully seeks reinstatement or reactivation of licensure.

13.6. A licensee shall maintain accurate records of all continuing education he or she has completed. Continuing education records shall be maintained for a period of six years.

13.7. The Board may conduct such audits and investigations as it considers necessary to assure compliance with continuing education requirements and to verify the accuracy of a renewal applicant’s certification of continuing education.

13.8. Upon written request of the Board to a licensee’s preferred mailing address or e-mail address of record with the Board, a licensee shall, within thirty days, submit written documentation satisfactory to the Board corroborating the licensee’s renewal application certification of continuing education compliance.

13.9. Failure or refusal of a licensee to provide written documentation requested by the Board as set forth in subsection 13.8 of this rule is prima facie evidence of renewing a license to practice as a physician assistant by fraudulent misrepresentation and the licensee is subject to disciplinary proceedings.


14.1. Except as otherwise provided by law, when practicing as a physician assistant, a physician assistant must wear a name tag in a conspicuous manner which identifies the practitioner as a physician assistant. An individual may not identify himself or herself as a physician assistant unless licensed by this Board or the Osteopathic Board. A physician assistant may not identify him or herself as a certified physician assistant, or use the professional designation of "P.A.-C." unless he or she is currently certified by the NCCPA.

14.2. A physician assistant shall keep his or her license and current practice agreement available for inspection at each of his or her primary places of practice.

14.3. A physician assistant shall notify the Board in writing of a change in the physician assistant's name or address within fifteen days after the change.
14.4. The Board may review physician assistant utilization without prior notice to either the physician assistant or the supervising collaborating physician. An authorized representative or investigator for the Board may, without prior notice, enter at any reasonable hour a place of employment or practice of a physician or physician assistant or into public premises:

14.4.a. For the purpose of an audit to verify general compliance with the Physician Assistants Practice Act and this legislative rule; or

14.4.b. To investigate an allegation or complaint with respect to a supervising collaborating physician, alternate supervising collaborating physician or physician assistant.

14.5. A person may not deny or interfere with an entry under this section.

14.6. The Board’s representatives may require a physician, physician assistant, or facility where the physician assistant is employed or practicing to provide access to records relating to the physician assistant’s licensure, employment, credentialing, and practice and medical records of patients seen by the physician assistant. It is a violation of this rule for a supervising collaborating physician or a physician assistant to refuse to undergo or cooperate with a review or audit by the Board.

14.7. The Board’s representative shall refer possible compliance issues to the appropriate Committee of the Board and/or to any other agency that has jurisdiction over a facility, place of practice or practitioner.

§11-1B-15. Mental and Physical Examination.

15.1. The Board under any circumstances may require a licensed physician assistant or a person applying for licensure or other authorization to practice as a physician assistant in this state to submit to a physical or mental examination by a physician or physicians approved by the Board. The expense of the examination shall be paid by the Board.

15.2. A physician assistant submitting to an examination has the right, at his or her expense, to designate another physician to be present at the examination and make an independent report to the Board.

15.3. An applicant or licensee is considered to have given his or her consent to submit to all examinations when requested to do so in writing by the Board and to have waived all objections to the admissibility of the testimony or examination report of an examining physician on the ground that the testimony or report is privileged communication.

15.4. If a person fails or refuses to submit to an examination under circumstances which the Board finds are not beyond his or her control, failure or refusal is prima facie evidence of his or her inability to practice as a physician assistant competently and in compliance with the standards of acceptable and prevailing physician assistant practice.
§11-1B-16. License Denial, Complaint and Disciplinary Procedures.

16.1. The licensure denial, complaint and disciplinary process and procedures and appeal rights set forth in the contested case hearing procedure, W. Va. Code §29A-5-1 et seq., W. Va. Code §30-3-14(h) and (i), and in the Board’s procedural rule, 11 CSR 3, Board Organization and Meeting Procedure; Complaint and Contested Case Hearing Procedure, also apply to physician assistants.

16.2. If the Board determines the evidence in its possession indicates that a physician assistant's continuation in practice or unrestricted practice constitutes an immediate danger to the public, the Board may take any of the actions provided in W. Va. Code §30-3-14(j) on a temporary basis and without a hearing if institution of proceedings for a hearing before the Board are initiated simultaneously with the temporary action and begin within fifteen days of the action. The Board shall render its decision within five days of the conclusion of a hearing under this subsection.

§11-1B-17. Denial of Licensure and Discipline.

17.1. The Board may deny an application for license, or other authorization to practice as a physician assistant and may discipline a physician assistant licensed by the Board who, after a hearing, has been adjudged by the Board as unqualified due to any of the following reasons:

17.1.a. Conduct by a physician assistant which is equivalent to any of the grounds cited for the discipline of physicians or pediatricians or pediatric physicians in W. Va. Code §30-3-14(c) or section 12 of the Board’s rule 11 CSR 1A;

17.1.b. Failure to comply with any portion of this rule, the provisions of W. Va. Code §30-3E-1 et seq. and any other rule of the Board;

17.1.c. Practicing as a physician assistant:

17.1.c.1. In the absence of an authorized practice agreement;

17.1.c.2. Outside or beyond the scope of an authorized practice agreement; or

17.1.c.3. Beyond his or her level of competence, education, training and/or experience;

17.1.d. Prescribing a prescription drug which is not included in an authorized practice agreement for that physician assistant or the Board has prohibited physician assistants from prescribing;

17.1.e. Prescribing any controlled substance to or for himself or herself, or to or for any member of his or her immediate family;

17.1.f. Failure of a physician assistant to:
17.1.f.1. Notify the Board that an authorized practice agreement has been terminated in the required time frame; or

17.1.f.2. Maintain a copy of his or her license and authorized practice agreement in each primary place of practice;

17.1.g. Independently billing for services rendered;

17.1.h. 17.1.g. Impersonation of a licensed physician, podiatrist podiatric physician or another licensed physician assistant;

17.1.i. 17.1.h. Misrepresentation that the physician assistant is a physician, that the physician assistant is currently certified by the NCCPA, or that the physician assistant holds any position for which he or she is not qualified by license, training, or experience;

17.1.j. 17.1.i. Knowingly permitting another person to misrepresent the physician assistant as a physician;

17.1.k. 17.1.j. Misrepresentation or concealment of any material fact in obtaining any certification or license or a reinstatement or reactivation of any certification or license related to his or her practice as a physician assistant.

17.2. If a physician assistant is found guilty of or pleads guilty or nolo contendere to any court of competent jurisdiction of any felony involving prescribing, selling, administering, dispensing, mixing or otherwise preparing any prescription drug, including any controlled substance under state or federal law, for other than generally accepted therapeutic purposes in a state or federal court of competent jurisdiction, the Board shall deny an application for licensure or revoke the physician assistant’s license without resort to the procedures set forth in section 16 of this rule. A certified copy of the guilty verdict or plea rendered is sufficient proof for licensure denial or revocation.

17.3. If the Board determines that a physician assistant is unqualified, the Board may enter an order denying an application or imposing any limitation, restriction or other disciplinary measure set forth in W. Va. Code §30-3-14(j) and/or 11 CSR 1A.

17.4. In their discretion, the Board and the Osteopathic Board may refer and receive information from one another concerning:

17.4.a. Mutual applicants and/or licensees;

17.4.b. Information developed during the complaint and investigation process of one board which implicates or otherwise relates to licensees of the other board;

17.4.c. Any Complaints received or discovered by one board which relate to mutual licensees or licensees of the other board.
CALL TO ORDER

Approval of Minutes

- July 9, 2017
- July 24, 2017
- August 21, 2017

Agenda Items:

- Board of Medicine Legislative Rules
  - 11 CSR 6
  - 11 CSR 1B
  - Emergency Rule 11 CSR 1B

- Interim Meetings of the WV Legislature

- WVU Meeting – Legislative Items of Interest

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 10th day of September, 2017, at 10:30 a.m.

The following Committee members were present:

Beth Hays, M.A., Chair
Reverend O. Richard Bowyer
Ahmed Faheem, M.D., D.L.F.A.P.A.
David Mullins, M.D.

The following Committee member was absent:

K. Dean Wright, P.A.-C.

The following staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame
Andrew R. Wessels

Ms. Hays called the meeting to order. Dr. Faheem moved that the minutes of the July 9, 2017, July 24, 2017 and August 21, 2017 meeting be approved. Dr. Mullins seconded, and the motion carried.

Ms. Alley reported that the comment period regarding proposed amendments to 11 CSR 6, *Continuing Education for Physicians and Podiatrists*, concluded at 4:30 p.m. on Friday, July 21, 2017. There were no comments received. Board staff have filed the agency approved version of the proposed rule with the Secretary of State’s office, and the Legislative Rule-Making Review Committee has authorized the Board to promulgate the proposed rule as filed with no modifications.
Mr. Spangler reported that the comment period regarding proposed amendments to 11 CSR 1B, *Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants*, concluded at 4:30 p.m. on Thursday, August 10, 2017. The Legislative Committee met on Monday, August 21, 2017 and considered the eighteen comment that were submitted regarding the proposed amendments to the rule. Following review of the comments, minor modifications were made to the rule. Board staff have filed the agency approved version of the proposed rule with the Secretary of State’s office.

In advance of today’s meeting, a copy of the proposed Emergency Rule 11 CSR 1B, *Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants*, was made available for committee members to review. Mr. Spangler reported to the Committee that Senate Bill 1014 was passed during the 2017 Special Session and became effective on September 7, 2017. This legislation authorizes changes to physician assistant practice including, among other things, expanded prescribing and signature authority. In order to implement the changes, the Board will need to file an Emergency Rule with the Secretary of State’s office. Following discussion, Reverend Bowyer moved that the Committee recommend that the Board authorize staff to move forward with filing Emergency Rule 11 CSR 1B, *Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants*, with the Secretary of State’s office. Dr. Faheem seconded, and the motion carried.

Mr. Spangler reported that in August he and Mr. Wessels presented information to the Joint Committee on Health regarding the Board of Medicine’s research into Medical Liability Review Panels. He reiterated to the Joint Committee on Health that the Board of Medicine is not the appropriate entity to administer such a panel. Board staff will monitor future legislative efforts to establish a Medical Liability Review Panel and will provide updates as necessary.
Mr. Spangler reported that the Board received a letter from Delegate Gary Howell, Chairman of the Government Organization Committee requesting an update during the September interim meeting regarding the status of a physician. The physician referenced in Chairman Howell’s letter is an osteopathic physician. The Board responded to Chairman Howell indicating such.

Mr. Spangler reported to the Committee that in July, Ms. Alley, Mr. Wessels, Reverend Bowyer, Dr. Upton and himself met with representatives of West Virginia University (WVU) School of Medicine. During the meeting, WVU representatives identified the following issues that they hope to address cooperatively with the Board of Medicine:

1. The inability of a licensee who holds a temporary license to bill Medicaid;
2. The expansion of faculty licenses beyond a university’s medical center; and
3. The ten year rule to pass all steps of the United States Medical Licensing Exam (USMLE).

Mr. Spangler reported he is working with Dr. Joseph Shapiro, Dean of Marshall University School of Medicine, to facilitate a visit to the Joan C. Edwards School of Medicine. Board members are encouraged to participate in the visit. Additional information will be provided as it becomes available.

There being no further business to consider, Dr. Faheem moved that the meeting adjourned. Dr. Mullins seconded, and the motion carried.

Ahmed D. Faheem, M.D., D.L.F.A.P.A.
Chair of the Legislative Committee
CALL TO ORDER

Approval of Minutes

- September 10, 2017

Agenda Items:

- Board of Medicine Legislative Rules
  - 11 CSR 1B
  - Emergency Rule - 11 CSR 1B – Effective October 20, 2017

- Potential Legislative Topics in 2018
  - Resident License
  - Burden of Proof in Disciplinary Proceedings
  - Authorization / Certification to Carry Firearms for Board Investigators
  - Physician Advertising
  - Medical Cannabis

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Legislative Committee Minutes
November 12, 2017

A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 12th day of November, 2017, at 10:30 a.m.

The following Committee members were present:

Ahmed D. Faheem, M.D., D.L.F.A.P.A., Chair
Reverend O. Richard Bowyer
K. Dean Wright, P.A.-C.

The following Committee member was absent:

David Mullins, M.D.

The following staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame
Andrew R. Wessels

The following Board members were present:

Victoria Mullins, P.A.-C.
Kishore K. Challa, M.D., F.A.C.C.
Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P.

Dr. Faheem called the meeting to order. Reverend Bowyer moved that the minutes of the September 10, 2017 meeting be approved. Mr. Wright seconded, and the motion carried.

Mr. Spangler reported that the Board’s Emergency Rule 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants, became effective on October 20, 2017. The companion legislative rule is scheduled for consideration by the Legislative Rule-Making Review Committee (LRMRC) during the interim committee
meetings which will be held on December 3-5, 2017. LRMRC Counsel has suggested that the Board consider modifying the rule to remove the requirement that licensees report their National Commission on Certification of Physician Assistants (NCCPA) certification status to the Board. Dr. Challa joined the meeting at this time. The Legislative Committee is not in favor of removing this requirement; however, the Board will comply if the Legislative Rule-Making Review Committee requires the change.

Mr. Spangler reported to the Committee that the Board of Medicine has received correspondence from Robert Whitler, Vice Present of Government and Community Affairs at Charleston Area Medical Center, requesting that the Board consider issuing educational permits to residents. The West Virginia Board of Osteopathic Medicine, in accordance with §24-1-13, issues postgraduate educational permits. The Committee is receptive to issuing educational permits to physicians participating in medical residencies, but will need to identify and define the parameters of such permits. Following discussion, Reverend Bowyer moved that the Committee recommend that the Board authorize staff to further research resident permits and draft a bill for the Committee and the Board to review at the January 2018 meeting, for possible introduction during the 2018 legislative session. Mr. Wright seconded, and the motion carried.

Mr. Spangler reported that the Board has previously expressed an interest in changing the burden of proof in Board disciplinary matters from clear and convincing evidence to a preponderance of evidence standard, which would align the Board of Medicine and the Board of Osteopathic Medicine. Discussion has occurred with legislative counsel, who suggests cleaning up section 14 of the Medical Practice Act in the process. Following discussion, Reverend Bowyer moved that the Committee recommend that the Board authorize staff to work collaboratively with legislative counsel on draft legislation to modify West Virginia Code §30-3-14 to include a change in the burden of proof and language clean-up, with the hope that the legislation will be introduced during the 2018 legislative session. Mr. Wright seconded, and the motion carried.
Mr. Spangler reported that the Board has previously identified seeking authorization for Board investigators to carry firearms as a 2018 legislative goal. Following discussion, Mr. Wright moved that the Committee recommend that the Board authorize staff to seek legislation that will allow at least one board investigator to carry a firearm once they have received appropriate training. Reverend Bowyer seconded, and the motion carried.

Mr. Spangler reported that it is possible that during the 2018 legislative session there may be efforts to permit the use of patient testimonials in physician advertising in West Virginia. Board staff have researched surrounding states regulation regarding physician advertising, and determined that Ohio, Maryland and Virginia allow for the use of patient testimonials in physician advertising, while Kentucky and Tennessee prohibit it. Additionally, while the American Medical Association does not prohibit any form of advertising, it does disfavor the use of patient testimonials. Board staff will monitor legislation introduced in upcoming session, and will keep the Committee apprised regarding this matter.

Mr. Spangler reported that on behalf of the West Virginia Bureau for Public Health (BPH), the Board recently emailed information regarding a medical cannabis survey to medical doctors and podiatric physicians who hold an active license with this Board. The survey, which closes on November 14, 2017, seeks geographical information from physicians interested in prescribing medical cannabis to patients. Dr. Gupta joined the meeting at this time, and reported that the information collected from the survey, which was largely geographical, will be used by the BPH in making decisions to ensure that there is an adequate amount of medical cannabis available to patients suffering from serious medical conditions in all areas of the state.

There being no further business to consider, Reverend Bowyer moved that the meeting adjourned. Mr. Wright seconded, and the motion carried.

Ahmed D. Faheem, M.D., D.L.F.A.P.A.  
Acting Chair of the Legislative Committee
CALL TO ORDER

Approval of Minutes

- November 13, 2017

Agenda Items:

- Board of Medicine Legislative Rule
  - 11 CSR 1B

- Proposed 2018 Interim Legislative Committee Meeting Dates
  - January 25, 2018 at 5:00 p.m.
  - February 8, 2018 at 5:00 p.m.
  - February 22, 2018 at 5:00 p.m.
  - March 8, 2018 at 5:00 p.m.

- Authorization of the Legislative Committee to Act on Behalf of the Board During the 2018 Legislative Session

- Proposed Rules Regarding Medical Cannabis

- Proposed Bill Regarding Reorganization of WVDHHR

- Potential Legislative Topics in 2018
  - Resident License
  - Burden of Proof in Disciplinary Proceedings/Opioid Reduction Act
  - Authorization / Certification to Carry Firearms for Board Investigators
  - Physician Advertising
  - RN/LPN Board Consolidation Bill and Related Matters
  - Prescribing Authority for Psychologists

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 7th day of January 2018, at 9:30 a.m.

The following Committee members were present:

K. Dean Wright, P.A.-C., Chair  
Ahmed D. Faheem, M.D., D.L.F.A.P.A  
Reverend O. Richard Bowyer  
Timothy Donatelli, D.P.M.  
Victoria Mullins, P.A.-C.  
Matthew Upton, M.D.

The following staff members were present:

Mark A. Spangler, M.A.  
Jamie S. Alley, Esq.  
Greg S. Foster, Esq.  
Jamie C. Frame  
Andrew R. Wessels

The following Board member was present:

Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P.

Mr. Wright called the meeting to order. Dr. Faheem moved that the minutes of the November 13, 2017 meeting be approved. Ms. Mullins seconded, and the motion carried.

Mr. Spangler reported that the Legislative Rule-Making Review Committee has approved the Board’s proposed legislative rule 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants. Board staff will monitor the rule throughout the 2018 legislative session.
The Legislative Committee reviewed the following proposed interim meeting dates:

Thursday, January 25, 2018   5:00 p.m.
Thursday, February 8, 2018   5:00 p.m.
Thursday, February 22, 2018  5:00 p.m.
Thursday, March 8, 2018     5:00 p.m.

Ms. Mullins moved that the proposed interim Legislative Committee meeting dates be approved. Dr. Upton seconded, and the motion carried. Dr. Faheem moved that the Committee recommend that the Board grant the Legislative Committee authority to act on behalf of the Board as necessary to respond to legislative matters, at these meetings and any other special meetings which may be necessary, during the 2018 legislative session. Dr. Upton seconded, and the motion carried.

At its November 2017 meeting, the Board authorized staff to research issuing educational permits to residents, and to draft a bill for the Committee and the Board to review for possible introduction in the 2018 legislative session. Prior to today’s meeting, a proposed draft bill was made available for members to review. Mr. Spangler reported that the proposed bill removes language which provides that “a person engaged in graduate medical training in a program approved by the Accreditation Council for Graduate Medical Education or the board” is exempt from the licensing requirements. Additionally, the bill identifies the requirements that a resident must meet in order to be issued an educational permit by the Board. The bill also provides the Board authority to promulgate an emergency rule. Implementation of the rule will require a database change and a possible increase in staff; therefore, it is recommended that the implementation of the rule become effective in July 2019. Following discussion, Dr. Faheem moved that the Committee recommend that the Board support introduction of the bill relating to resident educational permits during the 2018 legislative session. Reverend Bowyer seconded, and the motion carried.
Mr. Spangler reported that at its November 2017 meeting, the Board authorized staff to work collectively with legislative counsel on draft legislation to modify West Virginia Code §30-3-14 to include changing the burden of proof in Board disciplinary matters from clear and convincing evidence to a preponderance of evidence standard, which would align the Board of Medicine and the Board of Osteopathic Medicine. Rather than becoming an independent bill, the burden of proof standard has been incorporated in the Opioid Reduction Act. The language in the Opioid Reduction Act:

1. Changes the burden of proof in Board disciplinary matters from clear and convincing evidence standard to a preponderance of evidence standard;
2. Limits issuing an opiate to a patient in an emergency room setting for outpatient use to a three-day supply;
3. Limits the initial prescription of an opiate to a patient in an outpatient setting to a seven-day supply;
4. Sets forth requirements for practitioners, which includes requiring practitioners to access the Controlled Substance Monitoring Program (CSMP);
5. Broadens the access that licensing boards have regarding accessing the CSMP database;
6. Requires that the Board of Pharmacy report to licensing boards quarterly regarding abnormal prescribing practices; and
7. Establishes parameters on how a licensing board may use information gathered from quarterly CSMP reports received from the Board of Pharmacy.

Dr. Faheem moved that the Committee recommend that the Board support this bill in principal and monitor the bill during the upcoming legislative session. Reverend Bowyer seconded, and the motion carried.

Dr. Gupta joined the meeting at this time.
Mr. Spangler reported to the Committee that there has been legislation drafted which would permit at least one board investigator to carry a firearm once they have received appropriate training. Legislative counsel have been unable to find a sponsor for the bill, therefore, Board staff will seek to find a sponsor.

Mr. Spangler reported to the Committee that it is unclear if there will be legislation introduced during the 2018 legislative session related to physician advertising. Board staff will monitor any such legislation if it is introduced and will keep the Committee apprised.

Mr. Spangler reported that legislation will likely be introduced in the upcoming legislative session that would combine the West Virginia Board of Examiners for Registered Professional Nurses and the West Virginia Board of Examiners for Licensed Practical Nurses. Board staff will monitor any such legislation and will keep the Committee apprised.

Mr. Spangler reported to the Committee that there is talk of a bill which would provide for prescribing authority for psychologists who hold a Ph.D. Reverend Bowyer moved that the Committee recommend that the Board oppose legislation granting prescribing authority for Ph.D. psychologists, if such legislation is introduced. Dr. Faheem seconded, and the motion carried.

Dr. Gupta reported that the West Virginia Bureau for Public Health will be releasing a report regarding recommendations on how to address the opioid crisis. Reverend Bowyer moved that the Committee recommend that the Board delegate Mr. Spangler to take a position with regard to the report once it is released. Dr. Faheem seconded, and the motion carried.

Dr. Gupta reported to the Committee regarding the proposed medical cannabis rules. A recent survey completed by physicians licensed in West Virginia indicated that 82% of the physicians who responded to the survey are interested in participating in the medical cannabis program. Dr. Gupta encouraged the Board to work with the Cannabis Advisory Board Work Groups, and to use the work groups as a voice for the Board.
Dr. Gupta provided an overview of the draft bill which would reorganize the West Virginia Department of Health and Human Resources. This bill provides that the Board of Medicine, as well as other regulatory boards, would “remain as autonomous entities but may be subject to administrative oversight of the Department of Health and Compliance for purposes of consistency of service delivery.” Due to concerns with the way that the draft bill is proposed, Dr. Faheem moved that the Committee recommend that the Board not support the bill as written. Reverend Bowyer seconded, and the motion carried.

There being no further business to consider, Dr. Faheem moved that the meeting adjourned. Reverend Bowyer seconded, and the motion carried.

ADJOURNMENT

K. Dean Wright, P.A.-C.
Chair of the Legislative Committee
CALL TO ORDER

Agenda Items:

- **Update on Board of Medicine bills**
  - SB 197 and HB 4069 – 11 CSR 1B – Licensing and disciplinary procedures for physicians and podiatric physicians
  - SB 198 and HB 4070 11 CSR 6 – Continuing education for physicians and podiatric physicians
  - HB 4027 – Creating an education permit for allopathic physician residents
  - Burden of Proof
  - Authorization for investigators to carry firearms

- **Bills related to responding to the opioid crisis and other matters related to controlled substances**
  - SB 2 – Reducing use of opiates
  - Other bills regarding prescribing limitations for opioids
    - SB 129 – Limiting time prescriptions may be issued for certain controlled substances
    - SB 149 – Establishing safeguards for treatment of acute pain and opioid medications
    - SB 273 – Reducing use of opiates
    - SB 329 – Relating to prescribing opioids
    - HB 4003 – Reducing the use of certain prescription drugs
  - SB 272 and HB 4227 – Relating generally to drug control
  - HB 2614 (carryover from previous session) – Prohibiting health care practitioners from knowingly and in bad faith prescribing or administering drugs
  - HB 4172 – Establishing a crisis line and mobile application for the public to combat the crisis in this state posed by substance abuse
  - HB 4181 – Permitting unused, unexpired nonnarcotic drugs to be distributed to free health care clinics
  - HB 4215 – Involuntary hospitalization of persons administered opioid antagonists
Board regulation / government structure
  o HB 4014 – Reorganization of DHHR
  o SB 269 and HB 4154 – 2018 Regulatory Reform Act
  o SB 313 - Waiving occupational fees and licensing requirements for certain low-income individuals, military families, and young workers
  o HB 2011 – Prohibiting state agencies and departments from acting outside their statutory scopes of authority
  o HB 2216 (carryover from last session) – Making individuals responsible for the costs related to the filing of excessive false complaints
  o HB 2521 (carryover from previous session) – APRN Compact
  o HB 2823 (carryover from previous session) – Establishing a statewide call-in center to receive assistance with healthcare
  o HB 2921 – Establishing a website clearinghouse for sharing information about potential sources of revenue, financial technical and legal assistance for government agencies

Bills related to immunization or other practice issues
  o SB 318 – Requiring influenza immunizations for health care workers
  o SB 330 and HB 2945 – Relating to exemptions from mandated immunizations
  o SB 337 – Permitting parents of newborns to decline administration of specific required medication at birth
  o SB 25 – Prohibiting doctors and lawyers from filing fraudulent disability claims
  o HB 2165 (carryover from last session) – Relating to out of state physicians and surgeons traveling with sports teams within this state
  o HB 2327 (carryover from last session) – Protecting consumers from surprise bills by health care providers
  o HB 2423 (carryover from last session) – Relating to the criminal offense of therapeutic deception
  o HB 4035 – Creating a legislative coalition to study and report to the Legislature on palliative care
  o HB 4175 – Preventing requirement that an APRN or PA participate in a collaborative relationship to obtain payment
  o HB 4199 – Permitting a nursing home to use trained individuals to administer medication
  o HB 4217 – Permitting an attending physician to obtain a patient’s autopsy report
o **HB 4218** – Relating to medical professional liability
o **HB 4239** – Relating to regulating prior authorizations
o **HB 4012 and HB 4246** - Relating to abortions
o **HB 4247** – Relating to life-sustaining treatment policies of health care facilities; “Simon’s law”
  o **HB 4253** – Responders Protection Act

- **Other legislative topics of interest**
  o Professional Board structure, consolidation and termination
  o Special revenue bills and appropriations
  o Medical Cannabis
  o County Commissions
  o Physician Tax Credit

- **New bills introduced after January 22, 2018**
  o **HB 4260** – Prescriptive Authority for psychologists

**ADJOURNMENT**
WEST VIRGINIA BOARD OF MEDICINE

Legislative Committee Minutes

January 25, 2018

A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 25th day of January 2018, at 5:00 p.m.

The following Committee member was present:

Victoria Mullins, P.A.-C.

The following Committee members attended via teleconference:

K. Dean Wright, P.A.-C., Chair
Kishore K. Challa, M.D.
Ahmed D. Faheem, M.D., D.L.F.A.P.A
Reverend O. Richard Bowyer
Matthew Upton, M.D.

The following Committee member was absent:

Timothy Donatelli, D.P.M.

The following Staff members were present:

Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame
Andrew R. Wessels

Mr. Wright called the meeting to order. Mr. Wright informed the Committee that Mr. Spangler would be absent from the meeting due to the funeral service of a close friend.

Ms. Alley reported to the Committee that the following Board of Medicine legislative rule bills have been introduced and are single referenced to Senate Judiciary Committee: (1) Senate Bill 197, relating to licensure, disciplinary and complaint procedures, continuing education physician assistants; and (2) Senate Bill 198, relating to continuing education for
physicians and podiatric physicians. There has been no activity with regard to these bills since introduction.

Ms. Alley reported that the following Board of Medicine legislative rule bills have been introduced and have passed House Health and Human Resources Committee with no amendments: (1) **House Bill 4069**, relating to licensure, disciplinary and complaint procedures, continuing education physician assistants; and (2) **House Bill 4070**, relating to continuing education for physicians and podiatric physicians. Both of these bills now move to House Judiciary Committee.

Ms. Alley reported that **House Bill 4027**, creating an education permit for allopathic physicians, has been introduced. Mr. Spangler, Ms. Alley, Mr. Wessels, and Laura Boone, Director of Health Sciences Programs for the West Virginia Higher Education Policy Commission, recently met with counsel for the House Education Committee regarding this bill. A proposed strike and insert amendment has been drafted and was made available to members for review prior to today's meeting. Following discussion, Reverend Bowyer moved that the Committee support the proposed amendment and authorize Board staff to make the following non-substantive modifications:

1. modify the first paragraph to clarify that a licensee can participate in training if they have a permit or a license;
2. separate the educational pathways into three subparts for structural clarity; and
3. provide that an applicant is only eligible to apply for an education permit if they have never held a license to practice medicine and surgery in West Virginia.

Dr. Challa seconded, and the motion carried.

Dr. Faheem joined the meeting via teleconference at this time.
Ms. Alley reported that Mr. Spangler is seeking a sponsor to introduce a bill which would authorize at least one investigator to carry a firearm after receiving appropriate training. If a sponsor is obtained, the West Virginia Board of Pharmacy has requested that their investigator(s) be included in the bill.

Ms. Alley reported that **Senate Bill 2**, Opioid Reduction Act, has been introduced. This bill currently:

1. changes the burden of proof in Board disciplinary matters from a clear and convincing evidence standard to a preponderance of evidence standard;
2. limits issuing an opiate to a patient in an emergency room setting for outpatient use to a three-day supply;
3. limits the initial prescription of an opiate to a patient in an outpatient setting to a seven-day supply;
4. sets forth requirements for practitioners, which includes requiring practitioners to access the Controlled Substance Monitoring Program (CSMP);
5. broadens the access that licensing boards have regarding accessing the CSMP database;
6. requires that the Board of Pharmacy report to licensing boards quarterly regarding abnormal prescribing practices; and
7. establishes parameters on how a licensing board may use information gathered from quarterly CSMP reports received from the Board of Pharmacy.

Additionally, the bill grants the Board of Pharmacy emergency rule making authority to develop criteria for referral to the Board of Medicine and other licensing boards. It is likely that a Committee Substitute will be introduced which would:
1. strike the language which changes the burden of proof in Board disciplinary matters from a clear and convincing evidence standard to a preponderance of evidence standard;
2. remove Gabapentin from the updated list of schedule of controlled substances; and
3. remove the language which broadens the access that licensing boards have regarding accessing the CSMP database.

There has been no movement with regard to this bill since introduction. The Committee will continue to support this bill.

Several Senators are opposed to changing the burden of proof standard; therefore, it is likely that a committee substitute will be introduced, which will strike the burden of proof language from the bill. Reverend Bowyer moved that the Committee authorize Mr. Spangler to speak with representatives in the house and the senate to seek a sponsor to introduce legislation regarding the burden of proof standard. Ms. Mullins seconded, and the motion carried.

Ms. Alley reported that the following bills which relate to prescribing limitations for opioids have been introduced:

- **Senate Bill 129**, limiting time prescriptions may be issued for certain controlled substances;
- **Senate Bill 149**, establishing safeguards for treatment of acute pain and opioid medications;
- **Senate Bill 273** and **House Bill 4263**, reducing the use of opiates;
- **Senate Bill 329**, relating to prescribing opioids; and
- **House Bill 4003**, reducing the use of certain prescription drugs

No action was taken with regard to these bills.
Ms. Alley reported that Senate Bill 272 and House Bill 4227. These bills would require hospital emergency room departments, as well as certain other law-enforcement and medical care providers, to report suspected or confirmed drug overdoses, and other drug-related instances, to the Office of Drug Control Policy. Fiscal notes indicate no fiscal impact. Board staff will continue to monitor these bills.

Ms. Alley reported on House Bill 2614. This bill provides that it is unlawful for any practitioner to knowingly and in bad faith prescribe, dispense, administer, mix or otherwise prepare a drug, including any controlled substance under state or federal law, in a manner not in accordance with accepted medical standards in the course of the practitioner’s professional practice. Any person who violates this law is guilty of a felony and, in addition to a minimum fine imposed of $250,000, shall be imprisoned in a state correctional facility for not less than five nor more than ten years. The bill is single referenced to House Prevention and Treatment of Substance Abuse Committee, and there has been no movement since introduction.

Ms. Alley reported that House Bill 4172, establishing a crisis line and mobile application of the public to combat the crisis in this state posed by substance abuse, has been introduced. The bill would establish a program under the West Virginia Department of Health and Human Resources to ensure that trained health care professionals accessed through a crisis line or app are available to assist the public in areas or substance abuse, substance addiction, suicide prevention, mental health counseling or crisis intervention while maintaining confidentiality of the person utilizing the resource. Board staff will continue to monitor this bill.

Ms. Alley reported that House Bill 4181 would permit unused, unexpired, nonnarcotic drugs, previously owned by nursing home patients or residents who subsequently have died, to be donated to free health care clinics throughout the state; provided, that the family of the deceased nursing home patient or resident gives consent for the donation of these drugs. Board staff will continue to monitor this bill.
Ms. Alley reported that **House Bill 4215**, involuntary hospitalization of persons administered opioid antagonists, has been introduced. This bill provides that any person who is administered an opioid antagonist by an initial responder is subject to the involuntary hospital provision of W.Va. Code §27-5-3. The bill also provides that administration of an opioid antagonist shall constitute a waiver of the requirements for a probable cause hearing under W.Va. Code §27-5-1 *et seq.*

Ms. Alley reported on **House Bill 4014**, reorganization of the West Virginia Department of Health and Human Resources. This bill provides that the Board of Medicine, as well as other chapter 30 boards, would remain autonomous entities, but may be subject to administrative oversight of the Department of Health and Compliance for purposes of consistency of service delivery. This bill was on the House Health and Human Resources Committee agenda for today, January 25, 2018, but was pulled off. The Committee previously voted not support this bill, and took no action to modify its position.

Ms. Alley reported that **Senate Bill 269** and **House Bill 4154**, 2018 Regulatory Reform Act, have been introduced. These bills would permit a person to apply to the West Virginia Development Office and request that a project be classified as a project of critical economic concern. If a project is designated a critical economic concern, within two months of the submission of a complete license or permit application, the state agency shall render a written report on the status of the application. The Board of Medicine generally already meets the two-month guideline. Board staff will continue to monitor this bill.

Ms. Alley reported on **Senate Bill 313** would require licensing authorities to waive all occupational fees and fees from licensing requirements for low-income individuals, military families and young workers. The bill also provides that the licensing authority shall process the application within 30 days of receiving it from the applicant. Dr. Challains moved that the Committee support the concept of waiving the licensure fees for military and indigent applicants,
but not support the remainder of the bill due to technical concerns. Dr. Upton seconded, and the motion carried.

Ms. Alley reported that the following bills have been introduced, but there has no movement since introduction:

**House Bill 2011** – prohibiting state agencies and departments from acting outside their statutory scopes of authority;

**House Bill 2216** – making individuals responsible for the costs related to the filing of excess false complaints;

**House Bill 2521** – Advance Practice Registered Nurse Compact; and

**House Bill 2823** – establishing a statewide call-in center to receive assistance with healthcare

Board staff will continue to monitor these bills.

Ms. Alley reported that **House Bill 2921**, establishing a website clearinghouse for sharing information about potential sources of revenue, financial, technical and legal assistance for government agencies, has been in introduced. This bill would require each agency of state government to periodically provide the Secretary of Commerce with basic information about the programs, agencies, organizations and businesses with which the agency works or has worked with that offer or provide revenue, financial, technical and legal assistance for agencies of state and local government. Board staff will continue to monitor this bill.

Ms. Alley reported on **Senate Bill 318**, requiring influenza immunizations for health care workers. This bill would require a health care worker working in a health care facility to receive an annual influenza immunization between September 1st and October 1st of every year. If a health care worker does not receive the influenza immunization during the requisite time frame, he or she shall be suspended from his or her employment until he or she has received the
required immunization. The bills also provides that a health care worker will not be suspended from employment if he or she provides a certificate from a personal physician indicating that the vaccination in contraindicated. Dr. Upton moved that the Committee oppose this bill due to technical concerns regarding the time frame. Dr. Challa seconded, and the motion carried.

Ms. Alley reported that **Senate Bill 330** and **House Bill 2945**, relating to exemptions from mandated immunizations have been introduced. These bills would allow for religious and parental personal / conscientious objections exemptions from vaccinations. Board staff will continue to monitor these bills.

Ms. Alley reported that **House Bill 4260**, prescriptive authority for psychologists, has been introduced. This bill would allow prescriptive authority for Ph.D level psychologists who meet certain criteria and who are in a collaborative agreement with a physician. Delegated prescriptive authority would only including medications for the treatment of mental health disease or mental illness that the collaborating physician treats and would exclude:

1. patients under 17 years old and older than 65;
2. patients who are pregnant;
3. patients with serious medical conditions or developmental or intellectual disabilities;
4. schedule II controlled substances;
5. controlled substances delivered by injection;
6. prescription narcotic drugs; and
7. benzodiazepine and buprenorphine.

The prescribing certificate would be issued by the Board of Medicine. Reverend Bowyer moved that the Committee not support House Bill 4260, granting prescriptive authority for Ph.D. psychologists. Dr. Challa seconded, and the motion carried.

Dr. Faheem left the teleconference at this time.
Ms. Alley reported that the following bills related to immunizations or other practice issues have been introduced:

**Senate Bill 337** – permitting parents of newborns to decline administration of specific required medication at birth;

**Senate Bill 25** – Prohibiting doctors and lawyers from filing fraudulent disability claims;

**House Bill 2165** – relating to out of state physicians and surgeons traveling with sports teams within this state;

**House Bill 2327** – protecting consumers from surprise bills by health care providers; and

**House Bill 2423** – relating to the criminal offense of therapeutic deception.

Board staff will continue to monitor these bills and will keep the Committee apprised.

Ms. Alley reported that **House Bill 4035**, creating a legislative coalition to study and report to the Legislature on palliative care, has been introduced. This bill would create an Advisory Commission on the Quality of Life. The Commission would provide guidance to the Legislature on potential statutory solutions relative to regulation of palliative care, end of life care and hospice. Board staff will continue to monitor this bill.

Ms. Alley reported on **House Bill 4175**, preventing requirement that an advanced practice registered nurse or physician assistant participate in a collaborative relationship to obtain payment. This bill, as originally introduced, provided that “an insurance company, managed care organization or the Public Employees Insurance Agency may not require a physician assistance or advanced practice registered nurse to participate in a collaborative agreement in order to obtain payment for his or her services.” The bill was amended in House Banking and Insurance Committee. The amendment removed physician assistants from the bill and provides that “an insurance company or managed care organization may not require an advanced practice registered nurse to participate in a collaborative agreement in order to obtain payment for his or her services.”
Ms. Alley reported that **House Bill 4199** would permit a nursing home to use trained individuals to administer medication under the direction of a registered professional nurse. Board staff will continue to monitor this bill.

Ms. Alley reported on **House Bill 4217**, permitting an attending physician to obtain a patient’s autopsy report. This bill, as originally introduced, added the attending physician to the list of individuals who may obtain autopsy report records. The bill was amended in House Health and Human Resources Committee. The amendment provides that “The Chief Medical Examiner is authorized to release a copy of the autopsy and toxicology reports upon the request of a treating physician whose patient has died for purposes of review and medical record completion.” Board staff will continue to monitor this bill.

Ms. Alley reported on **House Bill 4218**, relating to medical professional liability. This bill sets out requirements for an expert who signs a certificate of merit. As originally introduced, the signer of a certificate of merit would need to:

1. be licensed to practice medicine as of the date of the affidavit;
2. in the twelve months immediately preceding the alleged negligent act has been engaged in the treatment of patients and/or in the teaching/academic side of medicine in the same field of medicine as the defendant or defendants; and
3. be board certified in the same field of medicine if the defendant or defendants is board-certified. The board certification requirement shall not apply to an expert that began the practice of medicine prior to the existence of board certification in the applicable specialty.

The bill was amended in House Health and Human Resources Committee yesterday, January 24, 2018. The amendment strikes numbers one and two above, and inserts a new subdivision (1), which reads:

“(1) In the twelve months immediately preceding the alleged negligent act has been engaged in the treatment of patients in accordance with §55-7B-7; and”
Board staff will continue to monitor this bill and keep the Committee apprised.

Mr. Wessels reported on House Bill 4239, relating to regulating prior authorizations. This bill would establish universal forms and deadlines when a prior authorization is submitted electronically. Board staff will continue to monitor this bill.

Ms. Alley reported on House Bill 4012 and House Bill 4246, relating to abortions. House Bill 4012 passed House Health and Human Resources Committee today. This bill would amend the definition of medical services to exclude abortion. House Bill 4246 requires abortions to be performed by a physician. There has been no movement with regard to this bill since introduction.

Ms. Alley reported that House Bill 4247, relating to life-sustaining treatment policies of health care facilities, known as “Simon’s Law”, has been introduced. This bill would prohibit health care facilities and others from withholding life-sustaining procedures from a minor patient without the written consent of a parent or legal guardian. There has been no movement with regard to this bill since introduction.

Ms. Alley reported on House Bill 4253, Responders Protection Act. This bill would authorize supervising entities to permit ambulance crew members, firefighters, rescue squad members and emergency service personnel to carry firearms. Additionally, the bill specifies the training required for them to be eligible to carry a firearm and allows them to be reimbursed for the cost of the training.

Ms. Alley reported that Senate Bill 288, regulating cremation, embalming and directing of funeral services, would transfer the functions of the West Virginia Board of Funeral Service Examiners to the West Virginia Secretary of State’s Office. The Board of Funeral Service Examiners would be dissolved.
Ms. Alley reported that **House Bill 4304**, creating the Board of Nursing, would terminate the West Virginia Board of Licensed Professional Nurses and the West Virginia Board of Examiners for Registered Professional Nurses, and create a new West Virginia Board of Nursing. This bill also sets out the scope of practice for licensed professional nurses, registered professional nurses and advanced practice registered nurses. Board staff will continue to monitor this bill.

Ms. Alley reported that Mr. Spangler had previously requested an increase in the Board’s spending authority. In the near future, Mr. Spangler will meet with Delegate Eric Nelson, Jr., Chair of the House Finance Committee, to discuss the Board’s spending authority.

Dr. Challa briefly left the teleconference at this time due to connectivity issues. During his absence the remaining Committee members received reports from staff, however, no action was taken.

Mr. Wessels reported that there have been four bills introduced during the 2018 legislative session related to medical cannabis. None of the medical cannabis bills have moved since introduction. Board staff will continue to monitor these bills.

Ms. Alley reported that Senator Ryan Ferns has introduced a bill to mandate County Commission approval of county health department policies.

Mr. Alley reported that **Senate Bill 103**, establishing tax credits for certain physician who locate in West Virginia to practice, has been introduced. This bill would establish a tax credit for physicians who are new graduates and locate in West Virginia to practice medicine for at least six years. The bill passed Senate Health and Human Resources Committee today, January 25, 2018, and now moves to Senate Finance Committee. Board staff will continue to monitor this bill.
Dr. Challa rejoined the teleconference at this time.

Ms. Alley reported that **House Bill 2497**, prohibiting state licensing boards from hiring lobbyists, has been introduced. A companion bill, **Senate Bill 400**, is scheduled to be introduced tomorrow, January 26, 2017.

**ADJOURNMENT**

There being no further business to consider, Reverend Bowyer moved that the meeting be adjourned. Dr. Upton seconded, and the motion carried.

K. Dean Wright, P.A. C.
Chair of the Legislative Committee
CALL TO ORDER

Agenda Items:

- **Update on Board of Medicine Bills**
  - SB 197 and HB 4069 – 11 CSR 1B – Licensure, disciplinary and complaint procedures, continuing education, physician assistants
  - SB 198 and HB 4070 – 11 CSR 6 – Continuing education for physicians and podiatric physicians
  - HB 4027 – Creating an educational permit for allopathic physician residents
  - Burden of proof
  - Authorization for investigators to carry firearms

- **Bills related to responding to the opioid crisis and other matters related to controlled substances**
  - SB 273 and HB 4263 – Reducing use of opiates (Opioid Reduction Act)
  - HB 4336 – Updating the schedule of controlled substances

- **Board regulation / government structure**
  - HB 4413 – Permitting a Physician Assistant to Practice independent of a collaborating physician
  - HB 4175 – Preventing requirement that an APRN participate in a collaborative relationship to obtain payment
  - HB 4014 – Reorganization of DHHR
  - SB 313 – Waiving occupational fees and licensing requirements for certain low-income individuals, military families and young workers
  - HB 4260 – Prescriptive authority for psychologists
  - SB 400 and HB 4297 – Prohibiting state licensing boards from hiring lobbyists
  - SB 434 – Specifying documents not subject to discovery in certain proceedings
  - SB 448 – Relating generally to professional associations
  - SB 449 – Using criminal conviction records to disqualify a person from license or authorization to practice occupation
  - HB 4301 – Requiring all state agencies to develop a plan to evaluate a transition to cloud based data storage
  - HB 4323 – relating to non-renewal of any certificate, license, registration, to any person who is delinquent in the payment of state or local taxes
  - HB 4334 – Requiring certain boards that seek to increase a fee or seek to impose a new fee to also submit cost saving measures
  - HB 4360 – Relating to boards of examination

- **Bills related to immunization or other practice issues**
  - SB 318 – Requiring influenza immunizations for health care workers
• **Other legislative topics of interest**
  o Physician Advertising
  o Pursuit of legislative language to ensure physicians with temporary licenses may be reimbursed for billing
  o Professional Board structure, consolidation and termination
  o Special revenue bills and appropriations
  o Medical cannabis
  o County commissions
  o Physician tax credit

• **New bills introduced after February 5, 2018**

• **Update on bills being monitored by the Board**
  o **SB 129** – Limiting time prescriptions may be issued for certain controlled substances
  o **SB 149** – Establishing safeguards for treatment of acute pain and opioid medications
  o **SB 273 and HB 4263** – Reducing use of opiates
  o **SB 329** – Relating to prescribing opioids
  o **HB 4003** – Reducing the use of certain prescription drugs
  o **SB 272 and HB 4227** – Relating generally to drug control
  o **HB 2614** – (carryover) Prohibiting health care professionals from knowingly and in bad faith prescribing or administering drugs
  o **HB 4172** – Establishing a crisis line and mobile application for the public to combat the crisis in this state posed by substance abuse
  o **HB 4181** – Permitting unused, unexpired nonnarcotic drugs to be distributed to free health care clinics
  o **HB 4215** – Involuntary hospitalization of persons administered opioid antagonists
  o **SB 269 and HB 4154** - 2018 Regulatory Reform Act
  o **HB 2011** – Prohibiting state agencies and departments from acting outside their statutory scopes of authority
  o **HB 2216** – (carryover) Making individuals responsible for the costs related to the filing of excessive false complaints
  o **HB 2521** – (carryover) APRN compact
  o **HB 2823** – (carryover) Establishing a statewide call-in center to receive assistance with healthcare
  o **HB 2921** – Establishing a website clearinghouse for sharing information about potential sources of revenue, financial technical and legal assistance for governmental agencies
SB 330 and HB 2945 – Relating to exemptions form mandated immunizations
SB 337 – Permitting parents of newborns to decline administration of specific required mediations at birth
SB 25 – Prohibiting doctors and lawyers from filing fraudulent disability claims
HB 2165 – (carryover) Relating to out of state physicians and surgeons traveling with sports teams within this state
HB 2327 – (carryover) Protecting consumers from surprise bills by health care providers
HB 2423 – (carryover) Relating to criminal offense of therapeutic deception
HB 4035 – Creating a legislative coalition to study and report to the Legislature on palliative care
HB 4218 – Relating to medical professional liability
HB 4239 – Relating to regulating prior authorizations
HB 4012 and HB 4246 – Relating to abortions
HB 4247 – Relating to life-sustaining treatment policies of health care facilities “Simon’s Law”
HB 4253 – Responders Protection Act
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 8th day of February 2018, at 5:00 p.m.

The following Committee member was present:

Victoria Mullins, P.A.-C.

The following Committee members attended via teleconference:

K. Dean Wright, P.A.-C., Chair
Reverend O. Richard Bowyer
Timothy Donatelli, D.P.M.
Ahmed D. Faheem, M.D., D.L.F.A.P.A
Matthew Upton, M.D.

The following Committee member was absent:

Kishore K. Challa, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame
Andrew R. Wessels

Mr. Wright called the meeting to order.

Mr. Spangler provided an update with regard to the following Board of Medicine proposed legislative rule bills: (1) Senate Bill 197 and House Bill 4069, relating to licensure, disciplinary and complaint procedures, continuing education physician assistants; and (2) Senate Bill 198 and House Bill 4070, relating to continuing education for physicians and podiatric
physicians. There has been no activity with regard to the Senate bills since introduction. The House bills have passed House Health and Human Resources Committee and House Judiciary Committee, and have been incorporated into House Bill 4079, promulgating administrative rules by various executive or administrative agencies of the state.

Mr. Spangler reported that House Bill 4027, creating an education permit for allopathic physicians, was amended in House Education Committee. The strike and insert amendment is consistent with the language that the Legislative Committee voted to support at the January 25, 2018 meeting. The bill passed House Health and Human Resources Committee, as amended, this afternoon, February 8, 2018.

Ms. Mullins joined the meeting at this time.

Mr. Spangler reported that a bill is scheduled to be introduced in House Judiciary Committee tomorrow, February 9, 2018, which would permit at least one Board of Medicine investigator to carry a firearm after receiving appropriate training. The West Virginia Board of Pharmacy has requested that their investigator(s) be included in the bill.

Mr. Foster reported on Senate Bill 273 and House Bill 4263, reducing use of opiates (Opioid Reduction Act). Board staff have spoken with Senator Takuba, Senator Stollings, and legislative legal staff, regarding concerns with this bill. The bill passed Senate Health and Human Resources Committee, and now moves to Senate Judiciary Committee.

Ms. Alley reported that House Bill 4336, updating the schedule of controlled substances, has passed House Prevention and Treatment of Substance Abuse Committee with an amendment which adds Gabapentin and Pregabalin to the list of Schedule V controlled substances. Additionally, Tramadol has been moved from a Schedule IV to a Schedule V controlled substance. The bill now moves to House Judiciary Committee. Board staff will continue to monitor this bill.
Mr. Spangler reported that **House Bill 4413**, permitting a physician assistant to practice independent of a collaborating physician, was introduced on Friday, February 2, 2018. This bill provides that the board shall authorize a physician assistant to practice independent of a collaborating physician and a practice agreement if the physician assistant has satisfied the following prerequisites:

1. has practiced for at least three years under supervision under a duly-documented practice agreement relationship with a collaborating physician;
2. is licensed in good standing with the board; and
3. has submitted a completed application on forms developed by the board and paid an application fee established by the board in legislative rule.

The bill further provides that, “the board may require a physician assistant to practice under a practice agreement and supervision of a collaborating physician if the board determines, by order arising out of the board’s complaint process, that a supervising relationship is necessary for the rehabilitation of a licensee or for protection of the public.” Following discussion, Dr. Faheem moved that the Board not support House Bill 4413. Reverend Bowyer seconded, and the motion carried.

Dr. Upton left the teleconference at this time.

Mr. Spangler reported that **House Bill 4175**, preventing insurance carriers from requiring that an advanced practice registered nurse participate in a collaborative relationship to obtain payment, has passed the House, and now moves to the Senate. As introduced, the bill provided that “An insurance company or managed care organization may not require a physician assistance or advanced practice registered nurse to participate in a collaborative agreement in order to obtain payment for his or her services.” The bill was amended in House Banking and Insurance Committee to remove physician assistants from the bill. This bill now moves to the Senate.
Mr. Spangler reported that House Bill 4014, reorganization of the Department of Health and Human Resources, was amended by the House Health and Human Resources Committee yesterday, February 7, 2017. The amendment:

1. establishes an Independent Office of Inspector General;
2. places the Office of Health Facility Licensure and Certification under the Office of Inspector General;
3. creates a Department of Healthcare Facilities; and
4. reorganizes units of government.

Chapter 30 Boards, including the Board of Medicine, are no longer included in this bill.

Mr. Spangler reported that there has been no activity with regard to Senate Bill 313, waiving occupational fees and licensing requirements for certain low-income individuals, military families and young workers, since introduction.

Mr. Spangler reported that House Bill 4260 would allow prescriptive authority for Ph.D. level psychologists who meet certain criteria and who are in a collaborative agreement with a physician. At the January 25, 2018, Legislative Committee meeting, the Committee voted to oppose this bill. There has been no activity with regard to this bill since introduction.

Mr. Spangler reported that Senate Bill 502, Creating Patient Safety Evidence-Based Prescribing Act, was introduced yesterday, February 7, 2018. This bill creates the term “medical psychologist” which is defined as “a health service provider who has received from the board, pursuant to this article, a valid certificate granting prescriptive authority, and the certificate has not been revoked or suspended. The title “medical psychologist” shall not be restricted only to those psychologists who have been certified by the board to prescribe psychotropic medications and may be used by other licensed psychologists who demonstrate training and experience in the specialty.” The bill gives the West Virginia Board of Psychology authority to administer a certification process to grant psychologists prescriptive authority. The only prescribing limitation
is a prohibition on narcotics. Reverend Bowyer moved that the Board oppose House Bill 502. Dr. Faheem seconded, and the motion carried.

Mr. Spangler reported that Senate Bill 400, prohibiting state licensing boards from hiring lobbyist, passed the Senate on February 5, 2018, and now moves to the House. Board staff will continue to monitor this bill.

Ms. Alley reported on Senate Bill 434, specifying documents not subject to discovery in certain proceedings. This bill provides that “Any document prepared by or on behalf of a health care provider for the purpose of improving the quality, delivery or efficiency of health care or for the purpose of credentialing or reviewing health care providers is confidential and shall not be subject to discovery in a civil action or administrative proceeding. Such documents include:

(1) Applications for employment, privileges, or credentials;
(2) Incident reports;
(3) Documents related to proceedings for hiring, disciplining, terminating, credentialing, issuing staff privileges, renewing staff privileges or alleged misconduct of a health care provider;
(4) Review organizations’ documents;
(5) Quality control documents;
(6) Documents satisfying regulatory obligations related to quality assurance and performance improvement; and
(7) Reviews, audits and recommendations of consultants or other persons or entities engaged in the performance of peer review.”

Following discussion, Reverend Bowyer moved that the Board seek an amendment which would provide an exception that authorizes chapter 30 licensing boards to receive such documents for use in administrative proceedings. Dr. Faheem seconded, and the motion carried.

Ms. Alley reported on Senate Bill 448, relating generally to professional associations. This bill excludes “legal, medical, podiatry or other lawfully organized professional
corporations” but then appears to regulate them. Board staff will continue to monitor this bill and will report back to the Committee at a later date.

Mr. Foster reported that Senate Bill 449, using criminal conviction records to disqualify a person from license or authorization to practice an occupation, has been introduced. This bill provides that licensing authorities must be specific about the types of convictions that would disqualify a person from receiving or keeping a license to practice, and state agencies must update their rules to follow the requirements of the act. Dr. Faheem moved that the Board oppose Senate Bill 449. Reverend Bowyer seconded, and the motion carried.

Mr. Spangler reported that House Bill 4301, requiring all state agencies to develop a plan to evaluate a transition to cloud based data storage, has been introduced. This bill would require that a comprehensive written plan to evaluate transition to cloud-based data storage be submitted to the Joint Commission on Government and Finance by January 1, 2019. Board staff will continue to monitor this bill.

Mr. Spangler reported on HB 4323, relating to non-renewal of any certificate, license, or registration to any person who is delinquent in the payment of state or local taxes. This bill would prohibit the board from granting or renewing a certificate, license, registration or authority to a person who is delinquent in the payment of state or local taxes, fees, or other money due to the state or its subdivisions. The bill has passed House Government Organization Committee, and now moves to House Judiciary Committee.

Mr. Spangler reported that House Bill 4334 would require certain boards that seek to increase a fee or seek to impose a new fee to also submit cost saving measures. Board staff will continue to monitor this bill.
Mr. Spangler reported that House Bill 4360 would require boards of examination to maintain a free public access online site to view its books and registers. There has been no activity with regard to this bill since introduction.

Mr. Spangler provided an update with regard to Senate Bill 318, requiring influenza immunizations for health care workers. The West Virginia Department of Health and Human Resources Committee has submitted a fiscal note with regard to this bill in the amount of $380,000. Board staff will continue to monitor this bill.

Mr. Spangler reported that House Bill 4199, permitting a nursing home to use trained individuals to administer medication, has passed the House, and now moves to Senate Health and Human Resources Committee.

Mr. Spangler reported that there has been no activity with regard to House Bill 4217, permitting an attending physician to obtain a patient’s autopsy report, since the January 25, 2018 Legislative Committee meeting. Board staff will continue to monitor this bill.

Ms. Alley reported that Senate Bill 436, Creating Nondiscrimination in Involuntary Denial of Treatment Act, requires the provision of medical treatment under certain circumstances; requires the disclosure of policies related to the life-preserving treatment a patient may receive or be denied; and requires the Department of Health and Human Resources to maintain and report on certain information. There has been no activity with regard to this bill since introduction.

Mr. Spangler reported that there has been no activity with regard to Senate Bill 442 and House Bill 4239, establishing universal forms and deadlines when submitting prior authorizations electronically, since introduction.
Mr. Spangler reported that it is possible that legislation may be introduced during the 2018 legislative session related to physician advertising. Currently, the Board of Medicine prohibits the use of patient testimonials in physician advertising. Board staff will continue to monitor legislation introduced and will report legislation regarding physician advertising to the Committee, if such legislation is introduced.

Mr. Spangler reported that on February 1, 2018, he and Ms. Alley met with Lauren Becker, D.O., of Charleston Area Medical Center, as well as representatives from Marshall University School of Medicine regarding pursuit of legislative language to ensure physicians with temporary licenses may be reimbursed for billing. Board staff are currently waiting to hear back from these individuals.

Mr. Spangler reported that Board staff continue to monitor House Bill 4304, creating the Board of Nursing, and Senate Bill 288, regulating cremation, embalming and directing of funeral services.

Mr. Spangler reported that to date, no special revenue bills or appropriations have been introduced which would affect the Board of Medicine. It is possible that legislation will be introduced during the 2018 legislative session which would extend collection of the Patient Injury Compensation Fund assessment fee through 2021-2022.

Mr. Wessels reported that there have been several bills introduced related to medical cannabis; however, there has been no activity with regard to any of the medical cannabis bills since introduction.

Mr. Spangler reported that Senate Bill 499, requiring one year of certain approved postgraduate clinical training for graduates of international medical schools, has been introduced. Following discussion, Reverend Bowyer moved that the Board seek support an amendment to
the bill to require two years of postgraduate clinical training for persons graduates of international medical schools. Ms. Mullins seconded, and the motion carried.

Mr. Spangler reported that House Bill 4465, authorizing the acupuncture board to issue certificates to perform auricular acudetox therapy, has been introduced. This bill allows a broad class of licensees to be certificate holders to perform auricular acudetox therapy under the Board of Acupuncture. Additionally, the Board of Acupuncture would have disciplinary authority. Board staff will continue to monitor this bill.

Mr. Spangler reported that Board staff continue to monitor the following bills:
Senate Bill 505, requiring contact information of state official or employee mobile phone furnished by employer to be listed on a directory or website;
House Bill 4435, Youth Mental Health Protection Act; and
House Bill 4473, relating to use of state funds for advertising to promote a public official or government office.

Ms. Alley reported that Board staff continue to monitor several bills, including but not limited to:
Senate Bill 272 and House Bill 4227, relating generally to drug control;
Senate Bill 269 and House Bill 4154, 2018 Regulatory Reform Act;
House Bill 4035, creating a legislative coalition to study and report to the Legislature on palliative care; and
House Bill 4218, relating to medical professional liability.

There being no further business to consider, Dr. Faheem moved that the meeting be adjourned. Reverend Bowyer seconded, and the motion carried.

K. Dean Wright, P.A.-C.
Chair of the Legislative Committee
WEST VIRGINIA BOARD OF MEDICINE
Legislative Committee Agenda
February 22, 2018 at 5:00 pm

CALL TO ORDER

Agenda Items:

- **Update on Board of Medicine Bills**
  - Board legislative rules 11 CSR 1B and 11 CSR 6
  - **HB 4027** – Creating an educational permit for allopathic physician residents
  - **HB 4600** – Providing an exception to the prohibitions of persons between the age of 18 and 21 of carrying concealed handguns (authorization for investigators to carry firearms)

- **Bills related to responding to the opioid crisis and other matters related to controlled substances**
  - **SB 273**– Reducing use of opiates (Opioid Reduction Act)
  - Other bills of note

- **Board regulation / government structure**
  - **HB 4413** - Permitting a Physician Assistant to Practice independent of a collaborating physician
  - **SB 502 and HB 4260** – Prescriptive authority for psychologists
  - **HB 4534** – Relating to the executive secretary of the Health Professional Licensing Boards
  - **HB 4609** – Relating to advertising by physicians and podiatrists
  - **SB 434** – Specifying documents not subject to discovery in certain proceedings
  - **SB 448** – Relating generally to professional associations
  - **SB 449 and HB 4461** – Using criminal conviction records to disqualify a person from license or authorization to practice occupation
  - **SB 499** – Requiring one year of certain approved postgraduate clinical training for persons with foreign medical degrees
  - **SB 313** – Waiving occupational fees and licensing requirements for certain low-income individuals, military families and young workers
  - **HB 4481** – Relating to mandatory inter-board reporting by licensees or registrants of the boards of medicine, osteopathic medicine and nursing
  - **HB 4497** – Exempting spouses of active military personnel from fees associated with occupational or professional licensing.

- **Bills related to immunization or other practice issues**
  - **SB 318 and HB 4581** – Requiring influenza immunizations for health care workers

- **Other legislative topics of interest**
  - Telemedicine / PEIA Pilot Project
  - Professional Board structure, consolidation and termination
o Medical cannabis
o Physician tax credit
o Patient Injury Compensation Fund (PICF) assessment fee

- **Update on bills being monitored by the Board – See attachment A**

- **Bills introduced or originating after February 19, 2018**

**ADJOURNMENT**
# Personalized Bill Tracking List

## 2018 - 2019 Regular Session

<table>
<thead>
<tr>
<th>Bill</th>
<th>Title</th>
<th>SA(Same As)</th>
<th>Last Action</th>
<th>Committee Reference</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>SB 1 (None)</td>
<td>Relating to partial filling of prescriptions</td>
<td>01/10/18 - To Senate Health and Human Resources</td>
<td>Senate Reference 1-Health and Human Resources Senate Reference 2-Judiciary</td>
<td></td>
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<tr>
<td>SB 2 (None)</td>
<td>Reducing use of opiates</td>
<td>01/10/18 - To Senate Health and Human Resources</td>
<td>Senate Reference 1-Health and Human Resources Senate Reference 2-Judiciary</td>
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<tr>
<td>SB 3 (None)</td>
<td>Relating to venue for certain claims against state</td>
<td>01/10/18 - To Senate Judiciary</td>
<td>Senate Reference 1-Judiciary</td>
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<tr>
<td>SB 25 (None)</td>
<td>Prohibiting doctors and lawyers from filing fraudulent disability claims</td>
<td>01/10/18 - To Senate Health and Human Resources</td>
<td>Senate Reference 1-Health and Human Resources Senate Reference 2-Judiciary</td>
<td></td>
<td></td>
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<tr>
<td>SB 46 (None)</td>
<td>Permitting pharmacists to inform customers of low-cost alternative drugs</td>
<td>02/14/18 - To House Judiciary</td>
<td>House Reference 1-Health and Human Resources House Reference 2-Judiciary Senate Reference 1-Judiciary Senate Reference 2-Finance</td>
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<tr>
<td>SB 57 (None)</td>
<td>Relating to third-party litigation financing</td>
<td>03/14/18 - To House Government Organization</td>
<td>House Reference 1-Government Organization House Reference 2-Judiciary Senate Reference 1-Judiciary Senate Reference 2-Finance</td>
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<tr>
<td>SB 65 (None)</td>
<td>Accessing controlled substance monitoring information</td>
<td>01/10/18 - To Senate Health and Human Resources</td>
<td>Senate Reference 1-Health and Human Resources Senate Reference 2-Judiciary</td>
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<tr>
<td>SB 103 (None)</td>
<td>Establishing tax credits for certain physicians who locate in WV to practice</td>
<td>01/26/18 - To Senate Finance</td>
<td>Senate Reference 1-Health and Human Resources Senate Reference 2-Finance</td>
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<tr>
<td>SB 129 (None)</td>
<td>Limiting time prescriptions may be issued for certain controlled substances</td>
<td>01/10/18 - To Senate Health and Human Resources</td>
<td>Senate Reference 1-Health and Human Resources Senate Reference 2-Judiciary</td>
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<tr>
<td>SB 140 (None)</td>
<td>Establishing safeguards for treatment of acute pain and opioid medications</td>
<td>01/10/18 - To Senate Health and Human Resources</td>
<td>Senate Reference 1-Health and Human Resources</td>
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</table>
| SB 151 (None) | Creating Appropriation Supremacy Act of 2018 | 02/06/18 - To Senate Finance | Senate Reference 1 - Judiciary  
Senate Reference 2 - Finance |
| SB 152 (None) | Budget Bill | 01/10/18 - To Senate Finance | Senate Reference 1 - Finance |
| SB 197 (None) | Board of Medicine rule relating to licensure, disciplinary and complaint procedures, continuing education, physician assistants | SI HB4069 | 01/11/18 - To Senate Judiciary | Senate Reference 1 - Judiciary |
| SB 198 (None) | Board of Medicine rule relating to continuing education for physicians and podiatric physicians | SI HB4070 | 01/11/18 - To Senate Judiciary | Senate Reference 1 - Judiciary |
| SB 269 (None) | Establishing 2018 Regulatory Reform Act | SI HB4154 | 01/12/18 - To Senate Government Organization | Senate Reference 1 - Government Organization  
Senate Reference 2 - Judiciary |
| SB 272 (None) | Relating generally to drug control | SI HB4227 | 02/13/18 - To House Prevention and Treatment of Substance Abuse | House Reference 1 - Select Committee on Prevention and Treatment of Substance Abuse  
House Reference 2 - Finance  
Senate Reference 1 - Health and Human Resources  
Senate Reference 2 - Finance |
| SB 273 (None) | Reducing use of certain prescription drugs | SI HB4263 | 02/19/18 - To House Health and Human Resources | House Reference 1 - Health and Human Resources  
House Reference 2 - Judiciary  
Senate Reference 1 - Health and Human Resources  
Senate Reference 2 - Judiciary |
| SB 281 (None) | Relating to state's spending units | SI HB4200 | 01/15/18 - To Senate Government Organization | Senate Reference 1 - Government Organization |
| SB 288 (None) | Regulating cremation, embalming and directing of funeral service | SI HB4167 | 02/15/18 - To House Government Organization | House Reference 1 - Government Organization  
House Reference 2 - Finance  
Senate Reference 1 - Government Organization |
| SB 313 (None) | Waiving occupational fees and licensing requirements for certain low-income individuals, military families, and young workers | 01/18/18 - To Senate Government Organization | Senate Reference 1 - Government Organization  
Senate Reference 2 - Finance |
| SB 318 (None) | Requiring influenza immunizations for health care workers | SI HB4581 | 01/18/18 - To Senate Health and Human Resources | Senate Reference 1 - Health and Human Resources  
Senate Reference 2 - Finance |
| SB 329 (None) | Relating to prescribing opioids | 01/19/18 - To Senate Health and Human Resources | Senate Reference 1 - Health and Human Resources  
Senate Reference 2 - Judiciary |
<p>| SB 330 (None) | Relating to exemptions from mandated immunizations | 01/19/18 - To Senate Health and Human Resources | Senate Reference 1 - Health and Human Resources |</p>
<table>
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<tbody>
<tr>
<td>SB 337</td>
<td>Permitting parents of newborns to decline administration of specific required medication at birth</td>
<td>01/22/18 - To Senate Health and Human Resources</td>
<td>Senate Reference 1 - Health and Human Resources Senate Reference 2 - Judiciary</td>
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<tr>
<td>SB 400</td>
<td>Prohibiting state licensing boards from hiring lobbyists</td>
<td>SI HB4297</td>
<td>House Reference 1 - Government Organization House Reference 2 - Judiciary Senate Reference 1 - Government Organization</td>
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<td>SB 434</td>
<td>Specifying documents not subject to discovery in certain proceedings</td>
<td>01/31/18 - To Senate Judiciary</td>
<td>Senate Reference 1 - Judiciary</td>
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<tr>
<td>SB 436</td>
<td>Creating Nondiscrimination in Involuntary Denial of Treatment Act</td>
<td>SI HB4467</td>
<td>Senate Reference 1 - Judiciary Senate Reference 2 - Finance</td>
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<tr>
<td>SB 442</td>
<td>Establishing universal forms and deadlines when submitting prior authorization electronically</td>
<td>SI HB4239</td>
<td>Senate Reference 1 - Health and Human Resources Senate Reference 2 - Finance</td>
</tr>
<tr>
<td>SB 448</td>
<td>Relating generally to professional associations</td>
<td>02/01/18 - To Senate Government Organization</td>
<td>Senate Reference 1 - Government Organization</td>
</tr>
<tr>
<td>SB 449</td>
<td>Using criminal conviction records to disqualify person from license or authorization to practice occupation</td>
<td>SI HB4461</td>
<td>Senate Reference 1 - Government Organization Senate Reference 2 - Judiciary</td>
</tr>
<tr>
<td>SB 465</td>
<td>Relating to mandated reporting of child abuse and neglect</td>
<td>SI HB4589</td>
<td>Senate Reference 1 - Education Senate Reference 2 - Judiciary</td>
</tr>
<tr>
<td>SB 468</td>
<td>Changing date and recipients for submission of Auditor's annual report</td>
<td>02/13/18 - To House Government Organization</td>
<td>House Reference 1 - Government Organization Senate Reference 1 - Government Organization</td>
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<tr>
<td>SB 499</td>
<td>Converting Addiction Treatment Pilot Program to permanent program</td>
<td>02/15/18 - To House Prevention and Treatment of Substance Abuse</td>
<td>House Reference 1 - Select Committee on Prevention and Treatment of Substance Abuse House Reference 2 - Health and Human Resources Senate Reference 1 - Health and Human Resources</td>
</tr>
<tr>
<td>SB 487</td>
<td>Relating to WV Medical Cannabis Act</td>
<td>02/06/18 - To Senate Senator Plymale requests to be removed as sponsor of bill</td>
<td>Senate Reference 1 - Health and Human Resources Senate Reference 2 - Judiciary</td>
</tr>
<tr>
<td>SB 499</td>
<td>Requiring one year of certain approved postgraduate clinical training for persons with foreign medical degrees</td>
<td>02/07/18 - To Senate Health and Human Resources</td>
<td>Senate Reference 1 - Health and Human Resources Senate Reference 2 - Government Organization</td>
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<tr>
<td>SB 502 (None)</td>
<td>Creating Patient Safety Evidence-Based Prescribing Act</td>
<td>SI HB4260</td>
<td>02/07/18 - To Senate Health and Human Resources</td>
</tr>
<tr>
<td>SB 505 (None)</td>
<td>Requiring contact information of state official or employee mobile phone furnished by employer be listed on directory or website</td>
<td></td>
<td>02/07/18 - To Senate Government Organization</td>
</tr>
<tr>
<td>SB 512 (None)</td>
<td>Authorizing certain WV courthouse security officers carry concealed weapons</td>
<td></td>
<td>02/20/18 - To Senate Effective from passage (Roll No. 160)</td>
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<tr>
<td>SB 517 (None)</td>
<td>Relating generally to drug overdoses and controlled substances monitoring</td>
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<td>02/08/18 - To Senate Health and Human Resources</td>
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<tr>
<td>SB 522 (None)</td>
<td>Relating generally to Administrative Procedures Act</td>
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<td>02/20/18 - To Senate On 1st reading 1st Reading</td>
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<tr>
<td>SB 576 (None)</td>
<td>Relating to Patient Injury Compensation Fund</td>
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<td>02/21/18 - To Senate On 1st reading 1st Reading</td>
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<td>SB 578 (None)</td>
<td>Relating to Youth Mental Health Protection Act</td>
<td>SI HB4435</td>
<td>02/16/18 - To Senate Health and Human Resources</td>
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<tr>
<td>HB 2011 (None)</td>
<td>Prohibiting state agencies and departments from acting outside their statutory scopes of authority</td>
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<td>01/10/18 - To House Judiciary</td>
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<tr>
<td>HB 2028 (None)</td>
<td>Relating to the venue for suits and other actions against the state.</td>
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<td>01/24/18 - To Senate Judiciary</td>
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<tr>
<td>HB 2030 (None)</td>
<td>Eliminating the requirement that proceedings against the State, a state agency or state officer be brought and prosecuted in the circuit court of Kanawha County</td>
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<td>01/10/18 - To House Judiciary</td>
</tr>
<tr>
<td>HB 2165 (None)</td>
<td>Relating to out of state physicians and surgeons traveling with sports teams within this state</td>
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<td>01/10/18 - To House Health and Human Resources</td>
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<tr>
<td>HB 2192 (None)</td>
<td>Adding pharmacist and pharmacy to the definition of &quot;health care provider&quot; as used in the Medical Professional Liability Act</td>
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<td>01/10/18 - To House Health and Human Resources</td>
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<tr>
<td>HB 2216 (None)</td>
<td>Making individuals responsible for the costs relating to the filing of excessive false complaints</td>
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<td>01/10/18 - To House Judiciary</td>
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<tr>
<td>HB 2327 (None)</td>
<td>Protecting consumers from surprise bills by health care providers</td>
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<td>01/10/18 - To House Banking and Insurance</td>
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<td>HB 2423 (None)</td>
<td>Relating to the criminal offense of therapeutic deception</td>
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<td>01/10/18 - To House Health and Human Resources</td>
</tr>
<tr>
<td>HB 2521 (None)</td>
<td>Advanced Practice Registered Nurse Compact</td>
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http://www.wvlegislature.gov/billstatus个性化/PBT/pf_list_results.cfm?list=2018&... 2/20/2018
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<th>Bill Number</th>
<th>Description</th>
<th>Date</th>
<th>Committee</th>
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<tbody>
<tr>
<td>HB 2614 (None)</td>
<td>Prohibiting health care practitioners from knowingly and in bad faith prescribing or administering drugs</td>
<td>01/10/18 - To House Health and Human Resources</td>
<td>House Reference 1 - Select Committee on Prevention and Treatment of Substance Abuse House Reference 2 - Judiciary</td>
</tr>
<tr>
<td>HB 2823 (None)</td>
<td>Establishing a statewide call-in center to receive assistance with healthcare</td>
<td>01/10/18 - To House Health and Human Resources</td>
<td>House Reference 1 - Health and Human Resources House Reference 2 - Finance</td>
</tr>
<tr>
<td>HB 2921 (None)</td>
<td>Establishing a website clearinghouse for sharing information about potential sources of revenue, financial, technical and legal assistance for government agencies</td>
<td>01/10/18 - To House Government Organization</td>
<td>House Reference 1 - Government Organization</td>
</tr>
<tr>
<td>HB 2945 (None)</td>
<td>Relating to exemptions from mandated immunizations</td>
<td>01/10/18 - To House Health and Human Resources</td>
<td>House Reference 1 - Health and Human Resources House Reference 2 - Judiciary</td>
</tr>
<tr>
<td>HB 4003 (None)</td>
<td>Reducing the use of certain prescription drugs</td>
<td>01/12/18 - To House Health and Human Resources</td>
<td>House Reference 1 - Health and Human Resources House Reference 2 - Judiciary</td>
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<td>HB 4005 (None)</td>
<td>Clarifying that appeals to the Supreme Court are a matter of right</td>
<td>01/19/18 - To Senate Judiciary</td>
<td>House Reference 1 - Judiciary Senate Reference 1 - Judiciary</td>
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<tr>
<td>HB 4011 (None)</td>
<td>Requiring agencies, when submitting a new rule or changes, to also identify two existing rules that could be repealed</td>
<td>03/20/18 - To House On 2nd reading, Special Calendar 2nd Reading, Special Calendar</td>
<td>House Reference 1 - Government Organization</td>
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<td>HB 4012 (None)</td>
<td>Amending the definition of medical services, so as to exclude abortion</td>
<td>SI SB417</td>
<td>House Reference 1 - Health and Human Resources House Reference 2 - Judiciary</td>
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<tr>
<td>HB 4014 (None)</td>
<td>Relating to reorganization of the West Virginia Department of Health and Human Resources</td>
<td>02/07/18 - To House Finance</td>
<td>House Reference 1 - Health and Human Resources House Reference 2 - Finance</td>
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<tr>
<td>HB 4016 (None)</td>
<td>Relating to combatting waste, fraud, and misuse of public funds through investigations, accountability and transparency</td>
<td>02/06/18 - To House Finance</td>
<td>House Reference 1 - Judiciary House Reference 2 - Finance</td>
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<td>HB 4019 (None)</td>
<td>Budget Bill, making appropriations of public money out of the treasury in accordance with section fifty-one, article six of the Constitution</td>
<td>01/10/18 - To House Finance</td>
<td>House Reference 1 - Finance</td>
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<tr>
<td>HB 4027 (None)</td>
<td>Creating an education permit for allopathic physician resident</td>
<td>02/15/18 - To Senate Health and Human Resources</td>
<td>House Reference 1 - Education House Reference 2 - Health and Human Resources Senate Reference 1 - Health and Human Resources</td>
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<td>HB 4035 (None)</td>
<td>Creating a legislative coalition to study and report to the Legislature on palliative care</td>
<td>01/29/18 - To Senate Health and Human Resources</td>
<td>House Reference 1 - Health and Human Resources House Reference 2 -</td>
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<td>Bill</td>
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<tr>
<td>HB 4038</td>
<td>Requiring training conducted on behalf of a state agency to be provided in state-owned facilities</td>
<td></td>
<td>01/17/18</td>
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<tr>
<td>HB 4068</td>
<td>Board of Osteopathic Medicine, rule relating to osteopathic physician assistants</td>
<td>SB200</td>
<td>02/16/18</td>
</tr>
<tr>
<td>HB 4069</td>
<td>Board of Medicine, rule relating to licensure, disciplinary and complaint procedures, continuing education, physician assistants</td>
<td>SB197</td>
<td>02/16/18</td>
</tr>
<tr>
<td>HB 4070</td>
<td>Board of Medicine, rule relating to continuing education for physicians and podiatric physicians</td>
<td>SB198</td>
<td>02/16/18</td>
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<tr>
<td>HB 4147</td>
<td>Authorizing the earlier issuance of identification cards to approved medical marijuana consumers and caregivers</td>
<td></td>
<td>01/16/18</td>
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<tr>
<td>HB 4148</td>
<td>Allowing medical marijuana to be grown outdoors by licensed growers</td>
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<td>01/16/18</td>
</tr>
<tr>
<td>HB 4149</td>
<td>Authorizing possession and smoking of medical cannabis by approved persons</td>
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<td>01/16/18</td>
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<tr>
<td>HB 4154</td>
<td>Establishing the 2018 Regulatory Reform Act</td>
<td>SB269</td>
<td>02/20/18</td>
</tr>
<tr>
<td>HB 4167</td>
<td>Relating to regulation of cremation, embalming, and funeral service directing</td>
<td>SB288</td>
<td>01/17/18</td>
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<tr>
<td>HB 4172</td>
<td>Establishing a crisis line and mobile application for the public to combat the crisis in this state posed by substance abuse</td>
<td></td>
<td>01/18/18</td>
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<td>HB 4175</td>
<td>Preventing requirement that an advanced practice registered nurse participate in a collaborative relationship to obtain payment</td>
<td></td>
<td>02/08/18</td>
</tr>
<tr>
<td>HB 4181</td>
<td>Permitting unused, unexpired, nonnarcotic drugs to be</td>
<td></td>
<td>01/18/18</td>
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http://www.wvlegislature.gov/billstatus_personalized/PBT/pf_list_results.cfm?list=2018&... 2/20/2018
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<tr>
<td>HB 4187</td>
<td>Business Liability Protection Act</td>
<td>SI SB484</td>
<td>02/09/18</td>
<td>House Reference 2 - Judiciary</td>
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<td></td>
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<td>- To House Judiciary</td>
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<tr>
<td>HB 4189</td>
<td>Prohibiting certain persons from operating state-owned vehicles</td>
<td>SI SB663</td>
<td>01/18/18</td>
<td>House Reference 1 - Judiciary</td>
</tr>
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<td>- To House Judiciary</td>
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<tr>
<td>HB 4191</td>
<td>Prohibiting employees of the state who have convictions for driving under the influence from driving or operating state-owned vehicle</td>
<td>SI SB757</td>
<td>02/19/18</td>
<td>House Reference 1 - Judiciary</td>
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<td>- To House Judiciary</td>
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<tr>
<td>HB 4199</td>
<td>Permitting a nursing home to use trained individuals to administer medication</td>
<td>SI SB838</td>
<td>02/20/18</td>
<td>House Reference 1 - Judiciary</td>
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<tr>
<td>HB 4200</td>
<td>Relating generally to the state's spending units</td>
<td>SI SB920</td>
<td>02/21/18</td>
<td>House Reference 1 - Judiciary</td>
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<tr>
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<tr>
<td>HB 4215</td>
<td>Relating to the involuntary hospitalization of persons administered opioid antagonists</td>
<td>SI SB1011</td>
<td>02/22/18</td>
<td>House Reference 1 - Judiciary</td>
</tr>
<tr>
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<td>- To House Judiciary</td>
<td></td>
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<tr>
<td>HB 4217</td>
<td>Permitting an attending physician to obtain a patient's autopsy report</td>
<td>SI SB1103</td>
<td>02/23/18</td>
<td>House Reference 1 - Judiciary</td>
</tr>
<tr>
<td></td>
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<td>- To House Judiciary</td>
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<tr>
<td>HB 4218</td>
<td>Relating to medical professional liability</td>
<td>SI SB1195</td>
<td>02/24/18</td>
<td>House Reference 1 - Judiciary</td>
</tr>
<tr>
<td></td>
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<td>- To House Judiciary</td>
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<tr>
<td>HB 4227</td>
<td>Relating generally to drug control</td>
<td>SI SB1287</td>
<td>02/25/18</td>
<td>House Reference 1 - Judiciary</td>
</tr>
<tr>
<td></td>
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<td>- To House Judiciary</td>
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</tr>
<tr>
<td>HB 4239</td>
<td>Relating to regulating prior authorizations</td>
<td>SI SB1379</td>
<td>02/26/18</td>
<td>House Reference 1 - Judiciary</td>
</tr>
<tr>
<td></td>
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<td>- To House Judiciary</td>
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<tr>
<td>HB 4246</td>
<td>Requiring abortions to be performed by a licensed physician</td>
<td>SI SB1471</td>
<td>02/27/18</td>
<td>House Reference 1 - Judiciary</td>
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<tr>
<td></td>
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<td>- To House Judiciary</td>
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<tr>
<td>HB 4247</td>
<td>Relating to life-sustaining treatment policies of health care facilities; &quot;Simon's Law&quot;</td>
<td>SI SB1563</td>
<td>02/28/18</td>
<td>House Reference 1 - Judiciary</td>
</tr>
<tr>
<td></td>
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<td>- To House Judiciary</td>
<td></td>
</tr>
<tr>
<td>HB 4252</td>
<td>Authorizing the prosecuting attorney to issue a subpoena duces tecum for certain documents</td>
<td>SI SB1655</td>
<td>02/29/18</td>
<td>House Reference 1 - Judiciary</td>
</tr>
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<td>- To House Judiciary</td>
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<td>Bill Number</td>
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<td>Sponsor</td>
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<td>Committee 1</td>
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<tr>
<td>HB 4253</td>
<td>Responders Protection Act</td>
<td></td>
<td>01/22/18</td>
<td>House Reference 1 - Judiciary</td>
</tr>
<tr>
<td></td>
<td>Placing a seven-day supply limitation on the amount of Schedule II drugs which can be lawfully prescribed</td>
<td></td>
<td>01/23/18</td>
<td>House Reference 1 - Select Committee on Prevention and Treatment of Substance Abuse</td>
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<tr>
<td>HB 4260</td>
<td>Providing limited prescriptive authority to a licensed psychologist who meets certain criteria</td>
<td>SI SB502</td>
<td>01/23/18</td>
<td>House Reference 1 - Health and Human Resources</td>
</tr>
<tr>
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<tr>
<td>HB 4263</td>
<td>Reducing the use of opiates</td>
<td>SI SB273</td>
<td>01/23/18</td>
<td>House Reference 1 - Select Committee on Prevention and Treatment of Substance Abuse</td>
</tr>
<tr>
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<tr>
<td>HB 4294</td>
<td>Creating a state-administered wholesale drug importation program</td>
<td></td>
<td>01/25/18</td>
<td>House Reference 1 - Health and Human Resources</td>
</tr>
<tr>
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<tr>
<td>HB 4297</td>
<td>Prohibiting state licensing boards from hiring lobbyists</td>
<td>SI SB400</td>
<td>01/25/18</td>
<td>House Reference 1 - Government Organization</td>
</tr>
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<tr>
<td>HB 4301</td>
<td>Requiring all state agencies to develop a plan to evaluate a transition to cloud based data storage</td>
<td></td>
<td>01/25/18</td>
<td>House Reference 1 - Government Organization</td>
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<td>HB 4304</td>
<td>Creating the Board of Nursing</td>
<td></td>
<td>02/20/18</td>
<td>House Reference 1 - Health and Human Resources</td>
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<td>HB 4305</td>
<td>Authorizing the West Virginia Ethics Commission to sanction persons who have violated the Freedom of Information Act</td>
<td></td>
<td>01/26/18</td>
<td>House Reference 1 - Judiciary</td>
</tr>
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<tr>
<td>HB 4323</td>
<td>Relating to non-renewal of any certificate, license, registration, to any person who is delinquent in the payment of state or local taxes</td>
<td></td>
<td>02/07/18</td>
<td>House Reference 1 - Government Organization</td>
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<tr>
<td>HB 4334</td>
<td>Requiring certain boards that seek to increase a fee or seek to impose a new fee to also submit cost saving measures</td>
<td></td>
<td>02/16/18</td>
<td>House Reference 1 - Government Organization</td>
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<tr>
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<tr>
<td>HB 4336</td>
<td>Updating the schedule of controlled substances</td>
<td></td>
<td>02/02/18</td>
<td>House Reference 1 - Select Committee on Prevention and Treatment of Substance Abuse</td>
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<td>HB 4345</td>
<td>Relating to limitations on permits for growers, processors and dispensaries of medical cannabis</td>
<td></td>
<td>01/29/18</td>
<td>House Reference 1 - Judiciary</td>
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<th>Bill Number</th>
<th>Description</th>
<th>Introduction Date</th>
<th>Committee Assigned To</th>
</tr>
</thead>
<tbody>
<tr>
<td>HB 4360</td>
<td>Relating to boards of examination</td>
<td>01/30/18 - To House Government Organization</td>
<td>House Reference 1 - Government Organization House Reference 2 - Finance</td>
</tr>
<tr>
<td>HB 4400</td>
<td>Relating to the West Virginia Physicians Mutual Insurance Company</td>
<td>02/20/18 - To Senate Judiciary</td>
<td>House Reference 1 - Banking and Insurance House Reference 2 - Judiciary Senate Reference 1 - Judiciary</td>
</tr>
<tr>
<td>HB 4413</td>
<td>Permitting a physician assistant to practice independent of a collaborating physician</td>
<td>02/02/18 - To House Health and Human Resources</td>
<td>House Reference 1 - Health and Human Resources House Reference 2 - Judiciary</td>
</tr>
<tr>
<td>HB 4415</td>
<td>The Protect Our Right to Unite Act</td>
<td>02/02/18 - To House Judiciary</td>
<td>House Reference 1 - Judiciary</td>
</tr>
<tr>
<td>HB 4416</td>
<td>Increasing the amount of annual and incremental salary increases for eligible employees from $50 to $100</td>
<td>02/02/18 - To House Finance</td>
<td>House Reference 1 - Finance</td>
</tr>
<tr>
<td>HB 4435</td>
<td>Youth Mental Health Protection Act</td>
<td>02/05/18 - To House Health and Human Resources</td>
<td>House Reference 1 - Health and Human Resources House Reference 2 - Judiciary</td>
</tr>
<tr>
<td>HB 4457</td>
<td>Relating to designation of hospitals for stroke treatment</td>
<td>SI SB510</td>
<td>House Reference 1 - Health and Human Resources House Reference 2 - Judiciary</td>
</tr>
<tr>
<td>HB 4461</td>
<td>Limiting the use of records of criminal conviction to disqualify a person from receiving a license or other authorization to practice an occupation</td>
<td>SI SB449</td>
<td>House Reference 1 - Government Organization House Reference 2 - Judiciary</td>
</tr>
<tr>
<td>HB 4465</td>
<td>Authorizing the acupuncture board to issue certificates to perform auricular acudetox therapy</td>
<td>02/14/18 - To House Government Organization</td>
<td>House Reference 1 - Health and Human Resources House Reference 2 - Government Organization</td>
</tr>
<tr>
<td>HB 4467</td>
<td>Nondiscrimination in Involuntary Denial of Treatment Act</td>
<td>SI SB436</td>
<td>House Reference 1 - Health and Human Resources House Reference 2 - Judiciary</td>
</tr>
<tr>
<td>HB 4473</td>
<td>Relating to use of state funds for advertising to promote a public official or government office</td>
<td>02/20/18 - To Senate Judiciary</td>
<td>House Reference 1 - Judiciary Senate Reference 1 - Judiciary</td>
</tr>
<tr>
<td>HB 4479</td>
<td>Relating to the West Virginia Life And Health Insurance Guaranty Association Act</td>
<td>02/08/18 - To House Banking and Insurance</td>
<td>House Reference 1 - Banking and Insurance House Reference 2 - Judiciary</td>
</tr>
<tr>
<td>HB 4481</td>
<td>Relating to mandatory inter-board reporting by licensees or registrants of the boards of medicine, osteopathic medicine, nursing</td>
<td>02/14/18 - To House Government Organization</td>
<td>House Reference 1 - Health and Human Resources House Reference 2 - Government Organization</td>
</tr>
<tr>
<td>HB 4483</td>
<td>Relating to generic drug products</td>
<td>02/09/18 - To House Health and Human Resources</td>
<td>House Reference 1 - Health and Human Resources</td>
</tr>
</tbody>
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<tbody>
<tr>
<td><strong>HB 4497</strong> (None)</td>
<td>Exempting spouses of active military personnel from fees associated with occupational or professional licensing</td>
<td>02/16/18 - To House Finance</td>
<td>House Reference 1 - Government Organization, House Reference 2 - Finance</td>
</tr>
<tr>
<td><strong>HB 4623</strong> (None)</td>
<td>Relating to obtaining substance abuse treatment services</td>
<td>02/16/18 - To House Health and Human Resources</td>
<td>House Reference 1 - Select Committee on Prevention and Treatment of Substance Abuse, House Reference 2 - Health and Human Resources</td>
</tr>
</tbody>
</table>
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 22nd day of February 2018, at 5:00 p.m.

The following Committee member was present:

Victoria Mullins, P.A.-C.

The following Committee members attended via teleconference:

K. Dean Wright, P.A.-C., Chair
Reverend O. Richard Bowyer
Kishore K. Challa, M.D.
Timothy Donatelli, D.P.M.
Ahmed D. Faheem, M.D., D.I.F.A.P.A
Matthew Upton, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame
Andrew R. Wessels

One member of the public was present.

Mr. Wright called the meeting to order. Ms. Alley advised that Mr. Spangler was on his way back to the Board office from the capitol and would join the meeting shortly.

Ms. Alley reported that House Bill 4079, the rule bundle bill which contains the Board of Medicine proposed legislative rule bills, has passed the House and now moves to the Senate.
Ms. Alley reported that House Bill 4027, creating an educational permit for allopathic physician residents, has passed the House. This bill was on the Senate Health and Human Resources Committee agenda today, February 22, 2018, but was not taken up.

Ms. Alley reported that House Bill 4600 has been introduced. This bill authorizes an investigator who is between the ages of 18 and 21 and who is employed by the Board of Medicine, the Board of Osteopathic Medicine or the Board of Pharmacy to carry a concealed handgun. There are significant technical concerns with regard to the age restriction referenced in this bill. The bill has passed House Government Organization Committee, and now moves to House Judiciary Committee. Mr. Spangler plans to meet with members of the House Judiciary Committee regarding the technical concerns. Board staff will continue to monitor this bill.

Mr. Foster reported that House Bill 273, reducing the use of certain prescription drugs, has passed the Senate and now moves to House Health and Human Resources Committee. Board staff continue to converse with representatives in the Senate and the House regarding the Board’s concerns with this bill and the interchanging use of “Schedule II” and “narcotic” medications.

Ms. Alley reported that there has been no activity with regard to House Bill 4336, updating the schedule of controlled substances, or House Bill 4413, permitting a physician assistant to practice independent of a collaborating physician, since the February 8, 2018 Legislative Committee meeting. Board staff will continue to monitor these bills.

Mr. Spangler joined the meeting at this time.

Mr. Wright elected to take the agenda out of order to accommodate guests who would like to address the Board regarding a PEIA pilot project utilizing telemedicine services. At this time Mr. Spangler called Ryan Wakim, M.D., President and CEO of GR&W, Inc. Dr. Wakim merged Michael Iaquinta, President of iSelectMD, into the call. Ms. Alley alerted the guests to the procedure for making public comments at meetings of the Board, and stated that a copy of
this procedure is available for review on the Board’s website. Mr. Wakim and Mr. Iaquinta addressed the Board. Following their address, Mr. Wright thanked the guests for their comments and stated that if legislation regarding telemedicine is introduced during the 2018 legislative session, the Committee will review the bill. Mr. Spangler disconnect the call with Mr. Wakin and Mr. Iaquinta at this time, and they were not in attendance for the remainder of the meeting.

Mr. Spangler reported that House Bill 4304, creating the Board of Nursing, has passed the House, and now moves to Senate Health and Human Resources Committee. It is possible that the bill will be amended to include language that would combine the Board of Medicine and the Board of Osteopathic Medicine. Board staff will continue to monitor this bill closely.

With the agreement of all Committee members present, Mr. Wright, Dr. Faheem and Dr. Challa called for a Legislative Committee meeting to be scheduled for Saturday March 3, 2018 at 9:00 a.m.

A member of the public who was attending the meeting the meeting room at this time and was not present for the remainder of the meeting.

Mr. Spangler reported that there has been no activity with regard to Senate Bill 502 and House Bill 4260, providing limited prescriptive authority to a licensed psychologist who meets certain criteria, since introduction. It is likely that these bills will not be passed during the 2018 legislative session.

Mr. Spangler reported that House Bill 4534, relating to the executive secretary of the Health Professional Licensing Boards, has passed House Government Organization Committee, and now moves to House Finance Committee. Board staff will continue to monitor this bill.

Mr. Spangler provided an update regarding House Bill 4609. This bill has passed House Health and Human Committee with an amendment that provides the Board with rule-making
authority to permit and regulate the use of patient testimonials in advertising. The bill now moves to House Judiciary Committee.

Mr. Spangler reported that Senate Bill 434, specifying documents not subject to discovery in certain proceedings, is scheduled for first reading on the Senate floor tomorrow, February 23, 2018. Mr. Spangler continues to collaborate with representatives regarding an amendment which would allow the Board to be exempt for this bill. Board staff will continue to closely monitor this bill and will report back to the Committee at a later date.

Ms. Alley reported that Senate Bill 448, relating generally to professional associations, was on the Senate Government Organization Committee agenda for today, February 22, 2018, but was not taken up. If taken up, at the very least there will need to be a committee substitute introduced to remove language which references individuals license by the Texas State Board of Medical Examiners. Board staff will continue to monitor this bill.

Mr. Spangler reported that he has been at the capitol this afternoon where the Senate Judiciary Committee was scheduled to consider Senate Bill 449, using criminal conviction records to disqualify a person from license or authorization to practice occupation. The Senate Judiciary Committee adjourned without taking this bill up, but the Committee is scheduled to reconvene later this evening. This bill would require the Board to compile an exhaustive list of criminal conduct which would disqualify an applicant from receiving a license or maintaining a license to practice. Additionally, the bill provides that “If an individual has a valid criminal conviction for a crime that would disqualify the individuals from receiving a license or other authorization to practice, the disqualification shall not last longer than five years from the date of conviction.” This bill would also require the Board, within thirty days of receiving a request, to determine whether an individual’s criminal record would disqualify the individual from obtaining a license. Dr. Faheem moved that the Board oppose Senate Bill 449 as written. Reverend Bowyer seconded, and the motion carried.
Mr. Spangler left the meeting at this time to return to the Senate Judiciary Committee meeting at the capitol.

Ms. Alley reported that Senate Bill 499 has been amended to require that international medical school graduates must successfully complete a minimum of two years of ACGME approved postgraduate training. The grandfather clause permitting one year of ACGME training and ABMS Board Certification remains. The entire licensure section has been revised for clarity, but there are no other substantive changes. This bill is scheduled for second reading on the House floor tomorrow, February 23, 2018.

Ms. Alley reported that Senate Bill 313, waiving occupational fees and licensing requirements for certain low-income individuals, military families and young workers, is scheduled for second reading on the Senate floor tomorrow, February 23, 2018. Board staff will speak with representative in the House in an effort to see the bill amended.

Ms. Alley reported that House Bill 4481, relating to mandatory inter-board reporting by licensees or registrants of the boards of medicine, osteopathic medicine and nursing, was on first reading in the house today, February 22, 2018. Board staff will continue to monitor this bill.

Ms. Alley reported on House Bill 4497. This bill was amended in House Government Organization Committee to provide for reciprocity for occupational or professional licensing for military spouses. Additionally, the amendment would permit a board to deny a request for a reciprocal license if the criminal history records check provides reason to believe that the applicant does not meet the requirements of the board or presents a safety risk to the public. Board staff will continue to monitor this bill.

Ms. Alley reported that there has been no action with regard to Senate Bill 318 and House Bill 4581, requiring influenza immunizations for health care workers, since introduction. Board staff will continue to monitor these bills.
Ms. Alley reported that Board staff continue to monitor legislation regarding medical cannabis, physician tax credit and the Patient Injury Compensation Fund assessment fee. Additionally, Board staff continue to monitor the following bills:

**Senate Bill 269**, Establishing 2018 Regulatory Reform Act

**Senate Bill 442**, Establishing universal forms and deadlines when submitting prior authorizations electronically

**Senate Bill 522**, relating generally to the Administrative Procedures Act

**House Bill 4011**, requiring agencies, when submitting a new rule or changes, to also identify two existing rules that could be repealed

**House Bill 4014**, relating to reorganization of the West Virginia Department of Health and Human Resources

**House Bill 4215**, relating to the involuntary hospitalization of persons administered opioid antagonists

**House Bill 4465**, authorizing the acupuncture board to issue certificate to perform auricular acudetox therapy

and

**House Bill 4473**, relating to the use of state funds for advertising to promote a public official or government office.

Mr. Wright thanked Board staff for their efforts during the 2018 legislative session.

There being no further business to consider, the meeting adjourned.

K. Dean Wright, P.A.-C.
Chair of the Legislative Committee
CALL TO ORDER

Agenda Items:

- **SB 313** – Waiving occupational fees and licensing requirements for certain low-income individuals, military families and young workers
- **SB 434** – Specifying documents not subject to discovery in certain proceedings
- **SB 448** – Relating Generally to professional associations
- **SB 499** – Requiring one year of certain approved postgraduate clinical training for persons with foreign medical degrees
- **HB 4304** – Creating the Board of Nursing
- **HB 4481** – Relating to mandatory inter-board reporting by licensees or registrants of the boards of medicine, osteopathic medicine and nursing
- **Report on Cross Over Bills**

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 3rd day of March 2018, at 9:00 a.m.

The following Committee member was present:

Victoria Mullins, P.A.-C.

The following Committee members attended via teleconference:

K. Dean Wright, P.A.-C., Chair
Reverend O. Richard Bowyer
Kishore K. Challa, M.D.
Timothy Donatelli, D.P.M.
Ahmed D. Faheem, M.D., D.L.F.A.P.A

The following Committee member was absent:

Matthew Upton, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame
Andrew R. Wessels

Mr. Wright called the meeting to order and thanked Board staff for their efforts during the 2018 legislative session.

Mr. Spangler reported that the Board of Medicine, along with several other entities, have been provided with a proposed Senate Health and Human Resources Committee Substitute for
*House Bill 4304*, creating the Board of Nursing. In addition to creating the West Virginia Board of Nurses, the proposed committee substitute:

1. removes the Advanced Practice Registered Nurse (APRN) scope of practice that existed in the introduced version of House Bill 4304;
2. creates a new article in chapter 30 for the combination of the West Virginia Board of Medicine and the West Virginia Board of Osteopathic Medicine;
3. provides physician assistants the ability to practice independently after practicing for three years in a collaborative agreement with a physician; and
4. transfers regulatory authority for APRNs to the newly constituted Board of Medicine.

Following review of the proposed committee substitute and extensive discussion, Reverend Bowyer moved that the Board support the proposed committee substitute for House Bill 4043 with the following changes/modifications:

1. the creation of the West Virginia Board of Nurses and consolidation of the Board of Medicine and the Board of Osteopathic medicine, as well as the change of practice for physician assistants, all become effective on July 1, 2019;
2. remove one of the two podiatric physician members from the Board of Medicine and increase lay membership on the Board to three members, one of which would be a citizen over the age of 55 who can represent the interests of older healthcare consumers;
3. prohibit any members of the Board other than the State Health Office to be public employees, with the agreement that any current board member who is currently a doctor of osteopathic medicine and who is a public employee would be permitted to serve on the new board until their term expires, however, no newly appointed members may be public employees;
4. oppose rotating presidencies among professional classes;
5. include rulemaking authority regarding what conduct may constitute disciplinary and/or licensure denial offenses;
6. permit summary disciplinary hearings to be conducted before a hearing examiner and permit twenty days, rather than fifteen, for the summary hearing to occur;
7. modify language in the Physician Assistant Practice Act which would give further effect to the currently proposed changes regarding prescribing without a collaborative agreement;
8. changing the term podiatrist to podiatric physician globally; and
9. authorize Board staff to propose technical other non-substantive changes to the bill.

Dr. Faheem seconded, and the motion carried.

Mr. Spangler reported that there is a hearing scheduled for Monday, March 5, 2018, regarding Senate Bill 313, waiving occupational fees and licensing requirements for certain low-income individuals, military families and young workers. Mr. Spangler will attend the hearing, and Board staff will continue to closely monitor this bill.

Mr. Spangler reported that there is a hearing scheduled for Tuesday, March 6, 2019, regarding Senate Bill 434, specifying documents not subject to discovery in certain proceedings. Mr. Foster provided a brief overview of this bill. The Committee previously authorized staff to seek an amendment to ensure that the Board of Medicine continues to have access to peer review records. Following discussion, Reverend Bowyer moved that Board staff additionally seek an amendment which would provide for board investigations to be confidential and not subject to discovery. Dr. Faheem seconded, and the motion carried.

Ms. Alley reported on Senate Bill 448. The purpose of this bill is to create a new corporate entity in West Virginia where members of professions could create professional associations. There is a committee substitute for this bill which removed language that referenced the Texas State Board of Medical Examiners. Following discussion, Dr. Faheem moved that the Board not support Senate Bill 448 due to technical concerns with regard to the broadness of the language in the bill. Reverend Bowyer seconded, and the motion carried.
Mr. Spangler reported that Board staff continue to monitor the following bills:

**Senate Bill 499**, which requires that persons with foreign medical degrees must successfully complete a minimum of two years of certain approved postgraduate training;

**House Bill 4481**, relating to mandatory inter-board reporting by licensees or registrants of the boards of medicine, osteopathic medicine and nursing, and

**House Bill 4027**, creating an educational permit for allopathic physician residents.

Mr. Spangler reported that **House Bill 4079**, the rule bundle bill which contains the Board of Medicine proposed legislative rule bills, was amended in Senate Judiciary Committee. The amendment directs the Board of Medicine to strike 11 CSR 1A 12.1.ii.B, which prohibits the use of patient testimonials in physician advertising, and re-letters the remaining paragraphs.

Mr. Foster reported that **Senate Bill 273** was amended in House Judiciary Committee yesterday, March 2, 2018; however, board staff continue to have concerns with some of the components of the amended bill. Board staff will continue to speak with members of the House regarding the Board's concerns.

Mr. Spangler reported that to date, there has not been legislation introduced regarding iSelectMD’s telemedicine efforts.

There being no further business to consider, Dr. Faheem moved that the meeting be adjourned. Reverend Bowyer seconded, and the motion carried.

K/ Dean Wright, P.A.-C.
Chair of the Legislative Committee
CALL TO ORDER

Approval of Minutes:
- January 7, 2018
- January 25, 2018
- February 8, 2018
- February 22, 2018
- March 3, 2018
- March 8, 2018

Agenda Items:
- Board of Medicine Legislative Rules 11 CSR 1B and 11 CSR 6
- Overview of the 2018 Legislative Session
- Rulemaking for the 2019 Legislative Session
- Legislative Goals for 2019

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 11th day of March 2018 at 10:00 am.

The following Committee members were present:

K. Dean Wright, P.A.-C., Chair
Reverend O. Richard Bowyer
Kishore K. Challa, M.D., F.A.C.C.
Ahmed D. Faheem, M.D., D.L.F.A.P.A.
Victoria Mullins, P.A.-C.

The following Committee members were absent:

Timothy Donatelli, D.P.M.
Matthew Upton, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Greg S. Foster, Esq.
Jamie C. Frame
Andrew Wessels

Mr. Wright called the meeting to order and thanked Board and Staff members for their efforts during the 2018 legislative session. Dr. Faheem moved that the following meeting minutes be approved:

January 7, 2018
January 25, 2018
February 8, 2018
February 22, 2018
March 3, 2018
Reverend Bowyer seconded, and the motion carried.

Mr. Spangler reported that the Board’s legislative rules 11 CSR 1B, *Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants*, and 11 CSR 6, *Continuing Education for Physicians and Podiatric Physicians*, have completed the legislative process and are awaiting the Governor’s signature. The rule bundle bill, House Bill 4079, was amended in Senate Judiciary Committee. The amendment strikes 11 CSR 1A 12.1.ii.B, prohibiting the use of patient testimonials in physician advertising, and re-letters the remaining paragraph. Reverend Bowyer moved that the Committee authorize Board staff to amend 11 CSR 1A to remove 12.1.ii.B. Dr. Challa seconded, and the motion carried. Board staff will file the final rules with the Secretary of State’s office. Licensees will be notified of the rule changes via electronic mail, and the changes will also be outlined in the June 2018 edition of the Board’s newsletter.

Mr. Foster reported that *Senate Bill 273*, reducing the use of certain prescription drugs, has completed the legislative process and is awaiting the governor’s signature. The Committee has concerns with the requirement in this bill which provides that the practitioner “shall consider” any of the following treatment alternatives prior to starting a patient on an opioid: physical therapy, acupuncture, massage therapy, osteopathic manipulation, chronic pain management program and chiropractic care. Additionally, this bill provides that a practitioner is required to conduct and document the results of a physical examination every ninety days for any patient that he or she continues to treat with any Schedule II controlled substance. The provisions of this bill do not apply to patients who were receiving opioids prior to January 1, 2018. The Committee authorized Board staff to explore seeking remove of the requirement that a physical examination be performed every ninety days.

Mr. Spangler reported that *Senate Bill 434*, specifying documents not subject to discovery in certain proceedings, has completed the legislative process and is awaiting the Governor’s signature. This bill was amended to allow the Board access to peer review records for use in administrative proceedings. Additionally, the amendment provides that all peer review proceedings, communications, and documents of a review organization and all records developed
or obtained during an investigation are confidential and privileged and are not subject to discovery in any civil action or administrative proceeding.

Mr. Spangler reported that House Bill 4199, permitting a nursing home to use trained individuals to administer medication, has completed the legislative process and is awaiting the Governor’s signature. This bill will allow individuals who meet eligibility requirements and who have passed training and competency tests developed by the authorizing agency to administer medications to residents of a nursing home. The Committee has concerns regarding the possible diversion of medications. Following discussion, Reverend Bowyer moved that Mr. Spangler speak with the Governor regarding the Board’s concerns. Dr. Challa seconded, and the motion carried.

Mr. Spangler reported that Senate Bill 499, requiring two years of approved postgraduate clinical training for persons with foreign medical degrees, and House Bill 4027, creating an education permit for allopathic physician residents, have completed the legislative process and are awaiting the Governor’s signature. These bills include rulemaking authority for the Board of Medicine.

Mr. Spangler reported that the following bills, which were monitored by the Committee, have completed the legislative process and are awaiting the Governor’s signature:

SB 313 – waiving occupational fees and licensing requirements for certain low-income individuals, military families and young workers
SB 576 – relating to the Patient Injury Compensation Fund
HB 4217 – permitting an attending physician to obtain a patient’s autopsy report
HB 4336 – updating the schedule of controlled substances

Dr. Gupta joined the meeting as a guest at this time.

Mr. Spangler reported to the Committee that the following bills were closely monitored by the Committee throughout the session, but were not passed:

SB 448 – relating generally to professional associations
SB 473 – requiring insurance coverage for the prescription drug Varenicline

HB 4011 – requiring agencies, when submitting a new rule or changes, to also identify two existing rules that could be repealed

HB 4014 – relating to reorganization of the WV Department of Health and Human Resources

HB 4154 – establishing the 2018 Regulatory Reform Act

HB 4218 – relating to medical professional liability

HB 4304 – creating the Board of Nursing (contains language which combines the West Virginia Board of Medicine and the West Virginia Board of Osteopathic Medicine)

HB 4345 – relating to limitation on permits for growers, processors and dispensaries of medical cannabis

HB 4481 – relating to mandatory inter-board reporting by licensees or registrant of the boards of medicine, osteopathic medicine and nursing

Mr. Spangler reported that the following study resolutions were approved by the legislature:

(1) the feasibility of a single building to house all occupational and professional regulatory boards

(2) licensure, certification and registration forms of occupational and professional regulation

(3) limiting the use of certain criminal records to disqualify a person from license to practice an occupation; and

(4) iSelectMD pilot project regarding telemedicine

Mr. Spangler reported to the Committee that Board staff will begin modifying and drafting rules for consideration by the Committee for introduction in the 2019 legislative session. Such rulemaking includes:

(1) creating an education permit for allopathic physician residents;

(2) modifying 11 CSR 1A to provide that international medical school graduates must successfully complete a minimum of two years of ACGME approved postgraduate training

(3) removing the prohibition on the use of patient testimonials in physician advertising, which is currently is 11 CSR 1A; and

(4) waiving occupational fees and licensing requirements for certain low-income individuals, military families and young workers.
Mr. Spangler reported potential legislative goals for 2019, which include:

(1) changing the burden of proof in disciplinary matters from a clear and convincing evidence standard to a preponderance of evidence standard, so that the Board of Medicine language and the Board of Osteopathic Medicine language align;

(2) allowing at least one board investigator to carry a firearm;

(3) initiating discussion with the Board of Osteopathic Medicine, as well as other interested organizations, regarding consolidation of the Board of Medicine and Board of Osteopathic Medicine; and

(4) reviewing requirements related to physician assistants in an effort to lessen the regulatory burden without compromising safety.

Dr. Faheem moved that the Committee recommend that the Board authorize staff to explore the above-mentioned matters identified as legislative goals for 2019. Reverend Bowyer seconded, and the motion carried.

There being no further business to consider, the meeting adjourned.

ADJOURNMENT

R. Dean Wright, P.A.-C.
Chair of the Legislative Committee
CALL TO ORDER

Public Comments

Approval of Minutes

- March 11, 2018

Agenda Items:

- Report Regarding the FSMB Annual Meeting
- Board of Medicine Legislative Rules 11 CSR 1B and 11 CSR 6
- Board of Medicine Legislative Rule 11 CSR 1A
- Update on the 2018 Legislative Session
  - Action by the Governor
  - Senate Bill 273
- Regulatory Moratorium
- Rulemaking for the 2019 Legislative Session
  - 11 CSR 1A
  - Education Permit
- 2018 Special Meetings

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Legislative Committee Minutes
May 6, 2018

A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 6th day of May 2018, at 10:00 a.m.

The following Committee members were present:

K. Dean Wright, P.A.-C., Chair
Reverend O. Richard Bowyer
Kishore K. Challa, M.D.
Timothy Donatelli, D.P.M.
Ahmed D. Faheem, M.D., D.L.F.A.P.A
Matthew Upton, M.D.

The following Committee member was absent:

Victoria Mullins, P.A.-C.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame
Andrew R. Wessels

Mr. Wright called the meeting to order. Dr. Faheem moved that the minutes of the March 11, 2018 meeting be approved. Dr. Challa seconded, and the motion carried.

Reverend Bowyer joined the meeting at this time.

Mr. Spangler reported that several board and staff members recently attended the Federation of State Medical Boards (FSMB) annual meeting in Charlotte, North Carolina. In total, the Board of Medicine had a representation of eleven members present for the meeting.
During the FSMB House of Delegates meeting, Mr. Spangler served as a teller and Dr. Faheem was elected to the FSMB Nominating Committee. Additionally, the House of Delegates adopted a proposal from the Bylaws Committee which creates a Staff Fellow category that will allow each member board to denote one individual to serve as a Staff Fellow of the FSMB. Dr. Faheem has nominated Mr. Spangler to serve in this capacity for the Board of Medicine.

Mr. Spangler reported that Administrators in Medicine (AIM) currently offers a certification program which is available to medical board executive directors and investigators. It was recently announced that beginning in October 2019 AIM will begin offering a certification program for medical board licensure analysts.

Mr. Spangler reported that the final version of the Board’s legislative rules 11 CSR 1B, *Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants*, and 11 CSR 6, *Continuing Education for Physicians and Podiatric Physicians*, have been filed with the Secretary of State’s office and will become effective on July 1, 2018. Legislation was passed during the 2018 session which directs the Board of Medicine to strike 12.1.ii.B, prohibiting the use of patient testimonials in physician advertising, and re-letter the remaining paragraph of 11 CSR 1A, *Licensing and Disciplinary Procedures: Physicians; Podiatric Physicians and Surgeons*. Reverend Bowyer moved that the Committee recommend that the Board authorize staff to strike 12.1.ii.B and re-letter the remaining paragraph as directed and file 11 CSR 1A with the Secretary of State’s Office. Dr. Challa seconded, and the motion carried. Licensees will be notified of the changes to these rules via electronic mail. The changes will also be outlined in the June 2018 edition of the Board’s newsletter.

Mr. Spangler reported that the following bills, which were monitored by the Committee, completed the legislative process, but were vetoed by the Governor:

**Senate Bill 313** – waiving occupational fees and licensing requirements for certain low-income individuals, military families and young workers.

**Senate Bill 434** – specifying documents not subject to discovery in certain proceedings.
Senate Bill 442 – establishing universal forms and deadlines when submitting prior authorizations electronically.

House Bill 4199 – permitting a nursing home to use trained individuals to administer medication.

Mr. Spangler reported that Senate Bill 273, reducing the use of certain prescription drugs, was passed during the 2018 legislative session and becomes effective on June 7, 2018. The Committee has concerns with the provision of this bill which requires a practitioner to conduct and document the results of a physical examination every 90 days for any patient that he or she continues to treat with any Schedule II controlled substance, including non-opioids. Reverend Bowyer moved that the Committee recommend that the Board authorize Dr. Faheem to write a letter to the Governor which identifies the Board’s concerns regarding Senate Bill 273. Dr. Challa seconded, and the motion carried.

Mr. Spangler reported to the Committee that the Governor has issued an Executive Order known as the “Regulatory Moratorium” which provides that “prior to filing any proposed rule with the Secretary of State and the Legislative Rule-Making Review Committee agencies shall provide written notice to the Governor.” Mr. Spangler has spoken with Ashley Summit, counsel at the Governor’s office, who stated that proposed modifications to an existing rule or any new rule will need to be submitted to her via electronic mail for review. Ms. Summit will review the rule and will respond via electronic mail, within a couple of days, indicating whether or not the agency is authorized to move forward with filing the proposed rule with the Secretary of State’s Office. The Committee encouraged Mr. Spangler to communicate with other Chapter 30 Boards to obtain their thoughts and opinions regarding the Moratorium.

Mr. Spangler reported that prior to the July 2018 meeting, rulemaking action will need to be taken with regard to 11 CSR 1A, Licensing and Disciplinary Procedures: Physicians; Podiatric Physicians and Surgeons, to bring it into alignment with the statutory changes passed during the 2018 legislative session regarding residency requirements for international medical
school graduates. Additionally, the Board will need to file a legislative rule and an emergency rule regarding the issuance of educational permits. The Committee scheduled a special meeting for Thursday June 14, 2018 at 5:00 p.m.

ADJOURNMENT

There being no further business to consider, Dr. Faheem moved that the meeting be adjourned. Reverend Bowyer seconded, and the motion carried.

K. Dean Wright, P.A.C.
Chair of the Legislative Committee
CALL TO ORDER

Public Comments

Agenda Items:

- Rulemaking for the 2019 Legislative Session
  - 11 CSR 1A
  - Educational Permit
- Regulatory Moratorium

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Legislative Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 14th day of June 2018 at 5:00 pm.

The following Committee member was present:
K. Dean Wright, P.A.-C., Chair

The following Committee members attended the meeting via teleconference:
Reverend O. Richard Bowyer
Kishore K. Challa, M.D., F.A.C.C.
Timothy Donatelli, D.P.M.
Ahmed D. Faheem, M.D., D.L.F.A.P.A.
Victoria Mullins, P.A.-C.
Matthew Upton, M.D.

The following Staff members were present:
Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Jamie C. Frame
Andrew Wessels

Mr. Wright called the meeting to order. Prior to today’s meeting, a copy of the proposed amendments to the Board’s legislative rule 11 CSR 1A, Licensing and Disciplinary Procedures: Physicians; Podiatric Physicians and Surgeons, and a copy of a proposed new rule 11 CSR 12, Permitting and Disciplinary Procedures: Educational Permits for Graduate Medical Interns, Residents and Fellows, was made available for members to review.
Ms. Alley reported that Senate Bill 499 was enacted during the 2018 legislative session. This bill changed the licensure requirements for medical doctors who have completed their medical education at an international medical school. Pursuant to Senate Bill 499, international medical school graduates are now required to have two years of ACGME-approved, post-graduate training instead of three years. Additionally, during the last several months the Board has identified a need to revisit the rule provisions related to medical professional liability reporting. The proposed amendments to 11 CSR 1A include the following:

The citation referenced in 4.1 was modified from §30-3-10 to §30-3-10(b).

Section 5 was modified to provide that in addition to other qualifications and requirements, an applicant for licensure who is a graduate of a medical school located outside of the United States, the Commonwealth of Puerto Rico or Canada is require to have been “engaged on a full-time professional basis in the practice of medicine within the state or jurisdiction where the applicant is fully licensed for a period of at least five years not to include practice via telemedicine technologies from a location physically outside of the state or jurisdiction of license.” Additionally, the rule was modified to provide that international medical school graduates are now required to have two years of ACGME-approved, post-graduate training, rather than three years.

Section 9 of the proposed rule was modified to clarify that United States graduates and international medical school graduates who apply for a medical license through the Board may be eligible for a temporary license if they meet the established qualifications.

Section 13 was modified to clarify the circumstances under which malpractice settlements and judgments must be reported to the Board and to align the Board’s malpractice reporting standards with other reporting requirements for malpractice, including the National Practitioner Data Bank. The intent of this amendment was to provide clarity to individuals who reporters and continuity in the required reporting with other entities.

Following discussion, Dr. Challa moved that the Committee recommend that the Board approve 11 CSR 1A as modified and authorize staff to move forward with promulgation of the rule. Reverend Bowyer seconded, and the motion carried.
Ms. Alley reported that House Bill 4027 was enacted during the 2018 legislative session. This bill established a requirement that all participants in post-graduate medical residency and fellowship training in West Virginia hold a training permit issued by the West Virginia Board of Medicine. All residents and fellows must comply with this requirement by July 1, 2019, but the statute authorizes the Board to promulgate emergency rules to implement the provisions of House Bill 4027 prior to that date. An emergency rule is needed for the Board to implement the educational permit requirement. With regard to the proposed rule:

Section 2 sets forth applicable definitions.

Section 3 identifies the requirements for all participants in West Virginia graduate medical education training and establishes that a participant must hold either a full medical license or an educational permit. This section also establishes the limitations of the permit, and that a permit will expire when a permit holder obtains a West Virginia medical license.

Section 4 sets forth the eligibility criteria, application process and fee for an educational permit.

Section 5 establishes the permit period and renewal process.

Section 6 identifies the obligations of an educational permit holder.

Section 7 sets forth permit denial, complaint and disciplinary procedures.

Section 8 identifies permit denial and disciplinary grounds.

Section 9 creates a process and eligibility criteria for reciprocal educational permits. These reciprocal permits would be issued to participants in residency training outside of West Virginia who wish to complete temporary rotations in West Virginia.

Section 10 establishes reporting obligations to the Board of Medicine by graduate medical education programs concerning the termination of medical education training contracts for permit holders.
Following discussion, Reverend Bowyer moved that the Committee recommend that the Board approve 11 CSR 12 as presented and authorize staff to move forward with promulgation of a regular rule and an emergency rule regarding educational permits. Dr. Challa seconded, and the motion carried.

Dr. Faheem left the teleconference at this time and was not present for the remainder of the meeting.

At the May 2018 meeting, Mr. Spangler reported to the Committee that the Governor has issued an Executive Order known as the “Regulatory Moratorium” which provides that “prior to filing any proposed rule with the Secretary of State and the Legislative Rule-Making Review Committee agencies shall provide written notice to the Governor.” Following discussion, Reverend Bowyer moved that a copy of the Board’s proposed rulemaking regarding 11 CSR 1A and 11 CSR 12, be submitted to the Governor’s office. Dr. Challa seconded, and the motion carried. Mr. Wright called for a roll call vote upon the motion. A vote was taken:

Reverend O. Richard Bowyer – yes
Kishore K. Challa, M.D., F.A.C.C. – yes
Timothy Donatelli, D.P.M. – yes
Victoria Mullins, P.A.-C. – yes
Matthew Upton, M.D. – no
K. Dean Wright, P.A.-C. – yes

By majority vote of a quorum of the Committee, the motion carried.

There being no further business to consider, the meeting adjourned.

K. Dean Wright, P.A.-C.
Chair of the Legislative Committee
Executive / Management Committee
Meeting Agendas and Minutes
CALL TO ORDER

Approval of Minutes

- May 7, 2017

Agenda Items:

- Presentation by Danny Scalise, Executive Director of the WV State Medical Association

- Consideration of Correspondence Received from the WV State Medical Association

- Fiscal Reports and Purchasing Card Transactions for the Months of February, May and June

- 2017-2018 Contracts

- 2017 Renewal Results

- Licensure Fees

- Upcoming Outreach

- Updates
  - Big Picture
  - Interstate Medical Licensure Compact
  - Office Renovations

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Executive/Management Committee Minutes
July 9, 2017

A meeting of the West Virginia Board of Medicine Executive/Management Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 9th day of July 2017 at 11:15 am.

The following Committee members were present:
Ahmed Faheem, M.D., Chair
Kishore K. Challa, M.D., F.A.C.C.
Rahul Gupta, M.D., M.P.H.

The following Committee member was absent:
Reverend O. Richard Bowyer

The following Staff members were present:
Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Jamie C. Frame

Dr. Faheem called the meeting to order. Dr. Gupta moved that the minutes of the May 7, 2017 meeting be approved. Dr. Challa seconded, and the motion carried.

Danny Scalise, Executive Director of the West Virginia State Medical Association, addressed the Committee regarding concerns identified by some State Medical members regarding the potential practice of medicine by an advance practice registered nurse. Following discussion, Mr. Spangler indicated that he will pursue the filing of a complaint on behalf of this Board with the West Virginia Board of Examiners for Registered Professional Nurses regarding this matter, as the issue involves that Board’s licensee. Committee members thanked Mr. Scalise for coming. Likewise, Mr. Scalise thanked committee members and left the meeting at this time.
In advance of the meeting, members were provided with a copy of the fiscal report and purchasing card transactions for the months of February, May and June 2017. The March and April reports were approved at the May 2017 meeting. Upon review of the expenditures, Dr. Challa moved that the purchasing card transactions for the months of February, May and June 2017 be approved. Dr. Gupta seconded, and the motion carried.

Mr. Spangler reported that the Board's spending authority in relation to personnel has been increased, and that the Board recently advertised for a full-time Board Attorney. Interviews will be conducted this week, and on Friday, July 14, 2017, the top candidates will be interviewed by Executive/Management Committee members and key staff members. Thereafter, Mr. Spangler will fill the position.

Mr. Spangler reported that the bidding process for hearing examiners and court reporting services has concluded. The Board has contracted with the following six individuals to provide hearing examiner services for the 2017-2018 fiscal year:

- Lewis Brewer, Esq.
- Rudy Martin, Esq.
- Jack McClung, Esq.
- Janis Reynolds, Esq.
- Herschel Rose, Esq.
- Jennifer Taylor, Esq.

Additionally, the Board has contracted with the following four individuals / entities to provide court reporting services for the 2017-2018 fiscal year:

- Rebecca Baker
- Nancy McNealy
- Wilda Stonestreet
- Sargent's Court Reporting Services

Mr. Spangler reported that the Board will need to maintain a contract with Big Picture as we examine our current needs and explore database options. Therefore, the Board will enter into a one year maintenance agreement with Big Picture.
Mr. Spangler reported that the Board has received several requests for a roster of information regarding licensees of the Board. Currently, with the exception of a few entities for which the Board has an agreement, board staff directs individuals seeking a roster of licensee information to West Virginia University Office of Health Services Research. Following discussion, the Committee elected to maintain the current practice with regard to handling requests for licensee information.

Mr. Spangler reported on the 2017 licensure renewal for medical doctors; 2846 licensees renewed their license in active status, 203 licensees renewed in inactive status, and 531 licenses expired. With regard to podiatric physicians, 109 licensees renewed their license in active status, 6 licensees renewed in inactive status and 13 licenses expired.

Mr. Spangler reported that P. Bradley Hall, M.D., Executive Director of the West Virginia Medical Professionals Health Program (WVMPHP), has requested that the Board of Medicine licensure fees be increased by $100.00 per licensee per renewal cycle to assist in funding the WVMPHP. Upon reviewing licensure fees in surrounding states, Maryland is the only state that currently charges higher licensing fees than West Virginia. The Committee acknowledged the important role that the WVMPHP plays, and would like to review statistical data regarding the number of referrals, outcomes, etc. regarding the program and work cooperatively with the WVMPHP towards a sound financial future for the organization. However, the Committee does not feel that it is possible to increase the licensure fee by $100.00; therefore, Dr. Challa moved that the Committee recommend that the Board decline to support an increase in licensure fees at this time. Dr. Gupta seconded, and the motion carried.

Mr. Spangler reported to the Committee that he and Ms. Alley will be traveling to West Virginia University School of Medicine on July 25, 2017 to tour the school and meet with representatives. Additionally, Mr. Spangler and Ms. Alley will be meeting with representatives of West Virginia Mutual Insurance on July 27, 2017 to discuss working collaboratively on issues of common interest.

Mr. Spangler reported that he has attended an Interstate Medical Licensure Compact (IMLC) Commission meeting in St. Paul Minnesota, and has also participated in IMLC
Commission teleconferences. The Board of Medicine has begun receiving applications for an IMLC license. The next face to face meeting of the IMLC Commission is scheduled to occur in November 2017.

Mr. Spangler reported that renovations to the new office space are nearing completion, and that the moving of offices is scheduled to begin later this week.

With regard to staff, Mr. Spangler reported that the Board recently terminated the employment of a staff member, and that Andrew Wessels will assume his position with the Board later this month.

There being no further business to consider, Dr. Gupta moved that the meeting be adjourned, Dr. Challa seconded, and the motion carried.

Ahmed D. Faheem, M.D.
Chair of the Executive/Management Committee
CALL TO ORDER

Approval of Minutes

- July 9, 2017

Agenda Items:

- Fiscal Reports and Purchasing Card Transactions for the Months of July and August
- FSMB Guidelines for the Chronic Use of Opioid Analgesics
- NCCPA Request to Present to the Board
- WV Medical Professional Health Program
- WVU Meeting – Legislative Items of Interest
- Updates
  - Staff
  - Office Renovations
  - Interstate Medical Licensure Compact
  - Strategic Planning Meeting
  - Complaint Filed with the WV Board of Registered Professional Nurses

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Executive/Management Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 10th day of July 2017 at 11:15 am.

The following Committee members were present:
Ahmed Faheem, M.D., D.L.F.A.P.A., Chair
Reverend O. Richard Bowyer
Kishore K. Challa, M.D., F.A.C.C.
Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P.

The following Staff members were present:
Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame

Dr. Faheem called the meeting to order. Reverend Bowyer moved that the minutes of the July 9, 2017 meeting be approved. Dr. Challa seconded, and the motion carried.

In advance of the meeting, members were provided with a copy of the fiscal report and purchasing card transactions for the months of July and August 2017. Upon review of the expenditures, Reverend Bowyer moved that the purchasing card transactions for the months of July and August 2017 be approved. Dr. Challa seconded, and the motion carried.

Mr. Spangler reported that in April 2017 the Federation of State Medical Boards (FSMB) adopted Guidelines for the Chronic Use of Opioid Analgesics. Following discussion, Reverend Bowyer moved that the Committee recommend that the Board replace its current position
statement regarding opioid analgesics with the 2017 FSMB Guidelines for the Chronic Use of Opioid Analgesics. Dr. Gupta seconded, and the motion carried.

Mr. Spangler reported that the Board has received correspondence from Dawn Morton-Rias, President and CEO of the National Commission on Certification of Physician Assistants, requesting an opportunity to address the Board. Ms. Morton-Rias will be invited to present to the Board, or at her discretion the Physician Assistant Committee, at a future meeting.

In advance of the meeting, Committee members were provided with a copy of correspondence from P. Bradley Hall, M.D., Executive Director of the West Virginia Medical Professionals Health Program (WVMPHP), regarding the financial future of the organization and providing statistical facts regarding the program. The Board will continue to work cooperatively with the WVMPHP towards a sound financial future for the organization.

Mr. Spangler reported to the Committee that in July, Ms. Alley, Mr. Wessels, Reverend Bowyer, Dr. Upton and himself met with representatives of West Virginia University (WVU) School of Medicine. During the meeting, WVU representatives identified the following issues that they hope to address cooperatively with the Board of Medicine:

1. The inability of a licensee who holds a temporary license to bill Medicaid;
2. The expansion of faculty licenses beyond a university’s medical center; and
3. The ten year rule to pass all steps of the United States Medical Licensing Exam (USMLE).

Mr. Spangler reported to the Committee that he is working with Dr. Joseph Shapiro, Dean of Marshall University School of Medicine, to facilitate a visit to the Joan C. Edwards School of Medicine. Board members are encouraged to participate in the visit. Additional information will be provided as it becomes available.

Mr. Spangler reported that the Board has hired Andrew Wessels as the Director of Intergovernmental and Public Relations, Greg Foster as Board Attorney, and Diane Callison as Receptionist / Administrative Office Assistant.
Mr. Spangler reported to the Committee that the renovations to the new board room are nearing completion, and the room will be available for use by the October strategic planning meeting.

Mr. Spangler reported that the Board has issued 3 letters of qualification and 6 licenses pursuant to the Interstate Medical Licensure Compact (IMLC). Mr. Spangler was asked to assume the position of treasurer for the IMLC Commission, for which he has declined at this time due to work volume at the Board of Medicine. However, he will maintain his involvement as a commissioner.

Mr. Spangler reported that the Strategic Planning Meeting will be held on Saturday, October 7, 2017. Board and staff members will receive a series of surveys to complete in advance of the meeting. Additional information will be provided as it becomes available.

Mr. Spangler reported to the Committee that he has filed a complaint on behalf of the Board of Medicine with the West Virginia Board of Registered Professional Nurses regarding the potential practice of medicine by an advance practice registered nurse. The Board of Medicine has received confirmation from the West Virginia Board of Registered Professional Nurses that the complaint has been received. Mr. Spangler will keep the Committee apprised regarding this matter.

There being no further business to consider, Reverend Bowyer moved that the meeting be adjourned. Dr. Challa seconded, and the motion carried.

Ahmed D. Faheem, M.D., D.L.F.A.P.A.
Chair of the Executive/Management Committee
CALL TO ORDER

Approval of Minutes

- September 10, 2017

Agenda Items:

- Fiscal Reports and Purchasing Card Transactions for the Months of September and October 2017

- Adoption of Mission, Vision and Core Values

- Selection of 2018 Meeting Dates:
  - January 8, 2018
  - March 12, 2018
  - May 7, 2018 or May 21, 2018
  - July 9, 2018
  - September 10, 2018
  - November 5, 2018 or November 19, 2018

- Resident License

- Reporting of Medical Malpractice Claims by Insurance Carriers

- Written Request for Telemedicine Correspondence Response

- Written Request from Mercer County Board of Health Regarding Standing Orders

- Complaint Filed with the WV Board of Registered Professional Nurses

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Executive/Management Committee Minutes
November 12, 2017

A meeting of the West Virginia Board of Medicine Executive/Management Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 12th day of November 2017 at 11:15 am.

The following Committee members were present:
Ahmed Faheem, M.D., D.L.F.A.P.A., Chair
Reverend O. Richard Bowyer
Kishore K. Challa, M.D., F.A.C.C.
Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P.

The following Staff members were present:
Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame

Dr. Faheem called the meeting to order. Reverend Bowyer moved that the minutes of the September 10, 2017 meeting be approved. Dr. Gupta seconded, and the motion carried.

In advance of the meeting, members were provided with a copy of the fiscal report and purchasing card transactions for the months of September and October 2017. Upon review of the expenditures, Reverend Bowyer moved that the purchasing card transactions for the months of September and October 2017 be approved. Dr. Gupta seconded, and the motion carried.

The Committee reviewed the Board’s draft mission statement, vision statement and core values that were established during the October 7, 2017 strategic planning meeting. Dr. Challa
moved that the Committee recommend that the Board adopt the mission statement, vision statement and core values. Reverend Bowyer seconded, and the motion carried.

The Committee reviewed the proposed schedule of 2018 Board meeting dates. Following discussion, Dr. Gupta moved that the following meeting dates be presented to the Board for approval:

    January 8, 2018;
    March 12, 2018;
    May 7, 2018;
    July 9, 2018;
    September 10, 2018; and
    November 5, 2018.

Dr. Challa seconded, and the motion carried.

Mr. Spangler reported to the Committee that the Board has received correspondence requesting that the Board of Medicine consider issuing educational permits to physicians participating in medical residencies. The West Virginia Board of Osteopathic Medicine, in accordance with §24-1-13, issues postgraduate educational permits. During the Legislative Committee meeting held earlier today, the Committee authorized staff to further research resident permits and to draft a bill for review at the January 2018 meeting, for possible introduction during the 2018 legislative session.

Mr. Spangler reported that the Board has received correspondence inquiring about insurance company medical malpractice reporting requirements. Following discussion, Reverend Bowyer moved that the Committee authorize staff to respond to the inquiry indicating that all judgments, all settlements, and any payment made on behalf of a Board of Medicine licensee, regardless of whether the payment was made pre-or-post suit, needs to be reported to the Board. Dr. Challa seconded, and the motion carried.

The Committee reviewed and discussed correspondence seeking an opinion regarding whether certain telemedicine encounters involving solely asynchronous interactions between a
medical provider and a new patient are permissible under West Virginia telemedicine regulation. In reviewing the correspondence, the Committee was not able to determine whether the asynchronous interactive platforms that the letter was referencing are consistent with state law. Dr. Challa moved that the Committee authorize staff to respond to the correspondence received indicating that West Virginia Code §30-3-13a(c) establishes the methods through which a physician patient relationship can be established. Reverend Bowyer seconded, and the motion carried.

The Committee reviewed and discussed correspondence received from the Mercer County Board of Health, inquiring whether a physician can issue a standing order for an associate degree medical assistant to administer influenza vaccinations. Mr. Spangler will contact the Mercer County Board of Health and advise that their inquiry would be best addressed by Amy Atkins, Director of the West Virginia Center for Local Health.

Mr. Spangler reported that the Board has received correspondence from the West Virginia Board of Registered Professional Nurses notifying the Board that the complaint that Mr. Spangler submitted on behalf of the Board concerning the dermatology practice of an Advanced Practice Registered Nurse has been dismissed.

There being no further business to consider, Reverend Bowyer moved that the meeting be adjourned. Dr. Gupta seconded, and the motion carried.

Ahmed D. Faheem, M.D.
Chair of the Executive/Management Committee
CALL TO ORDER

Approval of Minutes

- November 13, 2017

Agenda Items:

- Fiscal Reports and Purchasing Card Transactions for the Months of November and December

- Review of Board Policies and/or Procedures and Proposed Updates
  - Resolution Concerning Conflicts of Interest Policy
  - Procedure to be Followed by Persons Desiring to Address the Board

- West Virginia Ethics Commission Advisory Opinion Regarding the Use of Titles and Photographs in Educational Materials

- Convenience Fee Associated with Credit Card Payments

- Review of Uniform Application for Physicians and Associated Fees

- Potential Legislative Topics in 2018

- Nomination of Mr. Spangler as an FSMB Fellow

- Executive Director Twelve Month Employment Review

- Update, Review and Follow-up Regarding Strategic Planning

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Executive/Management Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 7th day of January 2018 at 11:00 am.

The following Committee members were present:
   Ahmed Faheem, M.D., D.L.F.A.P.A., Chair
   Reverend O. Richard Bowyer
   Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P.

The following Committee member was absent:
   Kishore K. Challa, M.D., F.A.C.C.

The following Staff members were present:
   Mark A. Spangler, M.A.
   Jamie S. Alley, Esq.
   Greg S. Foster, Esq.
   Jamie C. Frame

Dr. Faheem called the meeting to order. Dr. Gupta moved that the minutes of the November 13, 2017 meeting be approved. Reverend Bowyer seconded, and the motion carried.

In advance of the meeting, members were provided with a copy of the fiscal report and purchasing card transactions for the months of November and December 2017. Upon review of the expenditures, Reverend Bowyer moved that the purchasing card transactions for the months of November and December 2017 be approved. Dr. Gupta seconded, and the motion carried.

Mr. Spangler reported to the Committee that he would like to begin the process of reviewing Board Position Statements for currentness of content. Prior to today’s meeting the
Board’s current policy regarding resolution concerning conflicts of interest was made available for members to review. This policy was originally adopted in 1988, and was amended in 2010. The Committee reviewed a draft revision of the policy, which provides guidance for members with regard to when and how to declare a conflict of interest. Reverend Bowyer moved that the Committee recommend that the Board adopt the Conflict of Interest Policy as presented. Dr. Gupta seconded, and the motion carried.

Mr. Spangler reported that the Board’s Procedure to be Followed by Persons Desiring to Address the Board was originally adopted in 2000, and was amended in 2010. The Committee reviewed a draft revision of the procedure. Following discussion, Board staff was directed to amend number two of the procedure to read as follows:

2. Each speaker will be allotted five minutes. However, if the number of persons who sign-up to address the Board is greater than persons, the Chair may identify a uniform time between one and five minutes to be allotted to each commenter.

Reverend Bowyer moved that the Committee recommended that Board adopt the amended Procedure for Making Public Comments at Meetings of the Board. Dr. Gupta seconded, and the motion carried.

Mr. Spangler reported to the Committee that at the November 2017 State Auditor’s Conference, the West Virginia Ethics Commission presentation provided that the Ethics Act prohibits a public official’s name or likeness (i.e. title and photograph) from being placed on education materials. The Committee reviewed an Ethics Commission Advisory Opinion regarding the use of titles and photographs in educational materials, and it remains unclear as to whether the Board’s newsletter is considered “educational material.” Reverend Bowyer moved that Board staff obtain an opinion from the Ethics Commission regarding the use of names, titles and photographs in future Board of Medicine newsletters. Dr. Gupta seconded, and the motion carried.

Mr. Spangler reported that the West Virginia Treasure’s Office applies a 2.25% convenience fee to all payments made to the Board via credit card transaction. In January 2016, the Board elected to absorb the 2.25% convenience fee applied to credit card transactions for a period of two years, and reevaluate thereafter. Following discussion, Reverend Bowyer moved that the Committee recommend that the Board continue to absorb the 2.25% convenience fee
associated with credit card transactions for a period of two years and reevaluate thereafter. Dr. Gupta seconded, and the motion carried.

Mr. Spangler reported that currently the only pathway for a physician to apply for a license to practice medicine in West Virginia is to submit a Uniform Application (UA). The fee that an applicant is charged to utilize the UA is $60.00. Following discussion, the Committee directed Board staff to begin developing a paper application that could be utilized by applicants applying for initial licensure with the Board.

Dr. Faheem reported that the Federation of State Medical Boards (FSMB) has modified their bylaws to allow medical board executive directors to become a FSMB fellow. Following discussion, Dr. Gupta moved that the Committee recommend that the Board nominate Mr. Spangler as a FSMB fellow. Reverend Bowyer seconded, and the motion carried.

Dr. Faheem reported to the Committee that Mr. Spangler is approaching completion of his first year in the executive director position, and recommended that the Committee perform a twelve-month employment review. Reverend Bowyer moved that the Committee enter into executive session pursuant to W.Va. Code §6-9A-4 to consider personnel matters regarding the executive director position. Dr. Gupta seconded, and the motion carried. Mr. Spangler, Ms. Alley, Ms. Frame and Mr. Foster left the meeting room at this time.

The executive session concluded, and the public session commenced. All of the staff members who had left the meeting room when the Committee entered into executive session returned to the room at this time.

Reverend Bowyer moved that the base salary for the executive director position be adjusted to $116,000 annually, effective upon completion of all necessary administrative processing to make this change. Dr. Gupta seconded, and the motion carried.

Mr. Spangler reported that the Board has begun incorporating the Mission, Vision and Core Values that were adopted in 2017. Member were provided with a draft copy of the goals and objectives that were identified during the Board’s strategic planning session. Strategic planning
will be placed on the March 2018 Executive/Management Committee agenda, and the Committee will further discuss the draft goals and objective. The Committee would like to begin conducting annual strategic planning sessions. For 2018, the proposed date for a half-day planning session is Saturday, October 20, 2018.

There being no further business to consider, Reverend Bowyer moved that the meeting be adjourned. Dr. Gupta seconded, and the motion carried.

Ahmed D. Faheem, M.D.
Chair of the Executive/Management Committee
CALL TO ORDER

Public Comments

Approval of Minutes

- January 7, 2018

Agenda Items:

- Correspondence Received Regarding Malpractice Reporting
- Correspondence Received Regarding Supporting the Practice of Physician Assistants
- Correspondence Received Regarding Temporary License Billing and Credentialing
- Correspondence Received Regarding Suggested Changes to the Ryan Haight Act Regulations
- Fiscal Reports and Purchasing Card Transactions for the Months of January and February
- Review of Board Policies and/or Procedures and Proposed Updates
  - Position Statement on the Corporate Practice of Medicine
  - Collaborative Relationships for Prescriptive Authority with APRNs or Certified Nurse Midwives
- Legislative Topics
- Update, Review and Follow-up Regarding Strategic Planning
• Updates

  ▪ West Virginia Ethics Commission Advisory Opinion Regarding the Use of Titles and Photographs in Educational Materials
  ▪ Review of Uniform Application for Physicians and Associated Fees

**ADJOURNMENT**
A meeting of the West Virginia Board of Medicine Executive/Management Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 11th day of March 2018 at 11:00 am.

The following Committee members were present:
   Ahmed Faheem, M.D., D.L.F.A.P.A., Chair
   Reverend O. Richard Bowyer
   Kishore K. Challa, M.D., F.A.C.C.
   Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P.

The following Staff members were present:
   Mark A. Spangler, M.A.
   Greg S. Foster, Esq.
   Jamie C. Frame

Dr. Faheem called the meeting to order. Reverend Bowyer moved that the minutes of the January 7, 2018 meeting be approved. Dr. Challa seconded, and the motion carried.

Tim Linkous, Esquire, of Linkous Law, PLLC was present for the meeting and signed up to address the Committee. Mr. Linkous was provided with a copy of the Procedure for Making Public Comments at Meetings of the Board. Following Mr. Linkous' address to the Committee, members thanked him for his comments.

Mr. Linkous left the meeting at this time.

In advance of the meeting, committee members were provided with a copy of correspondence that was received regarding the reporting of medical malpractice settlements and judgements to the Board of Medicine. Reverend Bowyer moved that the Committee authorize
Board staff to begin reviewing the Board’s Medical Professional Liability Claim Report Form, and present proposed modifications to the Committee at the May meeting. Dr. Gupta seconded, and the motion carried.

The Committee reviewed and discussed correspondence that was received which requests expungement of a medical malpractice settlement claim report from a licensee’s record. Dr. Challa moved that Board legal staff review the request for expungement and provide a recommendation to the Committee at the May meeting. Dr. Gupta seconded, and the motion carried.

The Committee reviewed and discussed correspondence that was received from the Washington State Medical Commission (WSMC). The WSMC is unable to attend the 2018 Federation of State Medical Board’s annual meeting and asks that the West Virginia Board of Medicine speak to the WSMC’s resolution entitled Supporting the Practice of Physician Assistants. The Committee believes that it would be premature to opine on this issue until ample time for further discussion and consideration is had. Mr. Spangler will follow-up with the WSMC regarding this matter.

The Committee reviewed correspondence that was received regarding the ability for licensees who hold an active temporary license with the Board of Medicine to bill for their services. Mr. Spangler will respond to this request indicating that a temporary license is an active license, and therefore licensees who hold a temporary license should not be treated any different than other licensees who hold an active license with the Board.

The Committee reviewed correspondence that was received regarding the Drug Enforcement Agency’s efforts to amend the regulations of the Ryan Haight Act, which relates to prescribing controlled substances through the use of telemedicine. Reverend Bowyer moved that the Committee recommend that the Board oppose any changes to the Ryan Haight Act. Dr. Gupta seconded, and the motion carried.

The Committee reviewed correspondence that was received from a student at George Washington University’s School of Public Health. The correspondence addresses prescription
drug related overdose deaths in West Virginia. Mr. Spangler will respond to the sender indicating that current legislation and other initiatives are in alignment with her recommendations.

Prior to today’s meeting, Committee members were provided with a copy of the fiscal report and purchasing card transactions for the months of January and February 2018. Mr. Spangler reported that the Board’s request for a budget increase has been approved. Upon review of the expenditures, Reverend Bowyer moved that the purchasing card transactions for the months of January and February 2018 be approved. Dr. Challa seconded, and the motion carried.

Mr. Spangler reported that the Board’s Position Statement on the Corporate Practice of Medicine was adopted in 2013. Following review, Dr. Gupta moved that the Committee recommend that Board re-adopt the Position Statement on the Corporate Practice of Medicine as presented with no modification. Reverend Bowyer seconded, and the motion carried.

Mr. Spangler reported that the Board’s current policy regarding collaborative relationships for prescriptive authority with advanced practice registered nurses or certified nurse midwives was adopted in March 2012. Dr. Gupta moved that the Committee recommend that the Board re-adopt the policy regarding collaborative relationships for prescriptive authority with APRNs or certified midwives and authorize Board staff to make technical, non-substantive changes to the policy. Reverend Bowyer seconded, and the motion carried.

Prior to today’s meeting, Committee members were provided with a copy of the Board’s strategic plan for 2018, which identifies the Boards goals and objectives for the year. Dr. Challa moved that the Committee recommend that the Board ratify the strategic plan as presented. Reverend Bowyer seconded, and the motion carried.

At the January 2018 meeting, the Committee recommended, and the Board approved, that a half-day strategic planning session be held on October 20, 2018. Due to scheduling conflicts, the Committee will recommend that the Board conduct the strategic planning session on either Saturday October 6th or Saturday October 13th, 2018.
There being no further business to consider, the meeting adjourned.

[Signature]

Ahmed D. Faheem, M.D.
Chair of the Executive/Management Committee
CALL TO ORDER

Public Comments

Approval of Minutes

• March 11, 2018

Agenda Items:

• Correspondence Received Regarding the Corporate Practice of Medicine

• Medical Professional Liability Reporting
  o Proposed revisions regarding reporting settlements / judgements to the Board
  o Correspondence Received Requesting Expungement of Report of Settlement
    ▪ Abnash C. Jain, M.D.
    ▪ Brian Powell, M.D.
    ▪ Alison Wilson, M.D.
    ▪ Mahreen Hashmi, M.D.

• Review of Board Policies and/or Procedures and Proposed Updates
  o Collaborative Relationships for Prescriptive Authority with APRNs or Certified Nurse Midwives

• Board of Medicine Guidance Regarding Closing or Departing from Practice

• Board of Medicine Guidance Regarding Termination of the Patient – Physician Relationship

• Fiscal Reports and Purchasing Card Transactions for the Months of March and April 2018

• 2019 Budget
• Office Updates
  o 2018 Renewal
  o 2018 Upcoming Presentations
  o Staffing
  o Strategic Planning

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Executive/Management Committee Minutes
May 6, 2018

A meeting of the West Virginia Board of Medicine Executive/Management Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 6th day of May 2018 at 10:45 am.

The following Committee members were present:
Ahmed Faheem, M.D., D.L.F.A.P.A., Chair
Reverend O. Richard Bowyer
Kishore K. Challa, M.D., F.A.C.C.
Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P.

The following Staff members were present:
Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame

Dr. Faheem called the meeting to order. Reverend Bowyer moved that the minutes of the March 11, 2018 meeting be approved. Dr. Challa seconded, and the motion carried.

Steven Luby, Esquire, of Steptoe & Johnson, PLLC was present for the meeting and signed up to address the Committee. Mr. Luby was provided with a copy of the Procedure for Making Public Comments at Meetings of the Board. Following Mr. Luby’s address to the Committee, members thanked him for his comments.

Mr. Luby left the meeting at this time.

In advance of the meeting, committee members were provided with a copy of correspondence that was received concerning a request to address the prohibition against the
corporate practice of medicine as it applies to physician-owned for-profit hospitals. The requestor asked the Board to extend the current exemption for non-profit hospitals to for-profit hospitals which are entirely physician owned. Reverend Bowyer moved that the Committee enter into executive session for the purpose of obtaining legal advice. Dr. Challa seconded, and the motion carried.

The Executive session concluded, and the Committee re-entered into public session. Dr. Gupta moved that the Committee take no action with regard to the request at this time and authorize staff to research how other states apply the prohibition against the corporate practice of medicine to both for-profit and not-for-profit hospitals. Dr. Challa seconded, and the motion carried. Staff will report back to the Committee at the July 2018 meeting regarding this matter.

At the March 2018 meeting, the Committee authorized Board staff to begin reviewing the Board’s Medical Professional Liability Claim Report Form, and to present proposed modifications to the Committee. Board staff have concluded that no modifications are needed to the report form. Draft Guidelines for Identifying and Reporting Practitioners on a Medical Professional Liability Claim Report were made available to Committee members prior to the meeting. Additionally, Committee members reviewed a draft letter to be sent to practitioners informing them that the Board has been notified that a medical malpractice payment was made on their behalf and allowing them 30 days to contest the validity of the report prior to the report becoming part of the his or her historical record with the Board. Reverend Bowyer moved that the Committee recommend that the Board adopt the Guidelines for Identifying and Reporting Practitioners on a Medical Professional Liability Claim Report and the letter to practitioner’s informing them that a malpractice payment has been made on their behalf. Dr. Gupta seconded, and the motion carried.

At its March 2018 meeting, the Committee reviewed and discussed correspondence that was received which requests expungement of a medical malpractice settlement claim report from a licensee’s record. The Committee directed Board legal staff review the request for expungement, and to provide a recommendation to the Committee at the May meeting. Since the March meeting, the Board has received additional requests for expungement of medical malpractice settlement claim reports. Following discussion, Dr. Gupta moved that the Committee recommend that the Board expunge the medical malpractice settlement claim report for the following licensees:
Abnash C. Jain, M.D.; Brian Powell, M.D.; and Alison Wilson, M.D. Dr. Challa seconded, and the motion carried.

A request was submitted for expungement of a medical malpractice settlement claim report involving Mahreen Hashmi, M.D. Dr. Hashmi was identified by name in the Notice of Claim and complaint and was identified by conduct in the Release. Dr. Gupta moved that the Committee recommend that the Board decline the request for expungement of the medical malpractice settlement claim report regarding Mahreen Hashmi, M.D. Reverend Bowyer seconded, and the motion carried.

Following review of the requests for expungement of medical malpractice settlement claim reports, Dr. Gupta moved that the Committee recommend that the Board delegate authority to staff to act upon expungement requests related to malpractice reporting if it is clearly determined that the licensee was improperly reported to the Board, and that the Executive / Management Committee review all requests that are deemed questionable by staff. Dr. Challa seconded, and the motion carried.

Mr. Spangler reported that the Board’s current policy regarding collaborative relationships for prescriptive authority with advanced practice registered nurses or certified nurse midwives was adopted in 2012. Board staff removed outdated terminology, which referenced certified nurse midwives, throughout the policy. Reverend Bowyer moved that the Committee recommend that the Board adopt the *Policy Statement Regarding Minimum Requirements and Guidelines for Physicians in Collaborative Relationships for Prescriptive Authority with Advanced Practice Registered Nurses; Standard of Practice*. Dr. Gupta seconded, and the motion carried.

Mr. Spangler reported that Board staff frequently receive telephone calls inquiring about closing or departing from a medical practice, terminating the patient-physician relationship, and records retention requirements. Currently, callers are referred to Board of Medicine newsletter articles, which were published in December 2015, that relate to these topics. Staff have requested, and the Committee has approved placing the articles concerning terminating the physician-patient relationship and closing a medical practice in a more prominent position on the Board’s website.
Board staff will seek input from other entities regarding record retention guidelines and will revise the records retention article accordingly for inclusion on the website at a later date.

Prior to today’s meeting, Committee members were provided with a copy of the fiscal report and purchasing card transactions for the months of March and April 2018. Upon review of the expenditures, Reverend Bowyer moved that the purchasing card transactions for the months of March and April 2018 be approved. Dr. Gupta seconded, and the motion carried.

Mr. Spangler reported that the 2018 license renewal for physicians with last names beginning with the letters A-L, controlled substance dispensing practitioners with last names beginning with the letters A-L, and professional limited liability companies (PLLCs) began on May 2, 2018. The Board is utilizing paper renewal applications for controlled substance dispensing practitioner registrations and PLLCs.

Mr. Spangler reported that the following individuals will present at upcoming Board meetings:

Michael Zanolli, M.D. of the Federation of State Medical Board’s will present at the July 2018 meeting.
Ryan Wakim, M.D., President and CEO of GR&W, and Michael Laquinta, President of iSelectMD, will present at the July 2018 meeting.
Dawn Morton-Rias, Ed.D., P.A.-C. of the National Commission on the Certification of Physician Assistants will present at the November 2018 meeting.

Mr. Spangler reported to the Committee that the Complaints Coordinator and the Paralegal for the Board recently resigned. The Board wishes them both well in their future endeavors.

Mr. Spangler reported that the annual Board of Medicine strategic planning session will be held on Saturday October 6, 2018. Further information will be provided as it becomes available.

Dr. Faheem reported that he has appointed the following members to serve on the Nominating Committee:
Reverend O. Richard Bowyer, Chair
Matthew Upton, M.D.
Victoria Mullins, P.A.-C.
There being no further business to consider, the meeting adjourned.

Ahmed D. Faheem, M.D.
Chair of the Executive/Management Committee
Nominating Committee
Meeting Agendas and Minutes
CALL TO ORDER

Public Comments

- Consideration and Development of a Slate of Nominees for the Offices of President and Vice-President for the Election of Officers at the July meeting of the Board.

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Nominating Committee Minutes
June 19, 2018

A meeting of the West Virginia Board of Medicine Nominating Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 19th day of June 2018 at 4:45 pm.

The following Committee member was present:
Victoria Mullins, P.A.-C.

The following Committee members joined the meeting via teleconference:
Reverend O. Richard Bowyer, Chair
Matthew Upton, M.D.

The following Staff members were present:
Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Jamie C. Frame

Reverend Bowyer called the meeting to order, and a review of the candidates who expressed interest in the offices of president and vice-president of the Board was undertaken. Following discussion, Dr. Upton moved that the slate of nominees for the offices of president and vice-president to be presented at the July 9, 2018 meeting of the Board be Kishore Challa, M.D. and Ashish Sheth respectively, and that the change in officers become effective July 10, 2018. Ms. Mullins seconded, and the motion carried.

There being no further business to consider, the meeting adjourned.

Reverend O. Richard Bowyer
Chair of the Nominating Committee
Personnel Committee
Meeting Agendas and Minutes
CALL TO ORDER

Public Comments

Approval of Minutes

• May 7, 2017

Agenda Items:

• Employee Evaluation Review and Recommendation

ADJOURNMENT
Complaint Committee
Meeting Agendas and Minutes
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Public Agenda

July 9, 2017

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

May 7, 2017 Meeting Minutes
May 25, 2017 Special Meeting Minutes

(Motion Required)

I. COUNSEL'S REPORT

CO  Yasar Aksoy, M.D.
17-08-W  Russell Biundo, M.D.
17-09-W  Paul Christian Brown, M.D.
17-12-W  Jodi Michelle Cisco-Goff, M.D.
16-02-W  William Douglas Given, M.D.
17-76-W  Ali Akbar Khan, M.D.
17-77-W  Salvatore LaNasa, M.D.
17-26-W  Munawar Siddiqi, M.S.

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints

B. New Complaints

C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

VI. DISCUSSION AND POSSIBLE ACTION

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE  
Complaint Committee Meeting Minutes  
July 9, 2017

A meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 9th day of July, 2017 beginning at 12:30 p.m.

The following Committee members were present:

Kishore K. Challa, M.D., Chair 
Matthew Upton, M.D.

The following Committee members were absent:

Cheryl Henderson, Esquire 
Rusty L. Cain, D.P.M.

The following Board member was present and sitting on the Committee by designation:

Ashish P. Sheth, M.D.

The following Staff members were present:

Mark A. Spangler, Executive Director 
Jamie S. Alley, Esquire 
Leslie A. Thornton, CMBI 
Patrick A. Muncie 
Felicia A. Bryant 
Rhonda A. Dean

CALL TO ORDER  
Dr. Challa called the meeting to order.

APPROVAL  
OF PUBLIC  
MINUTES  
Dr. Upton made a motion to approve the minutes of May 7, 2017. Dr. Sheth seconded the motion, and the motion carried.

BOARD  
COUNSEL  
REPORT  
Ms. Alley provided an update with respect to the Consent Orders offered by the Committee. Since the May meeting, fully executed Consent Orders have been entered with respect to the following licensees:
**Vasar Aksoy, M.D.** – On May 30, 2017, the Board summarily suspended Dr. Aksoy’s medical license for continuing to prescribe opioid drug products in violation of a temporary restraining order issued by a circuit court. The Board determined this conduct to be an immediate danger to the public. On June 9, 2017, the licensee entered into a Consent Order with the Board which effectuated the permanent voluntary surrender of his West Virginia medical license in lieu of proceeding to a public hearing.

**Russell Biundo, M.D.** – On June 27, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $800.00 for not reporting a medical professional liability settlement on his 2016 license renewal application.

**Paul Christian Bown, M.D.** - On June 9, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $800.00 for not reporting a medical professional liability settlement on his 2016 license renewal application.

**Jodi Michelle Cisco-Goff, M.D.** – On June 7, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $800.00 for not reporting a medical professional liability settlement on her 2016 license renewal application.

**William Douglas Given, M.D.** – On June 27, 2017, the licensee entered into a Consent Order with the Board which imposed terms and conditions on his medical license that require him to have a controlled substance agreement with his patients that he regularly prescribes controlled substances to, and to monitor the patients with drug screenings and random pill counts. Dr. Given must also complete a Medical Record Keeping Course and, for the next 3 years, provide on-site access for chart review.

**Ali Akbar Khan, M.D.** – On June 7, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500.00 for failing to produce documentation in response to a CME audit demonstrating his successful completion of a Board approved course on drug diversion training and best practicing of controlled substance during the requisite time frame.

**Salvatore LaNasa, M.D.** – On June 6, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500.00 for failing to produce documentation in response to a CME audit demonstrating his successful completion of a Board approved course on drug diversion training and best practicing of controlled substance during the requisite time frame.

**Munawar Siddiqi, M.D.** – On June 9, 2017, the licensee entered into a Consent Order with the Board which imposed reciprocal discipline based upon action taken against his license in Kentucky. Dr. Siddiqi’s West Virginia license shall remain in inactive status until he possesses an unrestricted medical license in Kentucky.

**EXECUTIVE SESSION**

Dr. Upton made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Sheth. The
motion carried, and the Complaint Committee entered into Executive Session to consider disciplinary matters pursuant to West Virginia Code §30-3-6.

PUBLIC SESSION
The Executive Session concluded and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS

Upon return to public session, Dr. Upton moved that the Committee take the following actions:

CLOSURES

17-88-P Ziad Abed Al-Karim Al-Qudah, M.D.
17-94-A John David Angotti, M.D.
16-148-W Ajay Anand, M.D.
17-97-S Christopher Oliver Branan, M.D.
17-29-C Carroll David Christiansen, M.D.
17-103-W John Edwin Cornell, M.D.
17-84-W Pramoda Kumari Devabakhtuni, M.D.
17-105-W Joseph Hugo Duvert, M.D.
17-48-N Michael Lee Ferrebee, M.D.
16-150-W John Dae Harrah, Jr., M.D.
16-130-W Mohammad Khalid Hasan, M.D.
16-131-W Omar Khalid Hasan, M.D.
17-37-P David Elwood Hess, M.D.
16-51-A Hassan Arshad Jafary, M.D.
17-40-P Hassan Arshad Jafary, M.D.
16-52-A Hassan Asghar Jafary, M.D.
17-51-M Teodoro Dimaano Jimenez, M.D.
16-146-W Joseph Anthony Jurand, M.D.
17-45-O Anthony Adolphus McFarlane, M.D.
17-118-W Dennis Raymond Meurer, M.D.
17-91-S Susan Wolf Miller, M.D.
17-46-M Ahmet Husamettin Ozturk, M.D.
17-38-P Justine Abigail Pagenhardt, M.D.
17-90-T Ashok Kumar Pantaik, M.D.
17-86-P Maurice Clement Rhodes, M.D.
17-80-W Brian Keith Richardson, M.D.
17-42-H Robert Edward Shapiro, M.D.
17-93-F Michael Shramowiat, M.D.
17-50-L Vincent Kumar Sood, M.D.
17-87-P Bill Dean Underwood, M.D.
17-114-W Patricia Dawn Webster, P.A.-C
INITIATED COMPLAINTS

17-135-W
17-136-W
17-137-W
17-138-W
17-139-W
17-140-W
17-141-W

WITHDRAWAL OF PREVIOUS INITIATED COMPLAINTS

17-52-W
17-55-W
17-119-W

Dr. Sheth seconded the motion, and the motion carried.

Thereafter, Dr. Upton moved that the Committee make the following finding:

FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF
DISQUALIFICATION UNDER WV CODE §30-3-14

17-101-W       Stephen Scott Brown, M.D.

Dr. Sheth seconded the motion, and the motion carried.

ADJOURNMENT     There being no further business, the Complaint Committee determined by
consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Special Meeting

Public Agenda

August 3, 2017

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

I. COUNSEL’S REPORT

II. INTERVIEWS

III. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints
B. New Complaints
C. Other Ongoing Matters

IV. POSSIBLE COMPLAINTS TO INITIATE

V. CONSENT ORDER AND DISCIPLINARY ACTIVITY

VI. COMPLAINT COMMITTEE ACTIONS AND RECOMMENDATIONS

ADJOURNMENT
A special meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 3rd day of August 2017, at 4:30 p.m.

The following Committee members were present and participated via telephone:

Kishore K. Challa, M.D., Chair
Cheryl Henderson, J.D.
Matthew Upton, M.D.
Rusty L. Cain, D.P.M.

The following Staff members were present:

Mark A. Spangler, Director
Jamie S. Alley, Esquire
Leslie A. Thornton, CMBI
Rhonda A. Dean

CALL TO ORDER

Dr. Challa called the meeting to order.

EXECUTIVE SESSION

Ms. Henderson made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) to discuss effecting a license as well as related information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Cain. The motion carried, and the Complaint Committee entered into Executive Session to consider matters pursuant to West Virginia Code §30-3-6 and W. Va. Code § 6-9A-4(b)(4) and (6).

PUBLIC SESSION

The Executive Session concluded and the Complaint Committee returned to Public Session.
COMPLAINT COMMITTEE

Upon return to public session, Ms. Henderson moved that the Committee take the following Actions:

INITIATED COMPLAINT

17-145-W
17-146-W
17-147-W

Dr. Upton seconded the motion, and the motion carried.

ADJOURNMENT

There being no further business, the Complaint Committee determined by consensus to adjourn.

Keshore K. Challa, M.D.,
Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Public Agenda

September 10, 2017

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

July 9, 2017 Meeting Minutes
August 3, 2017 Special Meeting Minutes

(Motion Required)

I. COUNSEL’S REPORT

16-89-W Jamie L. Hall-Jasper, D.P.M.
16-34-W James E. Prommersberger, D.P.M.
17-122-W Marc J. Spelar, M.D.

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints
B. New Complaints
C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

VI. DISCUSSION AND POSSIBLE ACTION

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Complaint Committee Meeting Minutes
September 10, 2017

A meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 10th day of September, 2017 beginning at 12:30 p.m.

The following Committee members were present:

Kishore K. Challa, M.D., Chair
Cheryl Henderson, Esquire
Rusty L. Cain, D.P.M.

The following Committee member was absent:

Matthew Upton, M.D.

The following Staff members were present:

Mark A. Spangler, Executive Director
Jamie S. Alley, Esquire
Greg Foster, Esquire
Leslie A. Thornton, CMBI
Patrick A. Muncie
Felicia A. Bryant
Rhonda A. Dean

CALL TO ORDER
Dr. Challa called the meeting to order.

APPROVAL OF PUBLIC MINUTES
Dr. Cain made a motion to approve the minutes of the July 9, 2017 and August 3, 2017 meetings. Ms. Henderson seconded the motion, and the motion carried.

BOARD COUNSEL REPORT
Ms. Alley provided an update with respect to the Consent Orders offered by the Committee. Since the July meeting, fully executed Consent Orders have been entered with respect to the following licensees:

1. Jamie Hall-Jasper, D.P.M. – On July 10, 2017, and the Board voluntarily entered into a Consent Order that imposes a public reprimand and places Dr. Hall-Jasper’s license in probationary status
for three years. During her period of probation, Dr. Hall-Jasper is subject to specific controlled substance prescribing restrictions and limitations. Additionally, she must maintain a controlled substance prescription log, she is subject to prescription and medical record monitoring by the Board, and she must complete continuing education as identified in her Consent Order.

2. **James Prommersberger, D.P.M.** – On July 10, 2017, Dr. Prommersberger entered into a Consent Order that imposed a three year stayed suspension and a three year period of probation on his West Virginia pediatric license. During his period of probation, Dr. Prommersberger may not treat chronic pain with opioid medications and is further subject to specific controlled substance prescribing restrictions and limitations. Additionally, he must maintain a controlled substance prescription log, he is subject to prescription and medical record monitoring by the Board, and he must complete continuing education as identified in his Consent Order.

3. **Marc Spelar, M.D.** – On August 30, 2017, the licensee entered into a Consent Order with the Board that temporarily prohibits Dr. Spelar from practicing medicine in West Virginia during the pendency of a current Board investigation. Dr. Spelar is prohibited from engaging in any form of clinical medicine, including all patient care/and or treatment of any kind. Dr. Spelar is strictly prohibited from administering, ordering dispensing, or prescribing any and all medications.

**EXECUTIVE SESSION**

Ms. Henderson made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Cain. The motion carried, and the Complaint Committee entered into Executive Session to consider disciplinary matters pursuant to West Virginia Code §30-3-6.

**PUBLIC SESSION**

The Executive Session concluded and the Complaint Committee returned to Public Session.
COMPLAINT COMMITTEE

ACTIONS

Upon return to public session, Dr. Cain moved that the Committee take the following actions:

CLOSURES

<table>
<thead>
<tr>
<th>Code</th>
<th>Name</th>
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<tbody>
<tr>
<td>17-130-A</td>
<td>Magdi Ahmed Salah El Din Abbas, M.D.</td>
</tr>
<tr>
<td>17-127-J</td>
<td>Shelly Rene Bailey, M.D.</td>
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<tr>
<td>17-96-P</td>
<td>Charles David Burtner, M.D.</td>
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<td>17-13-W</td>
<td>John Michael Coleman, M.D.</td>
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<td>16-62-W</td>
<td>Prafull Kanaiyalal Dave, M.D.</td>
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<td>17-64-W</td>
<td>John Thomas Dorsey, III, M.D.</td>
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<tr>
<td>17-65-W</td>
<td>Thomas Alan Durnell, M.D.</td>
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<tr>
<td>17-99-J</td>
<td>Warren Lee Grace, III, M.D.</td>
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<tr>
<td>17-132-B</td>
<td>Gina Jereza-Harris, M.D.</td>
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<tr>
<td>17-128-J</td>
<td>James Christian Jensen, M.D.</td>
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<tr>
<td>17-136-W</td>
<td>Jonathan Michael Johnson, M.D.</td>
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<td>17-111-W</td>
<td>Mohamad Samah Kalou, M.D.</td>
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<td>17-133-P</td>
<td>Robby Lee Keith, M.D.</td>
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<td>17-119-L</td>
<td>Barrett Asher Louden, M.D.</td>
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<td>17-134-C</td>
<td>Charles Lye, M.D.</td>
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<td>17-98-U</td>
<td>Earl Lynn Nelson, M.D.</td>
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<td>16-153-W</td>
<td>Michael Vincent O'Keefe, M.D.</td>
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<td>17-125-N</td>
<td>Govindbahai Mafatlal Patel, M.D.</td>
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<tr>
<td>17-113-W</td>
<td>Avinash Govind Ram Purohit, M.D.</td>
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<td>17-121-J</td>
<td>Ammar Akram Shammaa, M.D.</td>
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<td>17-126-J</td>
<td>Anthony Frank Sibley, M.D.</td>
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<td>17-129-H</td>
<td>Heather Michelle Skeens, M.D.</td>
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<td>17-28-W</td>
<td>Sue Ann Westfall, M.D.</td>
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<tr>
<td>16-160-W</td>
<td>Robert Cheng Yee, M.D.</td>
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</tbody>
</table>
INITIATED COMPLAINTS

17-164-W
17-165-W
17-166-W
17-167-W
17-168-W

WITHDRAWAL OF PREVIOUS INITIATED COMPLAINT

17-137-W

Ms. Henderson seconded the motion, and the motion carried.

Thereafter, Dr. Cain moved that the Committee make the following finding:

FINDING OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14

17-147-W Paul Webber Burke, Jr., M.D.

Ms. Henderson seconded the motion, and the motion carried.

The Committee discussed developing a policy regarding the review of complaints filed against Board members. Dr. Cain moved that to avoid any appearance of impropriety, all complaints against sitting Board members be sent out for independent review as a matter of Complaint Committee policy. Ms. Henderson seconded the motion, and the motion carried.

ADJOURNMENT There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Special Meeting

Public Agenda

September 28, 2017

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

I. COUNSEL’S REPORT

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints

B. New Complaints

C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Complaint Committee
Special Meeting Minutes
September 28, 2017

A special meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 28th day of September 2017, at 4:30 p.m.

The following Committee members were present and participated via teleconference:

Kishore K. Challa, M.D., Chair
Cheryl Henderson, J.D.
Matthew Upton, M.D.
Rusty L. Cain, D.P.M.

The following Staff members were present:

Mark A. Spangler, Director
Jamie S. Alley, Esquire
Leslie A. Thornton, CMBl
Rhonda A. Dean

The following legal counsel from the West Virginia Attorney General’s Office was present:

Katherine A. Campbell, Assistant Attorney General

CALL TO ORDER

Dr. Challa called the meeting to order.

EXECUTIVE SESSION

Dr. Cain made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) to discuss effecting a license as well as related information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Ms. Henderson. The motion carried, and the Complaint Committee entered into Executive Session to consider matters pursuant to West Virginia Code §30-3-6 and W. Va. Code § 6-9A-4(b)(4) and (6).
PUBLIC SESSION

The Executive Session concluded and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS

Upon return to public session, Ms. Henderson moved that the Committee take the following Action:

INITIATED COMPLAINT

17-171-W

Dr. Cain seconded the motion, and the motion carried.

ADJOURNMENT

There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

September 10, 2017 Meeting Minutes
September 28, 2017 Special Meeting Minutes

(Motion Required)

I. COUNSEL'S REPORT

17-53-W  Riad S. Al-Asbah, M.D.
17-56-W  Ron Bonfiglio, M.D.
17-57-W  Frederick Brautigan, M.D.
17-147-W  Paul Webber Burke, Jr., M.D.
17-59-W  Garry Wayne Burkholder, M.D.
17-60-W  James Butterworth, M.D.
17-102-W  Robert A. Caveny, M.D.
17-62-W  Anup Kumar Das, M.D.
17-104-W  Russell Andrew DeGroote, M.D.
17-63-W  Antonio Domoaal, M.D.
17-67-W  Johnny Dy, M.D.
17-68-W  Cheryl Pixley Entress, M.D.
17-106-W  Miechia Esco, M.D.
17-69-W  Stephen Flax, M.D.
17-70-W  Kelby Frame, M.D.
17-108-W  Rochelle Goldberg, M.D.
17-71-W  Ryan Christopher Hall, M.D.
17-72-W  Douglas Grover Harrison, M.D.
17-74-W  Bethany Morris Honce, M.D.
17-109-W  Manish Jhawar, M.D.
17-112-W  Sophie Lanciers, M.D.
17-78-W  Lap-Yang Joseph Li, M.D.
17-140-W  Anita Petite, P.A.-C.
II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY
   A. Returning Complaints
   B. New Complaints
   C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

VI. DISCUSSION AND POSSIBLE ACTION

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 12th day of November, 2017 beginning at 12:30 p.m.

The following Committee members were present:

- Kishore K. Challa, M.D., F.A.C.C., Chair
- Matthew Upton, M.D.
- Ashish P. Sheth, M.D.
- Reverend O. Richard Bowyer

The following Staff members were present:

- Mark A. Spangler, Executive Director
- Jamie S. Alley, Esquire
- Greg Foster, Esquire
- Leslie A. Thornton, CMBI
- Patrick A. Muncie
- Felicia A. Bryant
- Rhonda A. Dean

**CALL TO ORDER**  Dr. Challa called the meeting to order. Dr. Challa welcomed Dr. Sheth and Reverend Bowyer to the Committee.

**ORDER**

**APPROVAL OF PUBLIC MINUTES**  Dr. Upton made a motion to approve the minutes of the September 10, 2017 meeting. Dr. Sheth seconded the motion, and the motion carried.

Reverend Bowyer made a motion to approve the minutes of the September 28, 2017 special meeting. Dr. Sheth seconded the motion, and the motion carried.

**BOARD COUNSEL REPORT**  Ms. Alley provided an update with respect to the Consent Orders offered by the Committee. Since the September meeting, fully executed Consent Orders have been entered with respect to the following licensees:
1. **Riad S. Al-Asbah, M.D.** - On September 11, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $1,850.00 and was required to complete 18.5 hours of CME to satisfy his CME deficiency.

2. **Ron Bonfiglio, M.D.** - On October 5, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

3. **Frederick Brautigan, M.D.** - On September 11, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

4. **Paul Webber Burke Jr., M.D.** - On October 5, 2017, the licensee entered into a Consent Order with the Board for non-compliance with the West Virginia Medical Professional Health Program. Dr. Burke’s medical license shall remain on probationary status and subject to his Amended Consent Order dated April 16, 2014, which shall remain in full force and effect until his medical license is surrendered to the Board on December 31, 2017.

5. **Garry Wayne Burkholder, M.D.** - On September 11, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

6. **James Butterworth, M.D.** - On September 8, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

7. **Robert A. Caveny, M.D.** - On September 25, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.
8. **Anup Kumar Das, M.D.-** On October 5, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

9. **Russell Andrew DeGroote, M.D.-** On September 11, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

10. **Antonio Domaoal, M.D.-** On September 25, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

11. **Johnny Dy, M.D.-** On September 25, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

12. **Cheryl Pixley Entress, M.D.-** On September 28, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

13. **Miechia Esco, M.D.-** On October 7, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

14. **Scott Walker Findley, M.D.-** On November 1, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.
15. **Stephen Flax, M.D.** - On October 5, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

16. **Kelby Frame, M.D.** - On September 28, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

17. **Rochelle Goldberg, M.D.** - On September 28, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

18. **Ryan Christopher Hall, M.D.** - On September 25, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

19. **Douglas Grover Harrison, M.D.** - On September 28, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

20. **Bethany Morris Honce, M.D.** - On September 25, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

21. **Manish Jhawar, M.D.** - On October 24, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $3,800 and was required to complete 38 hours of CME to satisfy his CME deficiency.
22. Sophie Lanciers, M.D.- On October 7, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

23. Lap-Yang Joseph Li, M.D.- On September 25, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

24. Anita Petite, P.A.-C.- On October 24, 2017, the licensee entered into a Consent Order with the Board which Publicly Reprimanded the licensee for knowingly misrepresenting her prescribing status on her 2017 renewal application.

EXECUTIVE SESSION

Dr. Upton made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Sheth. The motion carried, and the Complaint Committee entered into Executive Session to consider disciplinary matters pursuant to West Virginia Code §30-3-6.

PUBLIC SESSION

The Executive Session concluded and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS

Upon return to public session, Reverend Bowyer moved that the Committee take the following actions:

CLOSURES
17-58-W   Ellen Renee Brown, M.D.
17-61-W   Juliet Anne Cha, M.D.
16-129-W   Adam Joseph Corcovilos, M.D.
17-116-W   Touraj Farid, M.D.
17-143-W   Warren Lee Grace, III, M.D.
17-120-W   Bruce Fredric Haupt, M.D.
17-73-W   Suzanne Holroyd, M.D.
17-89-C   Suzanne Holroyd, M.D.
17-152-B   Yaser Homsi, M.D.
17-153-C   Thomas Martin Jung, M.D.
17-139-W   Kathryn A. Knodel, M.D.
17-150-M   Charles Lye, M.D.
17-151-M   Sandra K. May, P.A.-C
17-131-S   Prasadarao B. Mukkamala, M.D.
           (Abstention due to declared conflict: Dr. Challa)
17-162-M   Rahmet Muzaffer, M.D.
17-85-W   Alexander Arpad Nagy, M.D.
17-154-O   Kelly Raphael Nelson, M.D.
17-124-C   Gerard Joseph Oakley, M.D.
17-167-W   Ramanathan Padmanaban, M.D.
           (Abstention due to declared conflict: Dr. Challa)
17-81-W   Ajai K. Sandhir, M.D.
17-82-W   Ujjal Singh Sandhu, M.D.
           (Abstention due to declared conflict: Dr. Challa)
17-95-J   Robert Dale Santrock, M.D.
17-148-D   Letitia Elaine Tierney, M.D.
17-142-Y   Robert Brian Wade, M.D.
17-144-M   Rajwardhan Harishcandra Yadav, M.D.

INITIATED COMPLAINTS

17-180-W
17-181-W
17-182-W
17-183-W
17-184-W
17-185-W
17-186-W
17-187-W
17-188-W
17-189-W
17-190-W
17-191-W
17-192-W
17-193-W
Dr. Sheth seconded the motion, and the motion carried.

Thereafter, Dr. Upton moved that the Committee make the following finding:

**FINDING OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14**

17-122-W      Marc Jonathan Spelar M.D.

Reverend Bowyer seconded the motion, and the motion carried.

**ADJOURNMENT**  There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Special Meeting

Public Agenda

November 30, 2017

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

I. COUNSEL’S REPORT

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY

   A. Returning Complaints
   B. New Complaints
   C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Complaint Committee
Special Meeting Minutes
November 30, 2017

A special meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 30th day of November 2017, at 4:30 p.m.

The following Committee members were present and participated via teleconference:

Kishore K. Challa, M.D., F.A.C.C., Chair
Ashish P. Sheth, M.D.
Reverend O. Richard Bowyer

The following Committee member was absent:

Matthew Upton, M.D.

The following Staff members were present:

Mark A. Spangler, Director
Jamie S. Alley, Esquire
Leslie A. Thornton, CMBI
Rhonda A. Dean

CALL TO ORDER

Dr. Challa called the meeting to order.

EXECUTIVE SESSION

Reverend Bowyer made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) to discuss effecting a license as well as related information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Sheth. The motion carried, and the Complaint Committee entered into Executive Session to consider matters pursuant to West Virginia Code §30-3-6 and W. Va. Code § 6-9A-4(b)(4) and (6).
The Executive Session concluded and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS

Upon return to public session, Reverend Bowyer moved that the Committee take the following Action:

INITIATED COMPLAINT

17-197-W

Dr. Sheth seconded the motion, and the motion carried.

ADJOURNMENT

There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

November 12, 2017 Meeting Minutes
November 30, 2017 Special Meeting Minutes

(Motion Required)

I. COUNSEL’S REPORT
   17-75-W  Charles Paul Honsinger, III, M.D.

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY
   A. Returning Complaints
   B. New Complaints
   C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

VI. DISCUSSION AND POSSIBLE ACTION

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Complaint Committee Meeting Minutes
January 7, 2018

A meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 7th day of January, 2018 beginning at 12:30 p.m.

The following Committee members were present:

Matthew Upton, M.D.
Ashish P. Sheth, M.D.
Reverend O. Richard Bowyer
Ahmed Dauer Faheem, M.D., D.L.F.A.P.A. (sitting by designation for consideration of four matters currently before the Committee)

The following Committee member was absent:

Kishore K. Challa, M.D., F.A.C.C., Chair

The following Staff members were present:

Mark A. Spangler, Executive Director
Jamie S. Alley, Esquire
Greg Foster, Esquire
Leslie A. Thornton, CMBI
Patrick A. Muncie
Felicia A. Bryant
Rhonda A. Dean

CALL TO ORDER
Dr. Upon, presiding as Acting Chair by designation, called the meeting to order.

APPROVAL OF MINUTES
Reverend Bowyer made a motion to approve the minutes of the November 12, 2017 meeting. Dr. Sheth seconded the motion, and the motion carried.

Dr. Sheth made a motion to approve the minutes of the November 30, 2017 special meeting. Reverend Bowyer seconded the motion, and the motion carried.

BOARD COUNSEL REPORT
Mr. Foster provided an update with respect to the Consent Orders offered by the Committee. Since the November meeting, fully executed Consent Orders have been
entered with respect to the following licensees:

1. **Charles Paul Honsinger, III, M.D.** – On November 13, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

2. **Rodhan Abass Khthir, M.D.** – On January 2, 2018, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

3. **Paul Basil Papadimitriou, M.D.** – On January 2, 2018, the licensee entered into a Consent Order with the Board which publicly reprimanded the licensee for improper treatment of a patient and placed licensee on probation for one year with specific terms and conditions, including successful completion of training and education and maintaining proper prescribing records when regularly prescribing controlled substances to a patient.

**EXECUTIVE SESSION**

Dr. Bowyer moved that the public session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy at which time. A second was given by Dr. Sheth. The motion carried, and the Complaint Committee entered into Executive Session to consider disciplinary matters pursuant to West Virginia Code §30-3-6. Prior to commencing in executive session, Dr. Faheem left the meeting room, as he was not scheduled to participate in the matters appearing first on the agenda.

**PUBLIC SESSION**

The Committee re-entered public session. Dr. Upton declared a conflict in three pending Complaint Committee matters. Dr. Upton identified the matters as three confidential reports pending
before the Committee for the possible initiation of committee complaints and investigations. Having declared conflicts, Dr. Upton exited the meeting room at this time. Dr. Faheem rejoined the meeting, and a quorum was present for the consideration of the three matters for which Dr. Upton declared a conflict.

EXECUTIVE
SESSION Dr. Sheth moved that the public session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. Dr. Faheem seconded the motion, and the motion carried. The Committee entered into Executive Session at this time.

PUBLIC
SESSION The Committee re-entered public session. Dr. Sheth moved that the Committee initiate Complaint No. 18-02-W, with full investigatory authority delegated to staff. Dr. Faheem seconded the motion, and the motion carried. Reverend Bowyer moved that the Committee concluded that it lacks jurisdiction to proceed upon the report submitted by M.H. Dr. Sheth seconded the motion, and the motion carried. The Committee took no other action at this time. Having dispatched the matters for which Dr. Upon had declared a conflict, Dr. Upton returned to the meeting room at this time.

Reverend Bowyer declared conflict with respect to pending matter 17-164-W, and left the meeting room at this time.

EXECUTIVE
SESSION Dr. Sheth moved that the public session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters related to pending matter 17-164-W, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. Dr. Faheem seconded the motion, and the motion carried.

PUBLIC
SESSION The Committee re-entered public session. Dr. Faheem moved that the Committee close its investigation into Complaint No. 17-164-W and determine that there is a lack of probable cause to substantiate the initiation of disciplinary charges upon this complaint. Dr. Sheth seconded the motion,
and the motion carried. Reverend Bowyer returned to the meeting room at this time. The Committee having taken up those matter for which Dr. Faheem was sitting by appointment to form a quorum, Dr. Faheem left the meeting, and was absent for the remainder of the meeting.

EXECUTIVE SESSION
Reverend Bowyer moved that the public session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. Dr. Sheth seconded the motion, and the motion carried. The Committee entered into Executive Session at this time.

PUBLIC SESSION/
ADDITIONAL COMPLAINT
COMMITTEE ACTIONS

The Committee re-entered public session. Reverend Bowyer moved that the Committee take the following actions:

CLOSURES

17-170-P  David Mark Anderson, M.D.
17-146-W  Deborah Lynn Chadwick, M.D.
17-179-V  David Wellington Cook, M.D.
17-165-W  Thomas Alan Durnell, M.D.
17-149-H  Michael L. Harris, M.D.
16-151-W  Mohammad Khalid Hasan, M.D.
17-18-W   Mohammad Khalid Hasan, M.D.
17-166-W  Nolan Mark Hill, M.D.
17-117-W  James Michael Holehouse, M.D.
17-169-F  Antonio Santiago Garcia Merino, M.D.
17-155-F  Georgianna Maynell Richards, M.D.
INITIATED COMPLAINTS WITH INVESTIGATORY
AUTHORITY DELEGATED TO STAFF

18-03-W
18-04-W
18-05-W
18-06-W
18-07-W
18-08-W
18-09-W
18-10-W
18-11-W
18-12-W
18-13-W
18-14-W
18-15-W
18-16-W
18-17-W
18-18-W
18-19-W
18-20-W
18-21-W
18-22-W

Reverend Bowyer further moved that the Committee seek authorization from the
Board to offer Consent Orders and/or Amended Consent Orders in four matters.

Dr. Sheth seconded the motion, and the motion carried.

ADJOURNMENT There being no further business, the Complaint Committee determined by
consensus to adjourn.

Matthew Upton, M.D.
Acting Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Public Agenda

March 11, 2018

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

January 7, 2018 Meeting Minutes
(Motion Required)

I. COUNSEL’S REPORT
   17-66-W George Michael Dwyer, M.D.

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY
   A. Returning Complaints
   B. New Complaints
   C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 11th day of March 2018 beginning at 12:30 p.m.

The following Committee members were present:

Kishore K. Challa, M.D., F.A.C.C., Chair
Ashish P. Sheth, M.D.
Reverend O. Richard Bowyer

The following Committee member was absent:

Matthew Upton, M.D.

The following Board member was present and sitting on the Committee by designation:

Wes Steele, M.D.

The following Staff members were present:

Mark A. Spangler, Executive Director
Greg Foster, Esquire
Leslie A. Thornton, CMBI
Patrick A. Muncie
Felicia A. Bryant
Rhonda A. Dean

The following Staff member was absent:

Jamie S. Alley, Esquire

CALL TO ORDER

Dr. Challa called the meeting to order.

APPROVAL OF PUBLIC MINUTES

Reverend Bowyer made a motion to approve the minutes of the January 7, 2018 meeting. Dr. Sheth seconded the motion, and the motion carried.

BOARD COUNSEL REPORT

Mr. Foster provided an update with respect to the Consent Orders offered by the
Committee. Since the January meeting, fully executed Consent Orders have been entered with respect to the following licensees:

1. George Michael Dwyer, M.D. - On January 8, 2018 the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation for successfully completing the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

2. Joy Jeannine Juskowich, M.D. - On March 5, 2018, the licensee entered in a Consent Order with the Board which imposed that her medical license remain in an inactive status until she fully complies with all required treatment programs and practice recommendation under her WVMPHP agreement.

EXECUTIVE SESSION
Reverend Bowyer made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Sheth. The motion carried, and the Complaint Committee entered into Executive Session to consider disciplinary matters pursuant to West Virginia Code §30-3-6.

PUBLIC SESSION
The Executive Session concluded and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS
Upon return to public session, Reverend Bowyer moved that the Committee take the following actions:

CLOSURES

17-141-W Charlotte Martha Akor, M.D.
17-196-M Ziad Abed Al-Kareim Al-Qudah, M.D.
18-20-W Ellen Renee Brown, M.D.
17-92-J Daniel Scott Frame, M.D.
17-183-W Rachel S. Gilman, M.D.
17-173-H Dawn Reed Jones, M.D.
17-202-N Donald Gerould Klinestiver, M.D.
17-194-F Jeffry Shobe Life, M.D.
17-199-T Charles Lyc, M.D.
17-161-B Sandra K. May, P.A.-C
17-174-W Kathryn S. Moffett, M.D.
17-177-H Rafael Evencio Molina, M.D.
18-10-W Darren Blaine Nease, M.D.
18-12-W John Eugene Parker, M.D.
17-184-W Victor Thomas Perrone, M.D.
17-175-W Mitchell Nicholas Rashid, M.D.
17-185-W Salah Philip Razzook, M.D.
17-186-W Patrick Gerard Rosario, M.D.
17-190-W Hassan Nicholas Shamma, M.D.
17-200-M Robert Lee Wheeler, M.D.
18-18-W Alison Marie Wilson, M.D.
18-19-W Jessica Rose Galang Ybanez-Morano, M.D.

INITIATED COMPLAINTS

18-41-W
18-42-W
18-43-W
18-44-W
18-45-W
18-46-W
18-47-W
18-48-W
18-49-W
18-50-W
18-51-W
18-52-W
18-53-W
18-54-W
18-55-W
18-56-W
18-57-W
18-58-W
18-59-W
18-60-W
18-61-W
WITHDRAWAL OF PREVIOUS INITIATED COMPLAINTS

18-06-W
18-11-W
18-13-W
18-15-W

Dr. Sheth seconded the motion, and the motion carried.

Thereafter, Reverend Bowyer moved that the Committee make the following finding:

FINDING OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14

17-123-W Sarah Brooke Cash, M.D.

Dr. Sheth seconded the motion, and the motion carried.

ADJOURNMENT There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
WEST VIRGINIA BOARD OF MEDICINE

Complaint Committee Special Meeting

Public Agenda

April 27, 2018

CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

I. COUNSEL’S REPORT

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY

A. Returning Complaints

B. New Complaints

C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

ADJOURNMENT
A special meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 30th day of April 27, 2018, at 12:00 p.m.

The following Committee members were present and participated via teleconference:

Kishore K. Challa, M.D., F.A.C.C., Chair
Ashish P. Sheth, M.D.
Reverend O. Richard Bowyer
Matthew Upton, M.D.
Wes Steele, M.D.

The following Staff members were present:

Mark A. Spangler, Executive Director
Jamie S. Alley, Esquire
Greg S. Foster, Esquire
Leslie A. Thornton, CMBl
Patrick A. Muncie, Investigator

CALL TO ORDER

Dr. Challa called the meeting to order.

EXECUTIVE SESSION

Dr. Steele made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) to discuss effecting a license as well as related information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Upton. The motion carried, and the Complaint Committee entered into Executive Session to consider matters pursuant to West Virginia Code §30-3-6 and W. Va. Code § 6-9A-4(b)(4) and (6).
PUBLIC SESSION

The Executive Session concluded and the Complaint Committee returned to Public Session.

ADJOURNMENT

There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
CALL TO ORDER

COMPLAINT COMMITTEE APPROVAL

March 11, 2018 Meeting Minutes

(Motion Required)

I. COUNSEL’S REPORT, M.D.
   17-24-W Stephen J. Mallott, M.D.
   17-115-W Isabelita T. de Mesa, M.D.
   17-171-W Alberto A. Fernandez, M.D.
   18-02-W Joseph H. Matusic, M.D.
   18-09-W Scott A. Naegele, M.D.
   18-17-W Michael Roy Spindel, M.D.

II. CONSENT ORDER AND DISCIPLINARY ACTIVITY

III. INTERVIEWS

IV. COMPLAINT COMMITTEE ACTIVITY
   A. Returning Complaints
   B. New Complaints
   C. Other Ongoing Matters

V. POSSIBLE COMPLAINTS TO INITIATE

VI. POSSIBLE ACTION AND DISCUSSION

ADJOURNMENT
A meeting of the West Virginia Board of Medicine Complaint Committee was held at 101 Dee Drive, Charleston, West Virginia, on the 6th day of May 2018 beginning at 12:30 p.m.

The following Committee members were present:

Kishore K. Challa, M.D., F.A.C.C., Chair  
Ashish P. Sheth, M.D.  
Reverend O. Richard Bowyer  
Matthew Upton, M.D.  
Wes Steele, M.D.

The following Staff members were present:

Mark A. Spangler, Executive Director  
Jamie S. Alley, Esquire  
Greg Foster, Esquire  
Leslie A. Thornton, CMBI  
Patrick A. Muncie

CALL TO ORDER

Dr. Challa called the meeting to order.

APPROVAL OF PUBLIC MINUTES

Reverend Bowyer made a motion to approve the minutes of the March 11, 2018 Complaint Committee meeting. Dr. Sheth seconded the motion, and the motion carried. Dr. Upton made a motion to approve the minutes of the Committee’s March 11, 2018 and April 27, 2018 meeting. Reverend Bowyer seconded the motion, and the motion carried.

BOARD COUNSEL REPORT

Mr. Foster provided an update with respect to the Consent Orders offered by the Committee. Since the March meeting, fully executed Consent Orders have been entered with respect to the following licensees:
1. **Anna Nicole Antolini, P.A.-C.:** On April 30, 2018 the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $200.00 for an inaccurate response to Professional Practice Question Number Twelve on her renewal application.

2. **Darci Nicole Barger, P.A.-C.:** On April 30, 2018 the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $200.00 for an inaccurate response to Professional Practice Question Number Twelve on her renewal application.

3. **Stephen J. Mallott, M.D.:** On April 18, 2018 the licensee entered into a Consent Order with the Board which imposed a public reprimand for improper treatment of a patient and placed his license in a probationary status for a period of two years with terms, conditions, limitations and restrictions regarding the licensee’s prescribing practices.

4. **Isabelita T. de Mesa, M.D.:** On April 18, 2018 the licensee entered into a Consent Order with the Board which imposed a public reprimand for her dishonorable, unprofessional and unethical behavior with respect to her failure to secure her prescription pads and for illegible medical records. Licensee must successfully enroll and complete Case Western Reserve University’s Intensive CME Course in Medical Documentation: Clinical, Legal and Economic Implications for Healthcare Providers Clinical.

5. **Alberto A. Fernandez, M.D.:** On April 24, 2018 the licensee entered into a Consent Order with the Board which imposed a public reprimand for his dishonorable, unprofessional and unethical conduct and suspended the license. The suspension imposed by the Consent Order shall remain in effect until it is lifted or otherwise modified pursuant to a subsequent Order issued by the Board.

6. **Joseph Henry Matusic, M.D.:** On April 18, 2018 the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $400.00 for an inaccurate response to Professional Practice Question Number Twelve on his renewal application.

7. **Scott Alan Naegele, M.D.:** On April 18, 2018 the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $400.00 for an inaccurate response to Professional Practice Question Number Twelve on his renewal application.
8. Michael Roy Spindel, M.D.: On April 24, 2018 the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $400.00 for an inaccurate response to Professional Practice Question Number Twelve on his renewal application.

EXECUTIVE SESSION
Dr. Upton made a motion that the Public Session be recessed in order to enter into Executive Session pursuant to W. Va. Code § 6-9A-4(b)(4) and (6) and West Virginia Code §30-3-6 to discuss pre-probable cause disciplinary matters, matters effecting a license, and information that, if disclosed, would constitute an unwarranted invasion of privacy. A second was given by Dr. Sheth. The motion carried, and the Complaint Committee entered into Executive Session to consider disciplinary matters pursuant to West Virginia Code §30-3-6.

PUBLIC SESSION
The Executive Session concluded, and the Complaint Committee returned to Public Session.

COMPLAINT COMMITTEE ACTIONS

Dr. Upton having previously declared a conflict in a pending Complaint Committee matter, Complaint No. 18-05-W, and having been absent for all prior discussion regarding this complaint, exited the meeting room. After Dr. Upon left the meeting room, Dr. Sheth moved that Complaint No. 18-05-W against Michael Anthony Covelli, M.D. be closed without further action. Reverend Bowyer seconded the motion, and the motion carried. Thereafter, Dr. Upton returned to the meeting room and was present for the remainder of the meeting.

Reverend Bowyer moved that the Committee take the following additional actions:

CLOSURES

<table>
<thead>
<tr>
<th>Number</th>
<th>Name</th>
<th>M.D.</th>
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<tbody>
<tr>
<td>16-152-W</td>
<td>Hassan Arshad Jafary</td>
<td>M.D.</td>
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<tr>
<td>17-20-W</td>
<td>Hassan Arshad Jafary</td>
<td>M.D.</td>
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<tr>
<td>17-135-W</td>
<td>Shawn Wayne Coffman</td>
<td>M.D.</td>
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<tr>
<td>17-203-S</td>
<td>Bruce Max Rothchild</td>
<td>M.D.</td>
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<td>17-195-S</td>
<td>Shelana Marie Gibbs-McElvy</td>
<td>M.D.</td>
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<td>18-26-M</td>
<td>Coy Alden Flowers</td>
<td>M.D.</td>
</tr>
<tr>
<td>18-31-S</td>
<td>Mohamad Bassam Haffar</td>
<td>M.D.</td>
</tr>
</tbody>
</table>
18-25-P Sandra K. May, P.A.-C.
18-28-M Pushpa Nambi Joseph, M.D.
18-30-B Muhammad Salman, M.D.
18-65-H Russell Irvin Voltin, M.D.

INITIATED COMPLAINTS

18-77-W
18-78-W
18-79-W
18-80-W
18-81-W
18-82-W
18-83-W
18-84-W

WITHDRAWAL OF PREVIOUS INITIATED COMPLAINTS

18-58-W

Dr. Sheth seconded the motion, and the motion carried.

Reverend Bowyer moved that the Committee seek authority from the Board to issue Consent Orders or Amended Consent Orders in four ongoing matters. Dr. Sheth seconded the motion, and the motion carried.

Reverend Bowyer moved that the Committee make the following findings:

FINDING OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14

17-100-W Nathan David Airhart, M.D.
16-107-W Steven Scott Melek, D.P.M.
16-36-W David Carol Shamblin, M.D.
16-154-W David Carol Shamblin, M.D.
Dr. Sheth seconded the motion, and the motion carried.

The Complaint Committee has been investigating Complaint No. 16-107-W, against Steven Scott Melek, D.P.M., podiatric license number 269. This complaint was initiated by the Complaint Committee based upon a report from a physician regarding Dr. Melek’s prescribing of opioid medication to a patient. Reverend Bowyer moved that, based upon all of the information developed by the investigation since the Committee’s March 11, 2018 meeting, that the Committee find that probable cause exists to substantiate charges to disqualify Dr. Melek from the practice of medicine in West Virginia due to apparent violations of:

a. W. Va. Code § 30-3-14(c)(13), related to prescribing a controlled substance other than in good faith and in a therapeutic manner in accordance with accepted medical standards and in the course of the podiatric physician’s professional practice; and/or

b. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.2.a, related to dishonorable unethical or unprofessional conduct including, but not limited to prescribing or dispensing any controlled substance:
   i. With the intent or knowledge that a controlled substance will be used or is likely to be used other than medicinally or for an accepted therapeutic purpose; and/or
   ii. With the intent to evade any law with respect to the sale, use or disposition of the controlled substances; and/or
   iii. For the licensee's personal use, or for the use of his or her immediate family when the licensee knows or has reason to know that an abuse of controlled substance(s) is occurring, or may result from such a practice; and/or
   iv. In such amounts that the licensee knows or has reason to know, under the attendant circumstances, that the amounts prescribed or dispensed are excessive under accepted and prevailing medical practice standards; and/or

c. W. Va. Code § 30-3-14(c)(20) and W. Va. Code R. § 11-1A-12.1.i, related to demonstrating a lack of professional competence to practice medicine or podiatry with a reasonable degree of skill and safety for patients; and/or
d. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.1.x, related to engaging in malpractice or failing to practice medicine with that level of care, skill and treatment which is recognized by a reasonable, prudent, podiatric physician; and/or

e. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.1.e and j, related to engaging in unprofessional conduct of a character likely to deceive, defraud or harm the public or any member thereof; and/or

f. W. Va. Code §30-3-14(c)(19), related to gross negligence in the use and control of prescription forms; and/or

g. W. Va. Code §30-3-14(c)(16) and W. Va. Code R. §11-1A-12.1.aa, related to delegating professional responsibilities to a person whom the licensee knew or had reason to know is not qualified by training, experience or licensure to perform the responsibilities; and/or

h. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.1.o, related to the failure to perform any statutory or legal obligation placed upon a licensed physician or podiatric physician, including but not limited to his obligation pursuant to W. Va. Code § 60A-9-5a and W. Va. Code R. § 11-10-3 to access the West Virginia CSMP in association with his prescribing of controlled substances to treat chronic nonmalignant pain; and/or

i. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.1.bb, related to the violation of any law which relates to the practice of medicine or podiatric medicine and surgery, when the licensee knows or should know that such action is violative of the law; and/or

j. W. Va. Code § 30-3-14(c)(11) and W. Va. Code R. § 11-1A-12.jj, related to the failure to maintain a medical record justifying the course of treatment of a patient; and/or

k. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.1.w, related to self-prescribing controlled substances; and/or

l. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.1.z, related to practicing medicine and surgery beyond the licensee’s scope of practice.

Reverend Boyer further moved that the Complaint Committee conclude that Dr. Melek’s continuation in practice constitutes an immediate danger to the public and recommend that the Board ratify the Committee’s probable cause findings and that the Board further find that the criteria for summary suspension of Dr. Melek’s license have been met. Dr. Steele seconded the motion, and the motion carried.
ADJOURNMENT There being no further business, the Complaint Committee determined by consensus to adjourn.

Kishore K. Challa, M.D.
Chair of the Complaint Committee
Board
Meeting Agendas and Minutes
CALL TO ORDER

Approval of Minutes

- May 8, 2017
- May 25, 2017
- June 6, 2017
- June 19, 2017

Announcements

Committee and Staff Reports, Discussion and Action:

- West Virginia Board of Medicine, Petitioner, v. Omar Khalid Hasan, M.D., Respondent – Request for Stay of Final Order Submitted on Behalf of the Licensee

- Executive/Management Committee
- Legislative Committee
- Board Attorney Report
- Physician Assistant Committee
- Licensure Committee
- Complaint Committee

Presentation by P. Bradley Hall, Executive Director of the WVMPHP

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Board Meeting Minutes
July 10, 2017

A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 10th day of July 2017 at 9:00 a.m.

The following Board members were present for the meeting:

Ahmed D. Faheem, M.D., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
Rahul Gupta, M.D., M.P.H., Secretary
Reverend O. Richard Bowyer
Harry Duncan, M.D.
Beth Hays, M.A.
Cheryl Henderson, J.D.
Carrie Lakin, D.P.M.
David Mullins, M.D.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
Wes Steele, M.D.
Matthew Upton, M.D.
K. Dean Wright, P.A.-C.

The following Board member was absent:

Rusty Cain, D.P.M.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Jamie C. Frame
Leslie A. Thornton, CMBI

Dr. Faheem called the meeting to order and announced that following the May 2017 Board meeting, members were contacted regarding their preference regarding the date to hold a strategic planning meeting this fall. The majority of members indicated that
Saturday, October 7, 2017, was their preference; therefore, the meeting will be scheduled for this date. Further information regarding the meeting will be provided as it becomes available. Dr. Mullins moved that the minutes of the May 8, 2017 meeting be approved. Ms. Henderson seconded, and the motion carried. Dr. Duncan moved that the May 25, 2017 meeting minutes be approved. Reverend Bowyer seconded, and the motion carried. Ms. Hays moved that the minutes of the June 6, 2017 meeting be approved. Dr. Rahim seconded, and the motion carried. Dr. Rahim moved that the June 19, 2017 meeting minutes be approved. Ms. Hays seconded, and the motion carried.

With regard to the next agenda item, *West Virginia Board of Medicine, Petitioner, v. Omar Khalid Hasan, M.D., Respondent* — Request for Stay of Final Order Submitted on Behalf of the Licensee, the following members declared a conflict and left the meeting room at this time:

Ahmed Faheem, M.D., President  
Kishore Challa, M.D., F.A.C.C., Vice President  
Cheryl Henderson, J.D.  
Matthew Upton, M.D.

In the absence of the Board President and Vice President, the meeting was chaired by Dr. Gupta. Ms. Alley reported that on June 19, 2017, a special Board meeting was held and the Board voted to issue a Final Order with regard to this matter. The Order imposed, among other terms and conditions, a one year suspension of Dr. Hasan's license to practice medicine and surgery in West Virginia. To facilitate the transition of care for Dr. Hasan's current patients, the period of suspension imposed by the Order is scheduled to begin at 12:01 a.m. on Monday, July 24, 2017. The Order was signed on June 21, 2017 and served later that week. Counsel for Dr. Hasan notified the Board that Dr. Hasan intends to appeal the Final Order and requests a stay of the Board's Final Order, and asks that the Board stay its order pending resolution of the appeal. Ms. Alley also advised that the appeal has been
filed, and a similar motion is pending before the circuit court. Following discussion, Reverend Bowyer moved that the Board deny Dr. Hasan’s request for a stay of the Final Order. Dr. Steele seconded, and the motion carried.

Dr. Faheem, Dr. Challa, Ms. Henderson and Dr. Upton returned to the meeting room at this time. Dr. Faheem chaired the remainder of the meeting.

P. Bradley Hall, M.D., Executive Director of the West Virginia Medical Professionals Health Program (WVMPHP), addressed the Board regarding the future of the organization.

Dr. Faheem reported that the Executive/Management Committee met yesterday morning, Sunday, July 9, 2017, at which time Danny Scalise, Executive Director of the West Virginia State Medical Association, addressed the Committee regarding concerns about the potential practice of medicine by an advanced practice registered nurse. Following discussion, Mr. Spangler indicated that he will pursue the filing of a formal complaint with the West Virginia Board of Registered Professional Nurses regarding this matter.

The Committee approved the fiscal report and purchasing card transactions for the months of February, May and June 2017. The March and April reports were approved at the May 2017 meeting. Dr. Faheem reported that the Board’s spending authority in relation to personnel has been increased, and that the Board recently advertised for a full-time Board Attorney. Interviews will be conducted this week, and on Friday, July 14, 2017, the top candidates will be interviewed by Executive/Management Committee members and key staff members. Thereafter, Mr. Spangler will fill the position.
Dr. Faheem reported that the bidding process for hearing examiners and court reporting services has concluded. The Board has contracted with six individuals to provide hearing examiners services for the 2017-2018 fiscal year. Additionally, the Board has contracted with four entities to provide court reporting services.

Dr. Faheem reported that the Board will need to maintain a contract with Big Picture as we examine our current needs and explore database options. Therefore, the Board will enter into a one year maintenance agreement with Big Picture.

Dr. Faheem reported that the Board has received several requests for a roster of information regarding licensees of the Board. Currently, with the exception of a few entities for which the Board has an agreement, board staff directs individuals seeking a roster of information to West Virginia University Office of Health Services Research. Following discussion, the Committee elected to maintain the current practice with regard to handling requests for licensee information.

Dr. Faheem reported on the 2017 licensure renewal for medical doctors; 2846 renewed their license in active status, 203 renewed in inactive status, and 531 licenses expired. With regard to pediatric physicians, 109 renewed their license in active status, 6 renewed in inactive status and 13 licenses expired.

Dr. Faheem reported that P. Bradley Hall, Executive Director of the WVMPHP, has requested that the Board of Medicine licensure fees be increased by $100.00 per licensee per renewal cycle to assist in funding the WVMPHP. The Committee acknowledges the important role that the WVMPHP plays, and would like to review statistical data regarding the number of referrals, outcomes, etc. regarding the WVMPHP program and work cooperatively with the WVMPHP towards a sound financial future for the organization. Upon reviewing licensure fees in surrounding states, Maryland is the only
state that currently charges higher licensing fees than West Virginia. At this time, the Committee does not feel that it is possible to increase the licensure fee by $100.00; therefore, the Committee recommended that the Board decline to support an increase in licensure fees at this time. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that Mr. Spangler and Ms. Alley will be traveling to West Virginia University School of Medicine on July 25, 2017 to tour the school and meet with representatives. The invitation was extended to Board members. Additionally, Mr. Spangler and Ms. Alley will be meeting with representative of West Virginia Mutual Insurance on July 27, 2017 to discuss working collaboratively on issues of common interest.

Dr. Faheem reported that Mr. Spangler has attended an Interstate Medical Licensure Compact (IMLC) Commission meeting in St. Paul, MN, and he has also participated in IMLC Commission teleconferences. The Board of Medicine has begun receiving applications for an IMLC license.

Dr. Faheem reported that renovations to the new office space are nearing completion, and that the moving of offices is scheduled to begin later this week.

Dr. Faheem notified the Board of the separation from employment of one employee. Dr. Faheem also reported that as planned for several months, Andrew Wessels will join the staff later this month.

Dr. Faheem moved that the Board accept and ratify the report of the Executive / Management Committee. The motion carried.
Ms. Hays reported that the Legislative Committee met yesterday, Sunday, July 9, 2017. The Board’s legislative rules 11 CSR 1A, Licensing and Disciplinary Procedures for Physicians and Podiatric Physicians; 11 CSR 1B, Licensure, disciplinary and Complaint Procedures, and Continuing Education for Physician Assistants, and 11 CSR 5, Dispensing of Prescription Drugs by Practitioners, became effective on July 5, 2017.

Ms. Hays reported that with regard to Board’s legislative rule 11 CSR 6, Continuing Education for Physicians and Podiatrists, Board staff have filed Notice of a Comment Period on a Proposed Rule with the Secretary of State’s office. The comment period ends on July 21, 2017. To date, no comments have been received.

Ms. Hays reported that Ohio currently allows for patient testimonials to be included in physician advertising. It is possible that during the 2018 legislative session, there may be legislation introduced relating to utilizing patient testimonials in physician advertising in West Virginia.

Ms. Hays reported that Board staff have worked diligently on proposed amendments to 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants. The proposed changes to this rule include: changing “supervising physician” to “collaborating physician” and “supervision” to “collaboration” throughout; prescribing parity with APRNs; removing the requirement that a physician assistant maintain national certification through the National Commission on Certification of Physician Assistants; granting physician assistants global signature authority; modernizing the Continuing Medical Education (CME) language to be consistent with the CME language for physicians and podiatric physician; and expanding signature authority. The rule also provides that if an initial license is granted within 30 days prior to licensure renewal, the license renewal be waived for that cycle. Additionally, the proposed rule modifies sections relating to requirements that a collaborating physician be on-site. The Committee recommended that that Board approve the revision of 11 CSR 1B,
and authorize staff to move forward with promulgation of the rule. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Ms. Hays reported that action will need to be taken with regard to 11 CSR 6, *Continuing Education for Physicians and Podiatrists*, and 11 CSR 1B, *Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants*, between now and the September meeting. The Legislative Committee moved that the Board authorize the Legislative Committee to act on behalf of the Board regarding these rules, and convene special meetings to do so as appropriate. The motion of the Committee was given by Ms. Hays, and the motion carried.

Ms. Hays moved that the Board accept and ratify the report of the Legislative Committee. The motion carried.

Ms. Alley reported that a Final Order has been served in the matter of Joel David Shiffler, M.D. Dr. Shiffler has until the end of July to appeal the Board’s Order, if he so chooses.

Ms. Alley reported that in January 2017, the Board issued a Final Order denying the application for licensure to practice medicine and surgery in the state of West Virginia, in the matter of Diane Elain Shafer, M.D. Dr. Shafer filed a Petition in Mingo County Circuit Court to appeal the Board’s Final Order. Briefs have been submitted, and Mr. Spangler and Ms. Alley recently traveled to Mingo County Circuit Court for oral arguments upon the appeal. We anticipate a decision with regard to this matter in the near future.

Ms. Alley reported that on February 17, 2017, the Kanawha County Circuit Court issued an Order Denying Appeal of the Board’s Final Order in the matter of *Shivkumar Iyer, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent*. The circuit court
affirmed the Board’s Final Order. Dr. Iyer has filed an appeal in the West Virginia Supreme Court. Dr. Iyer’s brief has been filed, and the Board of Medicine’s brief is due on August 7, 2017. Assistant Attorney General Greg Foster is handling this appeal.

Ms. Alley reported on the matter of West Virginia Board of Medicine, Petitioner, v. Omar Khalid Hasan, M.D., Respondent. Dr. Hasan has filed a Petition for Appeal of the Board’s Final Order, and a Motion for Stay pending the appeal in the Circuit Court of Kanawha County. Ms. Alley is handling the appeal in the matter. Briefs will be due later this summer.

Mr. Wright provided the report of the Physician Assistant Committee, which met on Saturday, July 8, 2017.

Mr. Wright reported that its May 2017 meeting the Physician Assistant Committee reviewed the quarterly status reports submitted pursuant to the September 27, 2016 Consent Order of Kimberly Elaine Connor, P.A.-C. Ms. Connor was restricted to direct supervision for a minimum period of six months. Her supervising physician had recommended that the restriction be lifted. The Physician Assistant Committee recommended that Ms. Connor be released from her Consent Order. An Order Terminating Consent Order was entered on May 15, 2017.

Mr. Wright asked Board members to review the list of physician assistants up for action, and to advise of any conflicts. No conflicts were declared.

The Physician Assistant Committee recommended the following applicants be approved for physician assistant licensure:

Jackson Barkley Austin, P.A.-C.
Haley May Baird, P.A.-C.
Christian August Barill, P.A.-C.
Lorin Ashley Belcher, P.A.-C.
Terri Leanne Belcher, P.A.-C.
Kristen Marie Bilby, P.A.-C.
Jordan Ashley Britton, P.A.-C.
Christopher Timothy Burgan, P.A.-C.
Taylor W. Callahan, P.A.-C.
Dana Frances DeGeorge, P.A.-C.
Ashley Lynn Delashmutt, P.A.-C.
Kelly Elizabeth Demuynck, P.A.-C.
Ellen Adelia Doebley, P.A.-C.
Jenna Lee Enoch, P.A.-C.
Erika Nicole Fox, P.A.-C.
Gerald Edward Frey, Jr., P.A.-C.
Brittany Lynn Giesken, P.A.-C.
Stephanie Anne Hamrick, P.A.-C.
Timothy David Hontz, P.A.-C.
Travis Wayne Hughes, P.A.-C.
Mark Edward Javins, P.A.-C.
Tara Carson Jernejicic, P.A.-C.
Mallory Ann Ledergerber, P.A.-C.
Heather Kay Legg, P.A.-C.
Christina Michelle Manchin-Newlon, P.A.-C.
Heather Ann Nattkemper, P.A.-C.
Bailey Bierhuizen O’Bannon, P.A.-C.
Kayleigh Coffey Ramaley, P.A.-C.
William Joseph Roberts, P.A.-C.
Kelsey Lynn Roetenberg, P.A.-C.
Erika Blythe Saunders, P.A.-C.
Aris Leshae Smith, P.A.-C.
Norman Lee Walker, P.A.-C.
Elisabeth May Walls, P.A.-C.
Josee Leigh Zidonik, P.A.-C.

The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

The Physician Assistant Committee recommended that Lynne Alice Shaver, P.A.-C be approved for reinstatement of physician assistant licensure. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.
The Physician Assistant Committee reviewed the proposed practice agreement between James Michael Lackey, P.A.-C. and Prasad Polisetty, M.D., which was submitted for its review prior to authorization pursuant to Mr. Lackey’s Consent Order of January 4, 2016. The Physician Assistant Committee recommended that the Board authorize the agreement. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

The Physician Assistant Committee reviewed the proposed practice agreement between Amanda Marie Skrinjorich, P.A.-C. and Ryan Wakim, M.D. The Committee will request that Ms. Skrinjorich, as well as Dr. Wakim if he chooses, appear before the Committee at its September 2017 meeting prior to any further determination of authorization.

Mr. Wright reported that the Physician Assistant Committee reviewed and discussed Senate Bill 1014 and the proposed amendments to 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants. Mr. Wright commended Mr. Spangler and Ms. Alley in their revising of the proposed rule.

Mr. Wright reported that Board staff have authorized forty-six (46) practice agreements for the period of May 8, 2017 through July 7, 2017. Additionally, twenty-five (25) alternate supervisors were designated.

Mr. Wright moved that the Board accept and ratify the report of the Physician Assistant Committee. The motion carried.

Dr. Rahim delivered the report of the Licensure Committee, which met on Saturday, July 8, 2017.
Nine applicants appeared before the Committee on Saturday to discuss their applications. Based upon the Committee’s review of the relevant applications, and its discussion with the applicants, the Committee made the following recommendations:

1. Approve Steven Michael Fish, M.D. for permanent medical licensure.
2. Approve Anil Dutt, M.D. for permanent medical licensure pending payment of the patient injury compensation fund assessment fee.
3. Approve Niv Ad, M.D. and Jeremiah William Hayanga, M.D. for medical school faculty licensure.
4. Place the following applications on hold pending receipt of additional information:
   Saeed Fatenejad, M.D.
   Gianna Joanne Link, M.D.
   Ever Luizaga Coca, M.D.

The motion of the licensure committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that Alvin Chan Wee, M.D. appeared before the Licensure Committee in support of his application for an extraordinary circumstances medical license. The Licensure Committee recommend that the Board approve Dr. Wee’s application for licensure pursuant to WV Code § 30-3-10(e) based on the following findings:

1. The applicant has exceptional education, training and practice credentials, including:
   a. Establishing and eight years of experience serving as the Program Director of the Kidney and Kidney/Pancreas Program at St. Vincent Hospital in Indianapolis, Indiana, a satellite transplant program for the Cleveland Clinic, during which time the program has substantively contributed to a significant decrease in the kidney transplant wait time for the state of Indiana with the program itself having the second shortest wait time in the region;
b. Over ten years of clinical experience in Kidney and Pancreas Transplantation, including laparoscopic living donor nephrectomies;

c. Serving as a Living Donor Primary Surgeon for the Kidney and Kidney/Pancreas Program at St. Vincent Hospital in Indianapolis, Indiana;

d. Appointment as Assistant Professor for the Cleveland Clinic Lerner College of Medicine;

e. Serving as the Region 10 Representative for United Network for Organ Sharing;

f. Completion of a two year Renal/Pancreas Transplant Fellowship at the Glickman Urological and Kidney Institute at the Cleveland Clinic; and

g. Publication in the subject matter area of transplant medicine, including pancreas transplantation.

2. The applicant’s practice in the state would be beneficial to the public welfare. Currently, there are no physicians in West Virginia performing live donor kidney transplants, and only one physician performing deceased donor kidney transplants. Dr. Wee performs live and deceased donor kidney transplants, and his licensure would provide access to live donor kidney transplants to residents of this state.

3. The availability of live donor kidney transplant procedures can affect the length of transplant wait times for West Virginia patients, and can maximize opportunities and outcomes for certain patient populations.

4. The applicant received six years of postgraduate training outside of the United States and its territories, including four years of urologic surgery. Additionally, Dr. Wee completed one year of ACGME post-graduate medical training in internal medicine and two years of fellowship training in Renal/Pancreas Transplant at the Glickman Urological and Kidney Institute at the Cleveland Clinic.

5. The applicant’s education and initial post-graduate training occurred outside of the United States and are not, standing alone, substantially equivalent to the requirements of licensure in this state, however the totality of his education, training, and practice
credentials are substantially equivalent to the requirements of licensure established in W. Va. Code §30-3-10(f).

6. The applicant has no disciplinary action which would render him ineligible for an extraordinary circumstances license.

7. The applicant is eligible for a restricted license in extraordinary circumstances.

The Committee further recommended that Dr. Wee be approved for an extraordinary license limited according to practice location at the locations of Charleston Area Medical Center, Charleston, West Virginia, and that the applicant’s license be restricted to the practice of transplant surgery. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that at the May 2017 meeting, the Licensure Committee reviewed and discussed the application for reactivation of the permanent medical license of Anthony Todde Securo, M.D. Dr. Securo was requested to appear before the Licensure Committee at its July 2017 meeting. Dr. Securo appeared in support of his application. The Committee recommended that the Board approve Dr. Securo for reactivation of licensure through proposed Consent Order with the following terms, conditions, limitations and restrictions: 1) Dr. Securo shall not practice pain management or work in a pain management clinic, and shall refer patients with chronic pain, as necessary, to a pain management specialist or licensed clinic; 2) In the event that Dr. Securo regains a DEA registration which permits the prescribing of schedule II and III controlled substances he shall not prescribe controlled substances to any patient at an amount more than the morphine equivalent daily dose (MEDD) of 30mg and such prescriptions shall not be for more than one (1) week of medication per procedure; 3) Prior to prescribing, administering, ordering or dispensing any controlled substances, Dr. Securo shall detail in full, in the patient’s file, the examination performed and diagnosis reached in the particular patient’s file. Dr. Securo shall specifically record all physical data of the patient and detail the exact nature of his evaluation of the patient. In addition to this requirement, Dr. Securo agrees to comply with all record keeping requirements of the Board; 4) At six month intervals
after the date of entry of this Consent Order, the Board may, in its discretion, query Dr. Securo's controlled substance prescribing practices with the West Virginia Board of Pharmacy's Controlled Substance Monitoring Database and/or similar state or federal entities in surrounding states to monitor Dr. Securo's compliance with the prescribing restrictions imposed by this Order; 5) Dr. Securo acknowledges that it is a best practice to chart in the medical record the name of the chaperone and/or female staff member present whenever he conducts a breast examination, gynecological examination, or any other medical test or procedure which requires contact with or exposure of the breast or genitals. Dr. Securo agrees that he will strictly comport with this practice and will always chart the name of the female staff member/chaperone present for all such medical procedures; 6) Dr. Securo shall maintain current and accurate contact information with the Board, including home address, preferred mailing address, all practice addresses in West Virginia and e-mail address. Dr. Securo shall provide the Board with any changes or additions to his contact information within 5 days of any such change; 7) Within ten days of commencing practice at any place of practice in West Virginia, and for so long as the practice restrictions imposed by this Consent Order remain in place, Dr. Securo shall provide a complete copy of the fully executed Consent Order, to any and all employers and places where he practices and/or has privileges in West Virginia; 7) Dr. Securo shall appear before the Licensure Committee on an annual basis, at the discretion of the Board, to discuss his practice of medicine and/or his compliance with the terms of his probation or this Consent Order; and 8) After Dr. Securo has been in active practice in West Virginia for one full year, he may petition to the Board to modify and/or lift the practice restrictions related thereto which are imposed by this Order. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the Licensure Committee reviewed and discussed six applications. Base thereupon, the Committee made the following recommendations:

2. Accept postgraduate training as satisfactorily verified and approve Wayne Ernest Tobin, M.D. for permanent medical licensure pending payment of the patient injury compensation fund assessment fee based on the fact that Dr. Tobin’s residency training was verified and he holds lifetime Board certification in neurology.

3. Accept the total hours of continuing medical education as satisfactory and approve Deborah Lynn Green-Chadwick (Chadwick), M.D. and Deborah Sue Davis, M.D. for reactivation of permanent medical licensure.

4. Approve David Austin Bennion, Jr., M.D. and Maryam Hussain, M.D. for permanent medical licensure pending receipt of satisfactory evidence of verification of completion of postgraduate training and pending payment of the patient injury compensation fund assessment fee.

The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the Licensure Committee will refer a matter to the Complaint Committee for potential Licensure Consent Order violation.

Based upon review of application materials, the Committee elected to invite Peter Matthew Gannon, M.D. to appear at the Committee’s September 2017 meeting.

Dr. Rahim asked Board members to review the list of physicians up for action and to advise of any conflicts. No conflicts were declared.
The Committee recommended that the Board approve the following applicants for licensure:

**Permanent medical licensure**
Abdelfattah, Mohamad Bashar
Abunnaja, Salim Salaheddin
Adhikari, Shubash
Aizad, Tazeem Ahmad
Alaqqam, Tasneem Saleh
Albert, Deborah Louise
Aljohani, Sami Mohammad
Anguh, Terence Tsiambuom
Appel, Jeffrey Paul
Atkinson, Joshua Aubrey

Baig, Aneeqah
Baker, Danile Mark
Barr, Karen Patricia
Begole, Mary Jeannette
Bendel, Laima Pauliukonis
Benhacene, Assia
Berardinelli, Andrew John
Beville, III, Lee Walker
Blankenship, Will Owen
Bostian, Phillip Andrew
Brady, IV, John Paul
Brehm, Anthony
Brooks, Douglas Paul
Brown, Thomas William
Brown, III, Merritt Weaver
Browne, Alysia Dawn
Brownfield, Aaron Matthew
Bukamur, Hazim Said

Cassara, Antonio
Catt, Karyn Emmanuel
Cohen, Jonathan
Conjeski, Jacob Matthew
Cook, Benjamin Charles
Cormack, Graham Michael
Couvillion, Joseph Anthony

Dabir, Amann
Daigle, Jessica Simone Butler
Dolganituc, Angela
Dothager, Matthew David
Driscoll, Maggie Marie
Driver, Kevin Albert

Eizember, Frances Lim
Estrada Trejo, David Ernesto
Evans, Aaron Michael

Faluaide, II, Emmanuel
Farrah, Thomas Grayson
Fonebi, Gwendoline Akwen
Franke, David Dale Johnson
Gabino Miranda, Gustavo Andres
Garcia Lopez de Victoria, Elizabeth
Geatrakas, Christina Sharon
Gebremedhin, Binyam
Gibbs-McElvy, Shelana Marie
Grubb, Kristen Rae
Gupta, Sunmeet Kumar
Gwynne, Mackenzie Jo

Haile, Morgan Cheatham
Hayanga, Heather Kaiser
He, Peimei
Hensley, Christina Ann
Hill, Garick David
Hintz, Brace Leland
Hoffman, Matthew Timothy
Horner, Jr., Michael Vernon
Hudkins, Matthew Gregory
Hustead, Jeremy Daniel

Irfan, Affan Bin
Ivan, Mihaela

Jackson, Laura Elizabeth Evans
Jain, Priya Kumari
Jakob, John Andrew
Johnson, Charles Edward
Johnson, Dustin Lee
Karpurapu, Hemamalini
Kasirajan, Lakshmipriya
Katcheves, Alexandr Steve
Khan, Muhammad Usman
Khan, Samira
Kilgore, Brian Alan
Kothari, Viral Dilip

Labi, Marhon Amos
Lai, Peter Ping-Kwong
Lawrence, Karena Gildea
Leung, Richard W.
Levora, Jan
Lopez, Eric Mark Jaurique

Malik, Asifa Mahboob
Mannan, Abdul
Mardanlou, Sarah Ruth
Mawari, Samih Kasim
Mazza, Pamela Patricia
McMillion, Brent Michael
Mehta, Rashi Ishwar
Miah, Abdul Rahman
Miller, Audrey Nicole
Mittal, Abhinav
Moser, Benjamin Douglas
Mourany, John E.
Muench, Michael Vaughn
Munir, Muhammad Bilal
Muthalakuzhy, George Sunil

Nahar, Niru Nazmun
Nath, Sujai Deep
Nayyar, Ankit
Neely, Grant Alexander
Newatia, Amit
Nkamany, Mary Ngaleu
Northrup, George Michael

O’Brien, Daniel Columcille
O’Donnell, Brighid Moran
Omatseye, Jr., Jim Oritsetimeyin
Ost, Michael Cecil

Panikkath, Ragesh
Parrish, Kylie Lenae
Patel, Kinjan Punkajkumar
Payne, Andrew Nathaniel
Phan, Nicolas
Plumby, Mark Christopher
Pollack, Tal
Poudel, Atul
Purewal, Rupeena

Raman, Dileep
Reynolds, Alexandra Holly
Roberts, Jr., Harold Gene
Rokosz, Jennifer Ann
Sahin, Azize
Salman, Muhammad
Samiappan, Ambiga
Sankineni, Spoorthi Kiran
Schessler, Matthew Joseph
Schleter, Brian James
Schlossman, Todd William
Shah, Kuldeep Bharat
Shah-Khan, Sardar Musa
Shamsi, Sohaib
Sharma, Shree Gopal
Shoe, Katelyn Marie
Shubert, Daniel Jordan
Silver, Martine Tamara
Singasani, Reddy Sreenivas
Sternberg, Madison Anne
Stump, Ill, Alfred Bailey
Subrayappa, Navin Kumar
Summers, Gregory T.
Sunkara, Srinivas
Sunzeri, Lindsay Leigh
Surgenor, Stephen David

Tager, David Samuel
Tammana, Venkata S. M. Suneel K.
Taub, Ariela Sarah
Thirumalai, Shanti Sengamalam
Tintner, Ron
Tovar Marmolejo, Yara Elizabeth
Travis, Talitha Skory
Turner, Jennifer Sarah
Tylke, James Edward

Ullah, Imad
Usmani, Arif Suhaïl

Vakkalanka, Sujit
Van Horn, Lee Aaron
Vethachalam, Sandhya
Vincent, Patrick David
Vo, Quynh Van Ngoc

Walker, Gregory Brett
Warren, Ward Randall
Watchko, Jon Freeman
Wernli, Betsy Jane
Westin, Charles William
Willis, Anthony Joseph
Wood, Terry Dale
Wu, Gary

Yalamanchili, Rama Krishna
Yi, Chong Kun
Yousufzai, Bilal Khan

Zank, Jennifer S
Permanent medical licensure pending receipt of payment of the patient injury compensation fund assessment fee:

Maghoub, Musadag Mamoun
White, Jermaine Kyong

Permanent medical licensure pending receipt of official USMLE transcript:

Jason Clark Statler, M.D.

Reactivation of permanent medical licensure:

Vadlamani, Lalit Kumar

Permanent podiatric licensure:

Inthavongxay, Jessica
Vess, Vincent

The motion of the Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the Committee approved the Drug Dispensing Registration application and the Charitable Exemption Authorization form.

Dr. Rahim reported the following information regarding the 2017 renewal for medical doctors M-Z, podiatric physicians, drug dispensing registration and professional limited liability companies:

Active medical doctors renewed: 2846
Inactive medical doctors renewed: 203
Active podiatric physicians renewed: 109
Inactive podiatric physicians renewed: 6
Dr. Rahim moved that the Board accept and ratify the report of the Licensure Committee. The motion carried.

Dr. Challa provided the report of the Complaint Committee, which met on Sunday, July 9, 2017. Dr. Challa reported the following activities:

**CLOSURES**

| 17-88-P | Ziad Abed Al-Kariem Al-Qudah, M.D. |
| 17-94-A | John David Angotti, M.D. |
| 16-148-W | Ajay Anand, M.D. |
| 17-97-S | Christopher Oliver Branam, M.D. |
| 17-29-C | Carroll David Christiansen, M.D. |
| 17-103-W | John Edwin Cornell, M.D. |
| 17-84-W | Pramoda Kumari Devabakhtuni, M.D. |
| 17-105-W | Joseph Hugo Duver, M.D. |
| 17-48-N | Michael Lee Ferrebee, M.D. |
| 16-150-W | John Dae Harrah, Jr., M.D. |
| 16-130-W | Mohammad Khalid Hasan, M.D. |
| 16-131-W | Omar Khalid Hasan, M.D. |
| 17-37-P | David Elwood Hess, M.D. |
| 16-51-A | Hassan Arshad Jafary, M.D. |
| 17-40-P | Hassan Arshad Jafary, M.D. |
| 16-52-A | Hassan Asghar Jafary, M.D. |
| 17-51-M | Teodoros Dimaano Jimenez, M.D. |
| 16-146-W | Joseph Anthony Jurand, M.D. |
| 17-45-O | Anthony Adolphus McFarlane, M.D. |
| 17-118-W | Dennis Raymond Meurer, M.D. |
| 17-91-S | Susan Wolf Miller, M.D. |
| 17-46-M | Ahmet Husamettin Ozturk, M.D. |
| 17-38-P | Justine Abigail Pagenhardt, M.D. |
| 17-90-T | Ashok Kumar Patnaik, M.D. |
| 17-86-P | Maurice Clement Rhodes, M.D. |
| 17-80-W | Brian Keith Richardson, M.D. |
| 17-42-H | Robert Edward Shapiro, M.D. |
| 17-93-F | Michael Shramowiat, M.D. |
| 17-50-L | Vineet Kumar Sood, M.D. |
| 17-87-P | Bill Dean Underwood, M.D. |
17-114-W  Patricia Dawn Webster, P.A.-C

INITIATED COMPLAINTS

17-135-W
17-136-W
17-137-W
17-138-W
17-139-W
17-140-W
17-141-W

WITHDRAWAL OF PREVIOUS INITIATED COMPLAINTS

17-52-W
17-55-W
17-119-W

FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14

17-101-W  Stephen Scott Brown, M.D.

CONSENT ORDERS

Dr. Challa requested that the Board authorize the Complaint Committee to move forward with offering twenty-four (24) Consent Orders and/or Amended Consent Orders in ongoing Complaint Committee matters. The motion of the Complaint Committee was given by Dr. Challa, and the motion carried.

FULLY EXECUTED CONSENT ORDERS

Dr. Challa reported that since the May meeting, fully executed Consent Orders have been
entered with respect to the following licensees:

**Yasar Aksoy, M.D.** – On May 30, 2017, the Board summarily suspended Dr. Aksoy’s medical license for continuing to prescribe opioid drug products in violation of a temporary restraining order issued by a circuit court. The Board determined this conduct to be an immediate danger to the public. On June 9, 2017, the licensee entered into a Consent Order with the Board which effectuated the permanent voluntary surrender of his West Virginia medical license in lieu of proceeding to a public hearing.

**Russell Biundo, M.D.** – On June 27, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $800.00 for not reporting a medical professional liability settlement on his 2016 license renewal application.

**Paul Christian Bown, M.D.** – On June 9, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $800.00 for not reporting a medical professional liability settlement on his 2016 license renewal application.

**Jodi Michelle Cisco-Goff, M.D.** – On June 7, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $800.00 for not reporting a medical professional liability settlement on her 2016 license renewal application.

**William Douglas Given, M.D.** – On June 27, 2017, the licensee entered into a Consent Order with the Board which imposed terms and conditions on his medical license that require him to have a controlled substance agreement with his patients that he regularly prescribes controlled substances to, and to monitor the patients with drug screenings and random pill counts. Dr. Given must also complete a Medical Record Keeping Course and, for the next 3 years, provide on-site access for chart review.
Ali Akbar Khan, M.D. - On June 7, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500.00 for failing to produce documentation in response to a continuing medical education audit demonstrating his successful completion of a Board approved course on drug diversion training and best practicing of controlled substance during the requisite time frame.

Salvatore LaNasa, M.D. - On June 6, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500.00 for failing to produce documentation in response to a continuing medical education audit demonstrating his successful completion of a Board approved course on drug diversion training and best practicing of controlled substance during the requisite time frame.

Munawar Siddiqi, M.D. – On June 9, 2017, the licensee entered into a Consent Order with the Board which imposed reciprocal discipline based upon action taken against his license in Kentucky. Dr. Siddiqi’s West Virginia license shall remain in inactive status until he possesses an unrestricted medical license in Kentucky.

All Consent Orders are available on the Board’s website.

Dr. Challa moved that the Board accept and ratify the report of the Complaint Committee, and the motion carried.

There being no further business to consider, Dr. Rahim moved that the meeting be adjourned. Dr. Steele seconded, and the motion carried.

Ahmed D. Faheem, M.D.
President

Rahul Gupta, M.D., M.P.H
Secretary
CALL TO ORDER

Approval of Minutes

- July 10, 2017

Announcements

Committee and Staff Reports, Discussion and Action:

- Executive/Management Committee
- Legislative Committee
- Board Attorney Report
- Physician Assistant Committee
- Licensure Committee
- Complaint Committee

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE

Board Meeting Minutes

September 11, 2017

A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 11th day of September 2017 at 9:00 a.m.

The following Board members were present for the meeting:

Ahmed D. Faheem, M.D., D.L.F.A.P.A., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P., Secretary
Reverend O. Richard Bowyer
Rusty Cain, D.P.M.
Harry Duncan, M.D.
Beth Hays, M.A.
Cheryl Henderson, J.D.
Carrie Lakin, D.P.M.
David Mullins, M.D.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
K. Dean Wright, P.A.-C.

The following Board members were absent:

Wes Steele, M.D.
Matthew Upton, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame
Leslie A. Thornton, CMBI
Andy Wessels
Diane Callison
Dr. Faheem called the meeting to order. In remembrance of the victims of the September 11, 2001 terrorist attacks, the Board held a moment of silence followed by prayer, which was lead by Reverend Bowyer.

Dr. Faheem introduced and welcomed the following new staff members: Andrew Wessels, Director of Intergovernmental and Public Relations; Greg Foster, Board Attorney; and Diane Callison, Receptionist/Administrative Office Assistant.

Dr. Faheem reminded members that a strategic planning meeting will be held on Saturday, October 7, 2017 in the Board of Medicine conference room. He announced that prior to the meeting, board and staff members will receive a series of surveys that will need to be completed and submitted.

Dr. Faheem announced that the board membership term for the following individuals will expire on September 30, 2017:

Kishore K. Challa, M.D., F.A.C.C.;
Rusty Cain, D.P.M.;
Beth Hays, M.A.;
Cheryl Henderson, J.D.; and
K. Dean Wright, P.A.-C.

Dr. Challa has served one term on the board, and is therefore eligible for reappointment; however, the remainder of members have served two consecutive terms on the board and are not eligible for reappointment. Dr. Faheem thanked each of the members for their dedication and commitment to the Board of Medicine, and announced that the members are welcome, and encouraged, to remain on the Board until a successor is appointed. Ms. Callison left the meeting room at this time, and was not present for the remainder of the meeting.
Dr. Rahim moved that the July 10, 2017 minutes be approved. Ms. Hays seconded, and the motion carried.

Dr. Faheem reported that the Executive/Management Committee met yesterday morning, Sunday, September 10, 2017, at which time the Committee approved the fiscal report and purchasing card transactions for the months of July and August 2017.

Dr. Faheem reported that the Committee reviewed the Federation of State Medical Boards (FSMB) Guidelines for the Chronic Use of Opioid Analgesics. Prior to today’s meeting, a copy of the guidelines was made available for members to review. Reverend Bowyer moved that the Board replace its current position statement, Use of Opioid Analgesics in the Treatment of Chronic Pain, with the 2017 FSMB Guidelines for the Chronic Use of Opioid Analgesics. Ms. Henderson seconded, and the motion carried.

The Committee reviewed correspondence from Dawn Morton-Rias, President and Chief Executive Officer of the National Commission on Certification of Physician Assistants, requesting an opportunity to address the Board. Ms. Morton-Rias will be invited to present to the Board at a future meeting.

The Committee reviewed and discussed correspondence from P. Bradley Hall, M.D., Executive Director of the West Virginia Medical Professionals Health Program (WVMPHP), regarding the financial future of the organization and providing statistical facts regarding the program. No action was taken with regard to the WVMPHP.

Dr. Faheem reported that several board and staff members met with representatives of West Virginia University (WVU) in July. During the meeting, WVU representatives identified several issues that they hope to address cooperatively with the Board of Medicine.
Dr. Faheem reported that Mr. Spangler is working with Dr. Joseph Shapiro, Dean of Marshall University School of Medicine, to facilitate a visit to the Joan C. Edwards School of Medicine. Board members are encouraged to participate in the visit. Additional information will be provided once it becomes available.

Dr. Faheem reported that renovations to the new board room are nearing completion, and that the room will be available for use by the October strategic planning meeting.

Dr. Gupta joined the meeting at this time. Dr. Faheem reported that the Board has issued three letters of qualification and six licenses pursuant to the Interstate Medical Licensure Compact (IMLC). Mr. Spangler was asked to assume the position of treasurer for the IMLC Commission. He has declined the position at this time due to work volume at the Board of Medicine. However, he will maintain his involvement as a commissioner.

Dr. Duncan moved that the Board accept and ratify the report of the Executive / Management Committee. Ms. Hays seconded, and the motion carried.

Ms. Hays reported that the Legislative Committee met yesterday, Sunday, September 10, 2017. The comment period regarding proposed amendments to the Board’s legislative rule 11 CSR 6, Continuing Education for Physicians and Podiatrists, concluded on July 21, 2017. No comments were received. Board staff have filed the Agency Approved version of the rule with the Secretary of State’s office. The Legislative Rule-Making Review Committee has authorized the Board to promulgate the rule as filed with no modifications.

The comment period regarding proposed amendments to the Board’s legislative rule 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing
Education, Physician Assistants, concluded on August 10, 2017. The Legislative Committee met on August 21, 2017 and considered the eighteen comments that were submitted with regard to this rule. Minor modifications were made. Board staff have filed the Agency Approved version of the rule with the Secretary of State’s office.

Ms. Hays reported that Senate Bill 1014 was passed during the 2017 legislative session, and became effective on September 7, 2017. This legislation authorizes changes to physician assistant practice including, among other things, expanded prescribing and signature authority. In order to implement the prescribing changes, the Board will need to file an Emergency Rule. Mr. Wright moved that the Board authorize staff to move forward with filing Emergency Rule 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants with the Secretary of State’s Office. Dr. Rahim seconded, and the motion carried.

Ms. Hays reported that in August, Mr. Spangler presented information to the West Virginia Legislature’s Joint Committee on Health regarding the Board’s research into medical liability review panels. He reiterated to the Joint Committee on Health that the Board of Medicine is not the appropriate entity to house such a panel. Board staff will monitor future legislative efforts regarding establishing a medical liability review panel and will provide updates as necessary.

Dr. Rahim moved that the Board accept and ratify the report of the Legislative Committee. Mr. Wright seconded, and the motion carried.

Ms. Alley reported that there was a disciplinary hearing scheduled to occur later this week, Wednesday, September 12, 2017, through Friday, September 15, 2017; however, the Hearing Examiner has continued the hearing at the request of the licensee. There is currently a disciplinary hearing scheduled to occur in October.
Ms. Alley reported that there are two cases which are ripe for the filing of a Complaint and Notice of Hearing. Hearings with regard to these cases will be scheduled for later this year.

Ms. Alley reported that a Petition to Quash an Administrative Subpoena has been filed in Kanawha County Circuit Court. A hearing is scheduled before Judge Stucky this afternoon, Monday, September 11, 2017, regarding this matter.

Ms. Alley reported that the matter of Shivkumar Iyer, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent is currently going through the appeal process, and the Board is awaiting the Supreme Court’s ruling.

Ms. Alley reported on the matter of West Virginia Board of Medicine, Petitioner, v. Omar Khalid Hasan, M.D., Respondent. Dr. Hasan filed a Petition for Appeal of the Board’s Final Order, and a Motion for Stay pending the appeal in the Circuit Court of Kanawha County. The Board’s Order was stayed, and the licensee is currently practicing. The Board’s brief in this matter is due on September 27, 2017, and proposed orders are due to the Court on October 12, 2017.

Ms. Alley reported that on July 19, 2017, the Mingo County Circuit Court affirmed the Board’s decision to deny Diane Elaine Shafer, M.D. a West Virginia medical license. Dr. Shafer has filed a Motion for Reconsideration. The Board has submitted a proposed Order denying reconsideration and is awaiting action by the court.

In the absence of Mr. Wright, Dr. Sheth chaired the Physician Assistant Committee meeting on Saturday, September 9, 2017, and provided the following report.
Dr. Sheth asked Board members to review the list of physician assistants up for action, and to advise of any conflicts. Dr. Mullins declared a conflict with regard to Tabitha Eve Cox, P.A.-C.

The Physician Assistant Committee recommended the following applicants be approved for physician assistant licensure:

Nancy Jean Balewski, P.A.-C.
Joyce Mary Brun, P.A.-C.
Courtney Rae Cira, P.A.-C.
Brianna Nicole Clark, P.A.-C.
Alexandra Korin Higginbotham, P.A.-C.
Nancy Louis Jones, P.A.-C.
Jaime Legaspi Lazaro, Jr., P.A.-C.
Kelsey M. Leadman, P.A.-C.
Claire Hillman Leinhauser, P.A.-C.
Robert Joshua Logan, P.A.-C.
Leanne Kocher Mazzella, P.A.-C.
Andie Elizabeth Meade, P.A.-C.
Katherine Laura Moio, P.A.-C.
Nathan Merl Musser, P.A.-C.
Rosa Lea Nardo, P.A.-C.
Natalie Hope Stanley, P.A.-C.
Kayla Nicole Strimel, P.A.-C.

The motion of the Physician Assistant Committee was given by Dr. Sheth, and the motion carried.

Dr. Mullins left the meeting room at this time. Dr. Sheth recommended that Ms. Cox be approved for physician assistant licensure. The motion of the Physician Assistant Committee was given by Dr. Sheth, and the motion carried. Dr. Mullins returned to the meeting room.

The Physician Assistant Committee recommended that Richard Santostefano, Sr., P.A.-C. be approved for physician assistant licensure contingent upon his acceptance of a
Consent Order with the following terms: (1) that any proposed practice agreement submitted delineating advanced duties to Mr. Santostefano must be reviewed by the Physician Assistant Committee; (2) that Mr. Santostefano practice under direct supervision for a minimum of six months; and (3) that Mr. Santostefano’s supervising/collaborating physician send quarterly status reports updating the Committee on his progress and a recommendation regarding when the direct supervision requirement should be lifted. The motion of the Physician Assistant Committee was given by Dr. Sheth, and the motion carried.

The Physician Assistant Committee recommended that Kerry Sue Brinager, P.A.-C. be approved for reinstatement of licensure. The motion of the Committee was given by Dr. Sheth, and the motion carried.

Amanda Marie Skrinjorich, P.A.-C., and her supervising physician, Ryan Wakim, M.D., appeared before the Physician Assistant Committee for discussion of matters related to her proposed practice agreement. Dr. Sheth reported that the Committee voted to approve authorization of Ms. Skrinjorich’s practice agreement pending satisfactory receipt of the following additional information for the Medication Assisted Treatment (MAT) advance duty in an office setting: (1) evidence of a minimum of one year of experience in substance use disorder treatment and medication assisted treatment settings: or (2) a statement from the medical director of the MAT practice location indicating that the physician assistant has completed or is actively enrolled in a plan of education for obtaining competence in MAT methods and substance use disorders that is approved by the medical director with a description of the educational plan; and (3) a narrative description from the collaborating physician of the model of patient treatment and Ms. Skrinjorich’s role in patient care for MAT patients.

Dr. Sheth reported that the Committee discussed the development of a policy regarding what needs to be included in practice agreements requesting authorization to delegate the advanced duty of treatment of MAT patients and the procedure for staff
authorization of such practice agreements. The Committee concluded that a practice agreement requesting the advanced duty of MAT should include the following:

1) Identification and evidence of the source of the DATA 2000 waiver under which the physician assistant will practice.

2) A) Evidence that the physician assistant has a minimum of one year of experience in substance use disorder treatment and medication-assisted treatment settings; or B) A statement from the medical director of the MAT practice location indicating that the physician assistant has completed or is actively enrolled in a plan of education for obtaining competence in MAT methods and substance use disorders that is approved by the medical director with a description of the educational plan; and

3) A narrative description from the collaborating physician of the model of patient treatment and the physician assistant’s role in patient care for MAT patients.

Dr. Sheth reported that the Committee conducted an annual review of the Physician Assistant Formulary. The Committee recommended that the following formulary become effective upon enactment of the Board’s emergency rule 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants:

1) Physician assistants may not prescribe: any Schedule I or II Controlled Substances of the Uniform Controlled Substances Act; Clozapine; Antineoplastics; Radio-Pharmaceuticals; or General Anesthetics.

2) Physician assistants may prescribe Schedule III Controlled Substances, but no greater than a non-refillable thirty-day supply.

3) Physician Assistants may prescribe Schedule IV or V Controlled Substances as set forth in the practice agreement.

4) Physician assistants may generally prescribe prescription drugs which are not excluded or otherwise limited hereinabove, and physician assistants may prescribe up to an annual supply of any drug, other than a controlled substance, for the
treatment of a chronic condition (other than chronic pain management) as defined by the Board’s legislative rules governing the practice of physician assistants.

The motion of the Physician Assistant Committee was given by Dr. Sheth, and the motion carried.

Dr. Sheth reported that the Committee reviewed the following forms which will need revision upon approval of the Emergency Rule, 11 CSR 1B: Practice Agreement; Appendix A; Appendix B; Notification of Termination of a Practice Agreement; Physician Assistant Application for Licensure; and 2017 Physician Assistant Reinstatement of Licensure Application. The Committee authorized board staff to amend the forms as necessary.

The Committee discussed how to facilitate utilization of the new Physician Assistant Formulary once the emergency rule goes into effect. All current practice agreements incorporate the current Physician Assistant formulary which limits Schedule III Controlled Substances to a 72-hour supply. The Committee recommended that physician assistants and their collaborating physicians who wish to amend their current practice agreement solely for the purpose of changing the delegation of prescribing authority may submit a Board approved amendment form prior to December 31, 2017, at no additional fee. The motion of the Committee was given by Dr. Sheth, and the motion carried.

The Committee discussed the Federation of State Medical Board’s request to utilize its newly available Uniform Application (UA) for physician assistants. The Committee deferred this discussion to a later date.

Dr. Sheth reported that Board staff have authorized sixty-three (63) practice agreements for the period of July 10, 2017 through September 8, 2017. Additionally, twenty (20) alternate supervisors were designated.
Dr. Cain moved that the Board accept and ratify the report of the Physician Assistant Committee. Ms. Henderson seconded, and the motion carried.

Dr. Rahim delivered the report of the Licensure Committee, which met on Saturday, September 9, 2017.

Dr. Rahim reported that three applicants appeared before the Licensure Committee to discuss their applications. Based upon the Committee’s review of the relevant applications, and its discussion with the applicants, the Committee recommended that Khalil Mohammad Alsoutary, M.D., Albert Mark Bleggii, M.D. and Martin John Oates, M.D. be approved for permanent medical licensure pending payment of the patient injury compensation fund assessment fee. The motion of the Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the Licensure Committee reviewed and discussed nineteen (19) applications. Base thereupon, the Committee made the following recommendations:

Approve the following applicants for permanent medical licensure:
Ankush Agarwal, M.D.
Sunil Gurudas Kamat, M.D.
Dhruv Joshi, M.D.
Stephanie Anne Wright, M.D.

Approve the following applicants for permanent medical licensure pending payment of the patient injury compensation fund assessment fee:
Gilbert Almaraz, M.D.
Ever Luizaga Coca, M.D.
Gregory Lynn Spears, M.D.
Joel Eleazar Gomez, M.D.
Victor Jaramillo, M.D.
Dean Eric Wolz, M.D.
Jason Alexis Parker, M.D.
Santiago Miro, M.D.

Accept the total hours of continuing medical education as satisfactory and approve Darrell Lee Donley, M.D. and Bert E. Mason, D.P.M. for reactivation of permanent licensure.

Approved David Elmer Thomas, M.D. for permanent medical licensure pending receipt of a copy of his medical school diploma and certificate of postgraduate training and payment of the patient injury compensation fund assessment fee.

The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Committee recommended that the Board accept Peter Mathew Gannon’s request for withdrawal of his application. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the Committee will maintain Anthony Todde Securo, M.D. and Saeed Fatenejad, M.D.’s applications pending additional information / follow-up action from the applications.

Dr. Rahim reported Robert Paul Kocher, M.D. will be invited to appear before the Committee in November 2017.

Dr. Rahim asked Board members to review the list of physicians up for action and to advise of any conflicts. No conflicts were declared.
The Committee recommended that the Board approve the following applicants for licensure:

**Permanent medical licensure**

Abdelqader, Abdelhai
Abid, Ayesha
Adelman, Avram Eli
Allgaier, Jeffrey Todd
Al-Qawasmi, Halima
Arehart, Eric James
Arekapudi, Smitha
Aromin, Jourdan Tyler

Balla, Sudarshan
Bryant, Keisha Kadesha

Cartagena, Jr., Rafael
Chacko, Binu Thomas
Clarkson, Mackenzie James
Cundiff, Courtney Anne

Davis, Sean Germaine
Dilcher, Brian Zachary

Elkamberg, Hussam Mohamed Aly Iskander
Estaphan, Nevine Albert Naguib

Fleming, Michael James

Galvan Turner, Valerie Biana
Garcia, Chanel Amber
Garg, Shweta
Geist, Derik Josef
Graumann, Martin P.
Green, Thomas John

Hammad, Walid Mohamed Fawzy Mohamad
Hollander, Susan Lindsay
Hornsby, Kristan Michelle

Jacob, Sneha
Judhan, Rudy Jewan
Khan, Nadia N.
Kotsko, Jude David
Kumar, Mukesh
Kupferberg, David Howard

Lastrapes, Scott Christopher
Lee, Brent Robert
Lenahan, Susan Ellen
Liubicich, Jeffrey Felice
Lull, Lisa Schiller

McBeth, Ryan Kent
McLeod, Nathanael David
Moczygemba, Roger Michael
Mohiuddin, Atif Zaher
Moufarrege, Ghassan Toufic

Neidhardt, Jessica Marie
Nicolwala, Hormuz Adil

Onuigbo, Sunny Nduka

Papani, Ravikanth
Parrino, Michael Patrick Howard
Pickett, Jason Raine

Randazzo, William Thoburn
Rathore, Sulaiman Aziz
Reinsel, Tom E.
Rothman, Richard Brian
Rouse, Eden Maria

Saenz, Monica Lisa
Sanjeevi, Arunkumar
Sargent, Donald Lee
Schulman, Rebecca Lauren
Schwartz, Andrew William
Shmookler, Aaron Daniel
Shou, Jason
Sreeharikesan, Suppiramaniam
Swackhammer, Randy Lee

Tan, Mary Aldrene Lee
Vu, Hang Thanh

Waldeck, Kate Marie
Ward, Richard James
Wardell, Richard Mark
Wynn, Vander Mark

Zelenak, Timothy Gerald

**Permanent medical licensure pending receipt of payment of the patient injury compensation fund assessment fee:**
Musa, Abdullahi Mohamad Mukhtar
Peralta, Brannon Phillip Dumag

**Reactivation of permanent medical licensure:**

Chesnut, Joy Cruz
Elbash, Ahmad Feras
Petty, Gary Joe
Teferra, Ethiopia

**Permanent podiatric licensure:**

Bosia, Katheryn June

The motion of the Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the following six applicants, listed along with their state of principal licensure, were granted permanent medical licensure through an Interstate Medical Licensure Compact Commission (IMLCC) application between the July and September Board meetings:

Behrens, Jacob M. Wisconsin
Dillard, Shelia Diane Alabama
Krainin, Joseph Gordon Kansas
McRae, Gina Alexandra Alabama
Moore, Joyce Geneva Kansas
Yovichin, Mark Daniel Idaho
Also, the Board has received eight requests for Letters of Qualification (LOQ) to be issued by the Board as the state of principal licensure. Of these, three applications are pending completion and two may be ineligible for a LOQ. LOQs were issued to:

Clarke, Gregory Dresel  
Lambert, Matt Wade  
Sethi, Sushil M.

Dr. Rahim moved that the Board accept and ratify the report of the Licensure Committee. The motion carried.

Dr. Challa provided the report of the Complaint Committee, which met on Sunday, September 10, 2017. Dr. Challa reported the following activities:

**CLOSURES**

<table>
<thead>
<tr>
<th>Number</th>
<th>Name</th>
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<tbody>
<tr>
<td>17-130-A</td>
<td>Magdi Ahmed Salah El Din Abbas, M.D.</td>
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<tr>
<td>17-127-J</td>
<td>Shelly Rene Bailey, M.D.</td>
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<td>17-96-P</td>
<td>Charles David Burtner, M.D.</td>
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<tr>
<td>17-13-W</td>
<td>John Michael Coleman, M.D.</td>
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<td>16-62-W</td>
<td>Prafull Kanaiyalal Dave, M.D.</td>
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<td>17-64-W</td>
<td>John Thomas Dorsey, III, M.D.</td>
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<tr>
<td>17-65-W</td>
<td>Thomas Alan Durnell, M.D.</td>
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<td>17-99-J</td>
<td>Warren Lee Grace, III, M.D.</td>
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<tr>
<td>17-132-B</td>
<td>Gina Jereza-Harris, M.D.</td>
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<tr>
<td>17-128-J</td>
<td>James Christian Jensen, M.D.</td>
</tr>
<tr>
<td>17-136-W</td>
<td>Jonathan Michael Johnson, M.D.</td>
</tr>
<tr>
<td>17-111-W</td>
<td>Mohamad Samah Kalou, M.D.</td>
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<tr>
<td>17-133-P</td>
<td>Robby Lee Keith, M.D.</td>
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<td>17-119-L</td>
<td>Barrett Asher Louden, M.D.</td>
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<td>17-134-C</td>
<td>Charles Lye, M.D.</td>
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<td>17-98-U</td>
<td>Earl Lynn Nelson, M.D.</td>
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<tr>
<td>16-153-W</td>
<td>Michael Vincent O’Keefe, M.D.</td>
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<tr>
<td>17-125-N</td>
<td>Govindbahai Mafatlal Patel, M.D.</td>
</tr>
<tr>
<td>17-113-W</td>
<td>Avinash Govind Ram Purohit, M.D.</td>
</tr>
<tr>
<td>17-121-J</td>
<td>Ammar Akram Shammaa, M.D.</td>
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</tbody>
</table>
17-126-J    Anthony Frank Sibley, M.D.
17-129-H    Heather Michelle Skeens, M.D.
17-28-W     Sue Ann Westfall, M.D.
16-160-W    Robert Cheng Yee, M.D.

INITIATED COMPLAINTS

17-164-W
17-165-W
17-166-W
17-167-W
17-168-W

WITHDRAWAL OF PREVIOUSLY INITIATED COMPLAINT

17-137-W

FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF
DISQUALIFICATION UNDER WV CODE §30-3-14

17-147-W    Paul Webber Burke, Jr., M.D.

CONSENT ORDERS

Dr. Challa requested that the Board authorize the Complaint Committee to move forward with offering four Consent Orders and/or Amended Consent Orders in ongoing Complaint Committee matters. The motion of the Complaint Committee was given by Dr. Challa, and the motion carried.

FULLY EXECUTED CONSENT ORDERS

Dr. Challa reported that since the July meeting, fully executed Consent Orders have been entered with respect to the following licensees:
Jamie Hall-Jasper, D.P.M. – On July 10, 2017, Dr. Hall-Jasper entered into a Consent Order that imposes a public reprimand and places her license in probationary status for three years. During her period of probation, Dr. Hall-Jasper is subject to specific controlled substance prescribing restrictions and limitations. Additionally, she must maintain a controlled substance prescription log, she is subject to prescription and medical record monitoring by the Board, and she must complete continuing education as identified in her Consent Order.

James Prommersberger, D.P.M. – On July 10, 2017, Dr. Prommersberger entered into a Consent Order that imposed a three-year stayed suspension and a three-year period of probation on his West Virginia pediatric license. During his period of probation, Dr. Prommersberger may not treat chronic pain with opioid medications and is further subject to specific controlled substance prescribing restrictions and limitations. Additionally, he must maintain a controlled substance prescription log, he is subject to prescription and medical record monitoring by the Board, and he must complete continuing education as identified in his Consent Order.

Marc Spelar, M.D. – On August 30, 2017, Dr. Spelar entered into a Consent Order with the Board that temporarily prohibits him from practicing medicine in West Virginia during the pendency of a current Board investigation. Dr. Spelar is prohibited from engaging in any form of clinical medicine, including all patient care/end or treatment of any kind. Dr. Spelar is strictly prohibited from administering, ordering, dispensing, or prescribing any and all medications.

All Consent Orders are available on the Board’s website.

Dr. Challa reported that the Complaint Committee voted to adopt a policy regarding the review of complaints filed against board members, subject to ratification by the Board. Under the policy, in order to avoid any appearance of impropriety, all complaints against board members would be sent to an independent consultant for review. The motion of the Complaint Committee was given by Dr. Challa, and the motion carried.
Dr. Challa moved that the Board accept and ratify the report of the Complaint Committee, and the motion carried.

There being no further business to consider, the meeting adjourned.

Ahmed D. Faheem, M.D., D.L.F.A.P.A.  
President

Rahul Gupta, M.D., M.P.H, M.B.A., F.A.C.P.  
Secretary
Agenda Items:

- Strategic Plan
- Mission Statement
- Vision Statement
WEST VIRGINIA BOARD OF MEDICINE
Strategic Planning Meeting Minutes
October 7, 2017

A West Virginia Board of Medicine strategic planning meeting was held at 101 Dee Drive, Charleston, West Virginia, on the 7th day of October 2017 at 10:00 a.m.

The following Board members were present for the meeting:

Ahmed D. Faheem, M.D., D.L.F.A.P.A., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P., Secretary
Reverend O. Richard Bowyer

The following Staff members were present for the meeting:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame
Sheree Thompson
Leslie A. Thornton, CMBI

The following AlignHR representatives were present for the meeting:

Zachary T. Abraham, MSIR, SPHR, SHRM-SCP
Leonard “Lenny” Hannigan, II

Dr. Faheem called the meeting to order and thanked board and staff members for completing the online surveys that were sent to members in advance of today’s meeting. Additionally, Mr. Spangler thanked members for their responsiveness to the surveys, and for their attendance at today’s meeting.

Mr. Hannigan and Mr. Abraham provided an overview of the Value Statement Scoring Summary for the West Virginia Board of Medicine, and assisted members with establishing the following four preliminary core values for the Board:
1. Public Protection (Compliance)
2. Integrity (Dedicated and Fair)
3. Accountability (Accuracy)
4. Trust (Reliability and Respect)

Following establishment of the primary core values, Mr. Hannigan and Mr. Abraham worked with members to develop a preliminary mission statement for the Board.

The following Board members joined the meeting at noon:

   Rusty Cain, D.P.M.
   Harry Duncan, M.D.
   Beth Hays, M.A.
   Cheryl Henderson, J.D.
   Carrie Lakin, D.P.M.
   Dave Mullins, M.D.
   Mustafa Rahim, M.D.
   Asish P. Sheth, M.D.
   Wes Steele, M.D.
   Matthew Upton, M.D.
   K. Dean Wright, P.A.-C.

Mr. Abraham provided a recap of the morning session, and shared with the members who recently joined the meeting the preliminary core values and the preliminary mission statement developed earlier in the day. Members deliberated regarding the mission statement, and developed a working draft mission states that provides:

The West Virginia Board of Medicine is the State agency charged with protecting the health and safety of the public by licensing, regulating and oversight of medical doctors, podiatric physicians, and collaborating physician assistants.
Mr. Abraham assisted members in developing a strengths, weaknesses, opportunities and threats (SWOT) analysis. The SWOT analysis was then used by members to develop the following draft vision statement for the Board:

We will become a national leader in innovative health professional oversight.

AlignHR staff guided members to develop the following three preliminary mutually accountable goals for the Board:

1. Protect public and health safety by efficiently, effectively and fairly regulating the practice of medicine.
2. Proactively develop and maintain productive relationships with other health professions to facilitate consistency in the delivery of health care services.
3. Evaluate processes

There being no further business to consider, the meeting adjourned.

Ahmed D. Faheem, M.D., D.L.F.A.P.A.  
President

Rahul Gupta, M.D., M.P.H, M.B.A., F.A.C.P.  
Secretary
WEST VIRGINIA BOARD OF MEDICINE
Board Meeting Agenda
November 13, 2017 at 9:00 a.m.

CALL TO ORDER

Announcements

Approval of Minutes

- September 11, 2017
- October 7, 2017

Committee and Staff Reports, Discussion and Action:

- Consideration of Potential Consent Order
- Executive/Management Committee
- Legislative Committee
- Board Attorney Report
- Physician Assistant Committee
- Licensure Committee
- Complaint Committee

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Board Meeting Minutes
November 13, 2017

A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 13th day of November 2017 at 9:00 a.m.

The following Board members were present for the meeting:

  Ahmed D. Faheem, M.D., D.L.F.A.P.A., President
  Kishore K. Challa, M.D., F.A.C.C., Vice President
  Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P., Secretary
  Reverend O. Richard Bowyer
  Timothy Donatelli, D.P.M.
  Harry Duncan, M.D.
  Reverend Janet Harman
  Carrie Lakin, D.P.M.
  David Mullins, M.D.
  Victoria Mullins, P.A.-C.
  Mustafa Rahim, M.D.
  Ashish Sheth, M.D.
  Wes Steele, M.D.
  Matthew Upton, M.D.
  Russell O. Wooton
  K. Dean Wright, P.A.-C.

The following Staff members were present:

  Mark A. Spangler, M.A.
  Jamie S. Alley, Esq.
  Greg S. Foster, Esq.
  Jamie C. Frame
  Leslie A. Thornton, CMBI
  Andy Wessels

The following consultant from the Attorney General’s Office was present:

  Katherine Campbell, Esq.
Dr. Faheem called the meeting to order. Dr. Rahim moved that the September 11, 2017 Board meeting minutes be approved. Reverend Bowyer seconded, and the motion carried. Dr. Rahim moved that the October 7, 2017 strategic planning meeting minutes be approved. Dr. Lakin seconded, and the motion carried.

Dr. Faheem announced the recent appointment of the following board members: Timothy Donatelli, D.P.M. of Beckley; Reverend Janet Harman of Charleston, Victoria Mullins of Charleston; and Russell O. Wooton, Esquire of Beckley. He welcomed these members to the Board.

Dr. Faheem announced that the Board received correspondence from former member, Cheryl Henderson, J.D., thanking board and staff members for their assistance through the years, and wishing the Board the best of luck in the coming years.

Dr. Faheem reminded everyone that following today’s board meeting, Mike Hall or Photogafix will be onsite taking photographs of the newly appointed members as well as a group photograph of all members.

Dr. Faheem announced that the West Virginia State Auditor’s Conference will be held on November 29, 2017 at the Marriott Hotel in Charleston, West Virginia. All Board members are required by statute to attend this annual conference at least once during their tenure. Any members who are interested in attending the conference this year should see Mr. Spangler following the meeting.

Mr. Wooton joined the meeting at this time, and Dr. Faheem welcomed him to the Board.
Dr. Faheem announced that travel and per diem documents are on the table in front of each member. Once completed, the documents should be given to Ms. Frame.

Dr. Faheem announced that a former board member, M.K. Hasan, recently passed away. The Board greatly appreciates Dr. Hasan’s service and contributions to the Board of Medicine. On behalf of the Board, Mr. Spangler sent a letter of condolence to Dr. Hasan’s family. A moment of silence was held in honor of Dr. Hasan.

Prior to today’s meeting, a Potential Consent Order, which has been signed by Mitchell Simon Finkel, was made available for members to review. Ms. Campbell reported to the Board that having found probable cause to institute disciplinary charges against Dr. Finkel, on March 30, 2017, the Board served him with a Complaint, Notice of Hearing, Pre-Hearing Deadlines and Protective Order with regard to complaint numbers 15-96-W and 16-19-H. Unrelated to the facts and circumstances which formed her complaint with the Board, the patient who filed complaint number 16-19-H against Dr. Finkel passed away unexpectedly. As a result of her untimely passing, the complainant is unable to provide sworn testimony in support of her complaint or to be cross-examined by Dr. Finkel regarding her allegations. In light of the facts and circumstances set forth above, Dr. Finkel has agreed to enter into a Consent Order with the Board to resolve all matters currently pending before the Board which relate to him, including complaint numbers 15-96-W and 16-19-H. Ms. Campbell reported that the Complaint Committee recommends that the Board enter into the Consent Order signed by Dr. Finkel on October 2, 2017, to resolve all matters currently pending before the Board with respect to Dr. Finkel. The motion of the Complaint Committee was given by Ms. Cambell, and the motion carried. Ms. Campbell left the meeting at this time and was not present for the remainder of the meeting.
Dr. Faheem reported that the Executive/Management Committee met yesterday morning, Sunday, November 12, 2017, at which time the Committee approved the fiscal report and purchasing card transactions for the months of September and October 2017.

Dr. Faheem reported that the Committee reviewed the Board’s draft mission statement, vision statement and core values that were established during the October 7, 2017 strategic planning meeting. Prior to today’s meeting, a copy of the draft mission statement, vision statement and core values was made available for members to review. Dr. Rahim moved that the Board adopt the mission statement, vision statement and core values as presented. Mr. Wright seconded, and the motion carried.

The Committee recommended that the Board approve the following 2018 Board meeting dates:

January 8, 2018  
March 12, 2018  
May 7, 2018  
July 9, 2018  
September 10, 2018  
November 5, 2018

Reverend Bowyer moved that the 2018 Board meeting dates be approved as presented. Dr. Duncan seconded, and the motion carried.

Dr. Faheem reported that the Committee reviewed and discussed correspondence received inquiring about insurance company medical malpractice reporting requirements. The Committee authorized staff to respond to the inquiry indicating that all judgments, all settlements, and any payment made on behalf of a Board of Medicine licensee, regardless of whether the payment was made pre-or-post suit, needs to be reported to the Board.
Dr. Faheem reported that the Committee reviewed and discussed correspondence received seeking an opinion regarding whether certain telemedicine encounters involving solely asynchronous interactions between a medical provider and a new patient are permissible under West Virginia telemedicine regulation. In reviewing the correspondence, the Committee was not able to determine the asynchronous interaction platforms that the letter was referencing. The Committee authorized staff to respond to the letter indicating that West Virginia Code §30-3-13a(c) establishes the methods through which a physician patient relationship can be established.

Dr. Faheem reported that the Committee reviewed correspondence received from the Mercer County Board of Health, inquiring whether a physician can issue a standing order for a medical assistant to administer flu vaccinations. The Board of Medicine will refer the Mercer County Board of Health to Ms. Amy Atkins, Director of the West Virginia Center for Local Health.

Dr. Faheem reported that the Committee reviewed correspondence received from the West Virginia Board of Registered Professional Nurses indicating that the Board of Medicine’s complaint with regard to Krystal Tawney, APRN, has been dismissed.

Dr. Faheem moved that the Board accept and ratify the report of the Executive / Management Committee. The motion carried.

Dr. Faheem reported that the Legislative Committee met yesterday, Sunday, November 12, 2017, at which time Mr. Spangler reported that the Board’s Emergency Rule 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants, became effective on October 20, 2017. The companion legislative rule is scheduled to be considered by the Legislative Rule-Making Review Committee (LRMRC) during the interim Committee meetings which will be held on December 3-5,
2017. LRMRC counsel has suggested that the Board consider modifying the rule to remove the requirement that licensees report their NCCPA status to the Board. The Legislative Committee is not in favor of removing this requirement; however, the Board will comply if the LRMRC requires this change.

Dr. Faheem reported that the Committee reviewed and discussed correspondence received from Robert Whitler, Vice President of Government and Community Affairs at Charleston Area Medical Center, requesting that the Board consider issuing educational permits to residents. The West Virginia Board of Osteopathic Medicine currently issues educational permits to residents. The Legislative Committee is in favor of issuing such permits, but will need to identify and define the parameters of the permits. The Committee recommended that the Board authorize staff to research resident educational permits, and draft a bill for the Committee and the Board to review at the January 2018 meeting, for possible introduction during the 2018 legislative session. The motion of Legislative Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that the Board has previously expressed an interest in changing the burden of proof in Board disciplinary matters from clear and convincing evidence to a preponderance of evidence standard, which would align the Board of Medicine and the Board of Osteopathic Medicine. Discussion on this issue has occurred with legislative counsel, who suggests cleaning up section 14 in the process. The Committee recommended that the Board authorize staff to work collaboratively with legislative counsel on draft legislation to modify West Virginia Code §30-3-14 to include a change in the burden of proof and language clean-up, with the hope that the legislation will be introduced during the 2018 session. The motion of the Legislative Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that the Committee discussed authorization for Board investigators to carry a firearm. Discussion ensued and Dr. Gupta asked Ms. Thornton if
in the last thirty days while carrying out her duties as an investigator for the Board she had encountered any events in which an individual was armed. Ms. Thornton answered yes. Following discussion, the Committee recommended that the Board authorize staff to seek legislation that will allow at least one board investigator to carry a firearm once they have received appropriate training. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that physician advertising and medical cannabis will likely be topics of interest in the 2018 legislative session. Mr. Wessels will monitor the upcoming legislative session and keep the Board apprised of legislative matters.

Mr. Wright moved that the Board accept and ratify the report of the Legislative Committee. Dr. Steele seconded, and the motion carried.

Ms. Alley reported that she and Mr. Foster recently attended the Federation of State Medical Boards annual Board Attorney Workshop, and that it was a productive session.

Ms. Alley reported that the matter of Shivkumar Iyer, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent is currently going through the appeal process, and is currently pending before the West Virginia Supreme Court of Appeals.

Ms. Alley reported on the matter of Omar Khalid Hasan, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent, Civil Action No. 17-AA-53. Dr. Hasan filed a Petition for Appeal of the Board’s Final Order, and a Motion for Stay pending the appeal in the Circuit Court of Kanawha County. The Board’s Order was stayed, and the licensee is currently practicing. The matter has been fully briefed, and proposed orders have been submitted to the Court for consideration.
Ms. Alley reported that there is currently a hearing scheduled to convene January 9-11, 2018. There are two additional matters which will likely be set for hearing in 2018.

Mr. Wright provided the report of the Physician Assistant Committee, which met on Saturday, November 11, 2017.

Mr. Wright reported that at the September 11, 2017 Board meeting, the Physician Assistant Committee recommended, and the Board approved, that Richard Santostefano, Sr., P.A.-C., be approved for physician assistant licensure through a Consent Order with the following terms: (1) that any practice agreement submitted delineating advanced duties must be reviewed by the Physician Assistant Committee prior to authorization; (2) that Mr. Santostefano practice under direct supervision for a minimum of six months; and (3) that Mr. Santostefano’s supervising/collaborating physician send quarterly status reports updating the Committee on his progress and a recommendation regarding when direct supervision should be lifted. Mr. Santostefano entered into the proposed Consent Order with the Board on October 4, 2017.

Mr. Wright asked Board members to review the list of physician assistants up for action, and to advise of any conflicts. Mr. Wright advised the Board that one candidate up for licensure was inadvertently omitted from the list. Mr. Wright identified the candidate as Cintia Henriques Hultz. No conflicts were declared.

The Physician Assistant Committee recommended that the following applicants be approved for physician assistant licensure:

Bryant, Jr., George Burton
Buch, Sarah Elizabeth
Burress, Jr., James Keith
Costa, Lyndsey Catherine
Dillon, Kelsey Lynn
Dooley, II, Tommy Dorsey
Gaffney, Sean Michael
Galvan, Leonard Bernard
Hill, Adam Nathaniel
Holtz, Eric A.
Hultz, Cintia
Krull, Jami Lee
Lee, Holly Shae
MacDowell, Krystal Marie
McCune, Ryan Alexander
Murphy, Sr., Ronald J.
Osbourn, Kaitlin Clark
O’Dell, Pamela Michelle
O’Kernick, Ashlee Kristine
Perry, Chadwick Jay
Prado, Kelley Kathleen
Price, Stephanie Nicole
Ramsey, Derek Landon
Russell, Douglas Kendal
Scarberry, Kaitlin Christine
Stewart, Brandon Joseph
Yanociak, Kyria Grace
Young, Tyler John

The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

The Physician Assistant Committee recommended that Kaleb Paul Rush, P.A.-C. and Anna C. Stout-Tuckwiller, P.A.-C. be approved for reinstatement of licensure. The motion of the Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that two applicants appeared before the Physician Assistant Committee to discuss their applications. Based upon the Committee’s review of the relevant applications, and its discussion with the applicants, the Committee recommended that the application of Allison Ann Brown, P.A.-C., be placed on hold pending receipt of evidence that Ms. Brown has complied with an Order of the Delaware Board relating to her controlled substance registration in that state. The Committee further recommended that Melissa
Fabiola Culver, P.A.-C., be approved for physician assistant licensure. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that Jessica Faye Dunkley, P.A.-C., entered into a Consent Order with the Board on April 4, 2017, which restricted her practice as a physician assistant to direct supervision for a minimum period of six months. Ms. Dunkley’s collaborating physician has submitted documentation recommending lifting the direct supervision. The Physician Assistant Committee recommended issuing an Order terminating the Consent Order. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that the Committee reviewed and discussed the Consent Order of Tyson E. Bubnar, P.A.-C., which was entered with the Board on June 26, 2015. Staff will continue monitoring the Consent Order to determine continued compliance and determine the potential conclusion date of the probationary period.

Mr. Wright reported that the Committee discussed the requirement in the Board’s proposed legislative rule 11 CSR 1B, *Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants*, that physician assistants keep the Board informed of current NCCPA status, even though continued NCCPA certification is no longer a requirement of license renewal. The Committee indicated that NCCPA certification status is important information to collect for a number of reasons.

Mr. Wright reported that the Committee discussed the enactment of the Emergency Rule, 11 CSR 1B, *Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants*, which became effective on October 20, 2017.

The Committee recommended that the following revised forms be approved:

- Practice Agreement and Instructions
- Appendix A
- Appendix B
• Additional instructions for the Delegation of Medication Assisted Treatment (MAT)
• Notification of Termination of a Practice Agreement
• Prescriptive Authority Amendment Form
• 2017 Physician Assistant Reinstatement of Licensure Application.

The motion of the Physician Assistant Committee was given by Mr. Wight, and the motion carried.

Mr. Wright reported that the Committee discussed the delegation of duties in a hospital setting, and how to facilitate full utilization of physician assistants in this practice setting. A physician assistant may only be delegated advanced duties which are within the scope and customary practice of the collaborating physician. The Committee and staff will continue to monitor this issue to determine if there may be a future need to consider a legislative fix for institutional practice.

Mr. Wright reported that the Committee reviewed an inquiry regarding collaborating physician co-evaluation of new patients and if direct supervision is required for ultraviolet light therapy. The Committee concluded that ultraviolet light therapy is a core duty for which co-evaluation is not routinely required.

Mr. Wright reported that the Committee reviewed an inquiry regarding antineoplastic restrictions and directed staff to respond that no changes have occurred in the formulary regarding antineoplastics.

Mr. Wright reported that the Committee reviewed a proposed practice agreement for sufficient evidence of advanced duty experience/training that included cryosurgery. The Committee directed staff upon the appropriate follow-up. Cryosurgery will be added to Appendix A as a Committee approved advanced duty.
Mr. Wright reported that Board staff have authorized sixty-four (64) practice agreements for the period of September 11, 2017 through November 10, 2017. Additionally, fifty-nine (59) alternate supervisors were designated. Staff also processed thirty-eight (38) Prescriptive Authority Amendment Forms for currently authorized practice agreements.

The Physician Assistant Committee recommended that the Board accept and ratify the report of the Physician Assistant Committee. The motion of the Committee was given by Mr. Wright, and the motion carried.

Dr. Rahim delivered the report of the Licensure Committee, which met on Saturday, November 11, 2017.

Dr. Rahim reported that on October 26, 2017, Anthony Todde Securo, M.D. and the Board entered into a Consent Order which established the terms of the reactivation of his license. A copy of the Consent Order is available on the Board’s website, and the terms of the Consent Order were reported in the minutes of the Board’s July 2017 meeting.

Dr. Rahim reported that six applicants appeared before the Licensure Committee to discuss their applications. Based upon the Committee’s review of the relevant applications, and its discussion with the applicants, the Committee recommended that Kayla Donn Halsey, M.D., Adam Hubert Schindzielorz, M.D. and Scott Wilbert Caldwell, M.D. be approved for permanent medical licensure, and that Robert Roy Harris, M.D. and Robert Paul Kocher, M.D. be approved for permanent medical licensure pending payment of the patient injury compensation fund assessment fee. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.
Dr. Rahim reported that the permanent podiatric licensure application of Amy Alise Davidson, D.P.M. was placed on hold pending receipt of additional information.

Dr. Rahim reported that the Licensure Committee reviewed and discussed ten (10) applications. Base thereupon, the Committee made the following recommendations:

Approve the following applicants for permanent medical licensure:
Ahmed Rabie Abdelkarim, M.D.
Manuel Carlos Guerrero, M.D.
Julie Bess Frank, M.D.

Accept the total hours of continuing medical education as satisfactory and approve Charles Winters, Jr., M.D. for reactivation of permanent licensure pending receipt of DC license verification and payment of the patient injury compensation fund assessment fee.

Accept the first two years of medical school as satisfactorily verified and approve Beverly Ann Carl, M.D. for permanent medical licensure.

The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

The Committee recommended that the Board accept Saeed Fatenjać M.D.’s request to withdrawal his application. The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the Committee will maintain the applications of Michael Patrick Parsons, M.D. and Gianna Joanne Link, M.D. pending additional information / follow-up action from the applicants.
Dr. Rahim reported that Gilbert Niles Clinton, II, M.D. and Kelsey Aileen Musgrove, M.D. will be invited to appear before the Committee in January 2018.

Dr. Rahim asked Board members to review the list of physicians up for action and to advise of any conflicts. No conflicts were declared.

The Committee recommended that the Board approve the following applicants for licensure:

Abraham, Andrew Jacob
Brown, Sherry Bernita
Chinbuah, Egya Nyameke
Collins-Gibbard, Roslinde Mary
Corman, Adam Ransford
DeBerry, Jason Wayne
Diamond, Amy R.
Din, Farid Ud
Doumit, Jimmy
Dunkle-Blatter, Stephanie Erlynn
Eckert, Thomas Francis
Egli, Kenneth James
Fogle, William Albert
Fowler, Mariecken Verspoor
Friehling, Ted David
Gates, James Lawrence
Gounder, Celine Rani
Gross, Michal
Howell, Keith Andre
Levine, Myron Arnold
Marcovici, Jacob
Marcuccio, Elisa
McLain, Kelly Lynn
McQuade, Elizabeth Anne
Mehyar, Lubna Shafiq Naim
Mitros, Mark Michael
Monastiriotis, Spyridon
Moore, Fletcher Brady
Murphy, Dewey Scott

Oneal, Cindy Marie
Overton, III, Clayton Justus

Patel, Paulina Narendra
Patterson, Eltanya Angelita
Piris, Adriano
Poole, Edward Charles
Pulido, Bernard Joseph Navarro

Ramos, Peter
Reddy, Srikar Thummala

Sadia, Umama
Salas, Stephanie Ann
Sasidharan Nirmala, Nishanth
Scott, IV, Frank Duncan
Seaman, David Edward
Shanlikian, George Harry
Sharif, Khalid Saud
Sheikh, Zubeda Begum
Shiflett, Brandon Scott
Slusher, Laura Austin

Turner, Meghan Thompson
Turnier, Anne-Marie

Verhoeven, Pieter Alexander
Vucelik, Andrew William

Weir, Robert Edward Peter
White, Kevin Daniel
Whitley, Danielle
Williams, Carlin Arel

Yeh, David Li-Ten
Young, Rebekah Lynn

**Permanent medical licensure pending receipt of payment of the patient injury compensation fund assessment fee:**

Jovanovich, Alexander
Moore, Carisa Hines
Wang, Clifford Tau

**Permanent medical licensure pending receipt of Illinois license verification and payment of the patient injury compensation fund assessment fee:**

McCleester, Sarah M.

**Reactivation of permanent medical licensure:**

Hutchens, Kelli Ann
Samanie, David Keith

The motion of the Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the following nine applicants, listed along with their state of principal licensure, were granted permanent medical licensure through an Interstate Medical Licensure Compact Commission (IMLCC) application between the September and November 2017 Board meetings:

Crepps, Jr., Joseph Thomas  Wisconsin
Gard, Narendra  Illinois
Jacobs, Richard Randall  Illinois
Kumar, Mudhuresh  Illinois
Marks, Allan Steven  Wyoming
Marvin, Leigh Jennifer  Kansas
Pandit, Meenakshi  Arizona
Rudy, George Barrett       Wyoming
Wantuck, James Matthew     Wyoming

Also, the Board has received seven requests for Letters of Qualification (LOQ) to be issued by the Board as the state of principal licensure. Of these, three applications are pending completion.

Letters of Qualification were issued to Jennifer Lynn Brown, M.D. and Andrew Christian Retzinger, M.D.

Letters of Qualification Denial were issued to Adam Jared Kaplan, M.D. and Hussain El-Sayed El-Khatib, M.D..

Dr. Rahim reported that the Committee discussed FBI guidelines regarding communicating the results of a criminal record check with applicants. Staff will continue to seek additional information and clarification to resolve this issues in a manner consistent with other medical Boards across the country.

Dr. Rahim reported that the Committee provided staff with guidance for responding to an inquiry regarding podiatric scope of practice, and an inquiry from a former licensee regarding change of license status.

Dr. Rahim moved that the Board accept and ratify the report of the Licensure Committee. The motion carried.

Dr. Challa reported that complaint numbers 17-145-W, 17-146-W and 17-147-W were initiated at a special meeting of the Complaint Committee, which was held on August 3, 2017.
Dr. Challa reported that complaint number 17-171-W was initiated at a special meeting on the Complaint Committee, which was held on September 28, 2017.

Dr. Challa provided the report of the Complaint Committee, which met on Sunday, November 12, 2017. Dr. Challa reported the following activities:

**CLOSURES**

<table>
<thead>
<tr>
<th>Number</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>17-58-W</td>
<td>Ellen Renee Brown, M.D.</td>
</tr>
<tr>
<td>17-61-W</td>
<td>Juliet Anne Cha, M.D.</td>
</tr>
<tr>
<td>16-129-W</td>
<td>Adam Joseph Corcovilos, M.D.</td>
</tr>
<tr>
<td>17-116-W</td>
<td>Touraj Farid, M.D.</td>
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<tr>
<td>17-143-W</td>
<td>Warren Lee Grace, III, M.D.</td>
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<tr>
<td>17-120-W</td>
<td>Bruce Fredric Haupt, M.D.</td>
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<tr>
<td>17-73-W</td>
<td>Suzanne Holroyd, M.D.</td>
</tr>
<tr>
<td>17-89-C</td>
<td>Suzanne Holroyd, M.D.</td>
</tr>
<tr>
<td>17-152-B</td>
<td>Yaser Homsi, M.D.</td>
</tr>
<tr>
<td>17-153-C</td>
<td>Thomas Martin Jung, M.D.</td>
</tr>
<tr>
<td>17-139-W</td>
<td>Kathryn A. Knodel, M.D.</td>
</tr>
<tr>
<td>17-150-M</td>
<td>Charles Lye, M.D.</td>
</tr>
<tr>
<td>17-151-M</td>
<td>Sandra K. May, P.A.-C</td>
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<tr>
<td>17-131-S</td>
<td>Prasadaraao B. Mukkamala, M.D</td>
</tr>
<tr>
<td>17-162-M</td>
<td>Rahmet Muzaffer, M.D.</td>
</tr>
<tr>
<td>17-85-W</td>
<td>Alexander Arpad Nagy, M.D.</td>
</tr>
<tr>
<td>17-154-O</td>
<td>Kelly Raphael Nelson, M.D.</td>
</tr>
<tr>
<td>17-124-C</td>
<td>Gerard Joseph Oakley, M.D.</td>
</tr>
<tr>
<td>17-167-W</td>
<td>Ramanathan Padmanaban, M.D.</td>
</tr>
<tr>
<td>17-81-W</td>
<td>Ajai K. Sandhir, M.D.</td>
</tr>
<tr>
<td>17-82-W</td>
<td>Ujjal Singh Sandhu, M.D.</td>
</tr>
<tr>
<td>17-95-J</td>
<td>Robert Dale Santrock, M.D.</td>
</tr>
<tr>
<td>17-148-D</td>
<td>Letitia Elaine Tierney, M.D.</td>
</tr>
<tr>
<td>17-142-Y</td>
<td>Robert Brian Wade, M.D.</td>
</tr>
<tr>
<td>17-144-M</td>
<td>Rajwardhan Harishcandra Yadav, M.D.</td>
</tr>
</tbody>
</table>

**INITIATED COMPLAINTS**

- 17-180-W
- 17-181-W
17-182-W
17-183-W
17-184-W
17-185-W
17-186-W
17-187-W
17-188-W
17-189-W
17-190-W
17-191-W
17-192-W
17-193-W

FINDING OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF
DISQUALIFICATION UNDER WV CODE §30-3-14

17-122-W  Marc Jonathan Spelar M.D.

CONSENT ORDERS

Dr. Challa requested that the Board authorize the Complaint Committee to move forward with offering four Consent Orders and/or Amended Consent Orders in ongoing Complaint Committee matters. The motion of the Complaint Committee was given by Dr. Challa, and the motion carried.

FULLY EXECUTED CONSENT ORDERS

Dr. Challa reported that since the September meeting, fully executed Consent Orders have been entered with respect to the following licensees:

Riad S. Al-Asbahi, M.D.- On September 11, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $1,850.00 and was required to complete 18.5 hours of CME to satisfy his CME deficiency.
Ron Bonfiglio, M.D. – On October 5, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Frederick Brautigan, M.D.- On September 11, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Paul Webber Burke Jr., M.D. – On October 5, 2017, the licensee entered into a Consent Order with the Board for non-compliance with the West Virginia Medical Professional Health Program. Dr. Burke’s medical license shall remain on probationary status and subject to his Amended Consent Order dated April 16, 2014, as he winds down his medical practice in advance of surrendering his license to the Board, effective December 31, 2017.

Garry Wayne Burkholder, M.D.- On September 11, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

James Butterworth, M.D.- On September 8, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.
Robert A. Caveny, M.D.- On September 25, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Anup Kumar Das, M.D.- On October 5, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Russell Andrew DeGroote, M.D.- On September 11, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Antonio Domacoal, M.D.- On September 25, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Johnny Dy, M.D.- On September 25, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.
Cheryl Pixley Entress, M.D.- On September 28, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Miechia Esco, M.D.- On October 7, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Scott Walker Findley, M.D.- On November 1, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Stephen Flax, M.D.- On October 5, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Kelby Frame, M.D.- On September 28, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.
Rochelle Goldberg, M.D.- On September 28, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Ryan Christopher Hall, M.D.- On September 25, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Douglas Grover Harrison, M.D.- On September 28, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Bethany Morris Honce, M.D.- On September 25, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Manish Jhawar, M.D.- On October 24, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $3,800 and was required to complete 38 hours of CME to satisfy his CME deficiency.

Sophie Lanciers, M.D.- On October 7, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation
during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Lap-Yang Joseph Li, M.D.- On September 25, 2017, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Anita Petitte, P.A.-C.- On October 24, 2017, the licensee entered into a Consent Order with the Board which Publicly Reprimanded the licensee for knowingly misrepresenting her prescribing status on her 2017 renewal application.

All Consent Orders are available on the Board’s website.

Dr. Challa moved that the Board accept and ratify the three reports of the Complaint Committee, and the motion carried.

There being no further business to consider, the meeting adjourned.

Ahmed D. Faheem, M.D., D.L.F.A.P.A. President

Rahul Gupta, M.D., M.P.H, M.B.A., F.A.C.P. Secretary
CALL TO ORDER

Public Comments

Announcements

Approval of Minutes - November 13, 2017

Committee and Staff Reports, Discussion and Action:

- Executive/Management Committee Report and Recommended Actions
  - Fiscal Reports / Purchasing Card Transactions for November and December 2017
  - Review of Board Policies and/or Procedures and Proposed Updates
    - Resolution Concerning Conflicts of Interest
    - Procedure to be Followed by Persons Desiring to Address the Board
  - WV Ethics Commission Advisory Opinion Regarding the Use of Titles and Photographs in Education Materials
  - Convenience Fee Associated with Credit Card Payments
  - Review of Uniform Application for Physicians and Associated Fees
  - Nomination of Mr. Spangler as an FSMB Fellow
  - Update, Review and Follow-up Regarding Strategic Planning
  - Report of Other Discussion Which Occurred at the January 7, 2018 Committee Meeting

- Legislative Committee Report and Recommended Actions
  - Board of Medicine Legislative Rule 11 CSR 1B
  - Proposed 2018 Interim Legislative Committee Meeting Dates
  - Authorization of Legislative Committee to Act on Behalf of the Board During the 2018 Legislative Session
  - Proposed Rules Regarding Medical Cannabis
- Proposed Bill Regarding Reorganization of DHHR
- Potential Legislative Topics in 2018
  - Physician Resident License / Educational Permit
  - Burden of Proof in Disciplinary Proceedings/Opioid Reduction Act
  - Authorization/Certification to Carry Firearms for Board Investigators
  - Physician Advertising
  - RN/LPN Board Consolidation Bill and Related Matters
  - Prescribing Authority for Psychologists
- Report of Other Discussion Which Occurred at the January 7, 2018 Committee Meeting

- **Board Attorney Report**
  - Update on Pending Litigation Matters
    - *Shivkumar Iyer, M.D. v. West Virginia Board of Medicine*
    - *Omar Khalid Hasan, M.D. v. West Virginia Board of Medicine*
    - Report on Number and Dates of Upcoming Public Hearings

- **Physician Assistant Committee Report and Recommended Actions**
  - Consent Order Update
  - Committee Recommendations on Licensure Applicants (Physician Assistants)
    - Appearances
    - Discussions
    - Other New Applicants
    - Reinstatement / Reactivation Applicants
  - Report of Other Discussion Which Occurred at the January 6, 2018 Committee Meeting

- **Licensure Committee Report and Recommended Actions**
  - Consent Order Update
  - Committee Recommendations on Licensure Applicants (Medical Doctors and Podiatric Physicians)
    - Appearances
    - Discussions
    - Other New Applicants
    - Reinstatement / Reactivation Applicants
- Report of IMLC Licensure Statistics from November 2017 Board meeting through the present
- Report of Other Discussion Which Occurred at the January 6, 2018 Committee Meeting

- **Complaint Committee Report and Recommended Actions**
  - Complaint Closures
  - Complaints Initiated by the Complaint Committee
  - Findings of Probable Cause to Substantiate Charges of Disqualification Under §30-3-14, if any
  - Request for Authorization to present Consent Orders
  - Report of Fully Executed Consent Orders since November 2017 meeting
  - Consideration of Interim Consent Order in the Matter of *West Virginia Board of Medicine v. Muhammed Samer Nasher-Alneam, M.D.*
  - Report of Any Other Matters Originating from the January 7, 2018 Committee Meeting

**ADJOURNMENT**
WEST VIRGINIA BOARD OF MEDICINE

Board Meeting Minutes

January 8, 2018

A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 8th day of January 2018 at 9:00 a.m.

The following Board members were present for the meeting:

Ahmed D. Faheem, M.D., D.L.F.A.P.A., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P., Secretary
Reverend O. Richard Bowyer
Timothy Donatelli, D.P.M.
Harry Duncan, M.D.
Reverend Janet Harman
Carrie Lakin, D.P.M.
David Mullins, M.D.
Victoria Mullins, P.A.-C.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
Wes Steele, M.D.
Matthew Upton, M.D.
Russell O. Wooton
K. Dean Wright, P.A.-C.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame
Leslie A. Thornton, CMBI
Andrew R. Wessels
Joshua R. Waine

The following former Board member was present:

Beth Hays, M.A.
Dr. Faheem called the meeting to order. Dr. Rahim moved that the November 13, 2017 board meeting minutes be approved. Dr. Upton seconded, and the motion carried.

Dr. Faheem introduced and welcomed Joshua R. Waine as the new administrative office assistant/receptionist for the Board. The former receptionist, Diane Callison, is now the physician assistant licensure analyst for the Board.

Dr. Faheem welcomed former Board member, Beth Hays, M.A. Ms. Hays’ board membership term ended on September 30, 2017. In recognition of her dedicated service during her tenure on the Board, Dr. Faheem presented Ms. Hays with a plaque. Ms. Hays expressed her gratitude.

Dr. Faheem recognized the service of former Board members, Rusty Cain, D.P.M and Cheryl Henderson, J.D., who were unable to attend today’s meeting.

Ms. Hays left the meeting at this time, and was not present for the remainder of the meeting.

Dr. Faheem recognized Dr. Gupta, who was one of five individuals profiled by the Sunday Gazette-Mail as West Virginias of the year for 2017 in their efforts in batting the State’s opioid epidemic.

Mr. Wooton joined the meeting at this time.
Dr. Faheem announced that all Board members are required to file financial disclosures with the West Virginia Ethics Commission annually. He reminded everyone that the deadline for filing disclosures is February 1, 2018.

Dr. Faheem announced that the 2018 Federation of State Medical Boards annual meeting will be held on April 26-28, 2018, in Charlotte, North Carolina. There are a limited number of scholarships available for public members of medical boards, which are available on a first come, first serve basis. He instructed any member who is interested in attending the meeting to see Mr. Spangler or himself at the conclusion of today’s meeting.

Dr. Faheem reported that the Executive/Management Committee met yesterday morning, Sunday, January 7, 2018, at which time the Committee approved the fiscal report and purchasing card transactions for the months of November and December 2017.

Dr. Faheem reported that the Committee is implementing a process for reviewing Board Position Statements for currentness of content. The Board’s current policy regarding resolution concerning conflicts of interest was originally adopted in 1988, and was amended in 2010. At yesterday’s meeting, the Committee reviewed a draft revision of the policy, which provides guidance for members with regard to when and how to declare a conflict of interest. A copy of the proposed revisions was made available to all Board members. The Committee recommended that the Board adopt the Conflict of Interest Policy as presented. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that the Board’s Procedure to be Followed by Persons Desiring to Address the Board was originally adopted in 2000 and was amended in 2010. A copy of the proposed revisions was made available to all board members. The Committee recommended that the Board adopt the Procedure for Making Comments at Meetings of
the Board as presented. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that at the November 2017 West Virginia State Auditor’s Conference, the West Virginia Ethics Commission presentation provided that the West Virginia Ethics Act prohibits a public official’s name or likeness (i.e. title and photograph) from being placed on educational material. The Committee reviewed an Ethics Commission Advisory Opinion regarding the use of titles and photographs in educational material, and it remains unclear as to whether the Board’s newsletter is considered “educational material.” The Committee directed Board staff to obtain an opinion from the Ethics Commission regarding the use of names, titles and photographs in future Board of Medicine newsletters.

Dr. Faheem reported that the West Virginia State Treasurer’s Office applies a 2.25% convenience fee to all payments made to the Board of Medicine via credit card transaction. In January 2016, the Board elected to absorb the 2.25% convenience fee applied to credit card transactions for a period of two years, and reevaluate thereafter. Dr. Rahim moved that the Board continue to absorb the 2.25% convenience fee associated with credit card transactions for a period of two years, and reevaluate thereafter. Mr. Wooton seconded, and the motion carried.

Mr. Spangler reported that currently the only pathway for a physician to apply for a license to practice medicine in this state is to submit a Uniform Application. At yesterday’s meeting, the Committee directed Board staff to begin developing a paper application that could be utilized by applicants applying for initial licensure with the Board.

Dr. Faheem reported that the Federation of State Medical Boards (FSMB) has modified their bylaws to allow medical board executive directors to become a FSMB fellow. As a fellow, the executive director would be eligible to run for office and/or to be
appointed to committees. Dr. Steele moved that the Board nominate Mr. Spangler as a FSMB fellow. Dr. Upton seconded, and the motion carried.

Dr. Faheem reported that the Committee met in executive session yesterday to discuss a personnel matter, the salary of the executive director position. Mr. Spangler is approaching completion of his first year in this position, and the Committee reviewed the salary range for this position. Reverend Bowyer moved that the Board enter into executive session pursuant to W.Va. Code §6-9A-4 to consider personnel matters regarding the salary of the executive director position. Dr. Gupta seconded, and the motion carried. Mr. Spangler, Ms. Alley, Mr. Foster, Ms. Frame, Ms. Thornton, Mr. Waine, Mr. Wessels, and a member of the public left the meeting room at this time.

The executive session concluded, and the public session commenced. All of the individuals who left the meeting room when the Board entered into executive session returned to the meeting room at this time.

Reverend Bowyer moved that the Board accept the Committees recommendation to adjust the Executive Directors salary as reported effective upon completion of all necessary administrative processing to make this change. Dr. Gupta seconded, and the motion carried.

Dr. Faheem reported that the Board has begun incorporating the Mission, Vision and Core Values that were adopted in 2017. Moving forward, the Executive Management Committee will begin to build upon the goals and objectives that were identified during the Board’s strategic planning session. The Board would like to begin conducting annual strategic planning sessions. For 2018, the proposed date for a half-day planning session is Saturday, October 20, 2018.

Dr. Faheem moved that the Board accept and ratify the report of the Executive /
Dr. Rahim delivered the report of the Licensure Committee, which met on Saturday, January 6, 2018.

Dr. Rahim reported that three applicants appeared before the Licensure Committee to discuss their applications. Based upon the Committee’s review of the relevant applications, and its discussion with the applicants, the Committee recommended that Ali Kooshkabadi, M.D. and Kelsey Aileen Musgrove, M.D. be approved for permanent medical licensure. The motion of Licensure Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the permanent medical licensure application of Sandor Mees, M.D. was placed on hold pending receipt of additional information.

Dr. Rahim reported that the Licensure Committee reviewed and discussed eleven (11) applications. Based thereupon, the Committee made the following recommendations:

Approve the following applicants for permanent medical licensure:
Amjad Hassan Alwaal, M.D.
David B. Fromberg, M.D.
Sai Praveen Haranath, M.D.
Dianah Thelma Lake, M.D.

Approve the following applicants for permanent medical licensure pending receipt of the patient injury compensation fund assessment fee:
Ibrahim Abu Munkalia, M.D.
Bipin Lal Shrestha, M.D.
Approve Nirupama Seemaladinne, M.D. for permanent medical licensure pending receipt of satisfactory evidence of completion of third year of accredited postgraduate training and receipt of the patient injury compensation fund assessment fee.

Accept the total hours of continuing medical education as satisfactory and approve Tina Marie Hendrix, M.D. for reactivation of permanent medical licensure.
The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the Committee will maintain the application of Gianna Joanne Link, M.D. on hold pending receipt of additional information.

Dr. Rahim reported that Gilbert Niles Clinton, II, M.D. and Butchi Babu Paidipaty, M.D. will be invited to appear before the Committee in March 2018 in support of their applications.

Dr. Rahim asked Board members to review the list of physicians up for action and to advise of any conflicts. No conflicts were declared.

The Committee recommended that the Board approve the following applicants for licensure:

**Permanent medical licensure**

Abou Mrad, Romy  
Adam, Nazir Ahmed  
Akiko, Michelle N.  
Almutairi, Heba  
Aly, Jasmine M.  
Amin, Md. Shahrier  

Bakinde, Nicolas  
Bandak, Ghassan Salim Issa  
Beaver, Thomas Richard  
Benning, Ethan Michael
Bernard, Jonathan David
Boils, Christie
Bondalapati, Naveen Kumar Reddy
Boyd, Jr., Charles Edward
Bronstein, Yulia

Clayton, Frederick Paul
Colletti, Richard

Deppe, Scott Allen
Doyle, John Joseph

Fadakar, Paul K.

Glass, Daniel Matthew
Gonzalez, Celsio Emil
Grover, Robert
Gyulai, Ferenc Emil

Hennigar, Randolph Alexander
Hinkle, David Miguel
Huff, Mary Wood

Jahan, Ishrat
Johnson, Ryan Edward

Kapoor, Mohit
Khan, Akhtar Sultan
Kollins, Kevin Michael
Krish, Sonia Nagesh
Kuperman, Michael Benjamin

Laferla, John James
Lasure, Benjamin Lee
Le, Andrew Toan
Lee, Allen Sanghun

Mastroes, Scott Frank
McCarthy, Paul Joseph
Middleman, Edward Louis

Nandwani, Veena

Pratt, Alan Goodale
Rezai, Ali R.
Rich, Jr., David Howard
Roberts, Edmond Alan Vernon
Roy, Aviral

Saraiya, Rupali
Scott, Grant Robert
Singh, Kartik
Singh, Meenu
Stavens, Gerasimos Stefanatos
Stern, Joel Benjamin
Stokes, Robert Fraser

Vidwans, Malavika Aniruddha

Zavaleta, Ernesto Gustavo

**Reactivation of permanent medical licensure:**

Bardes, Allison Grace
Bardes, James Migliaccio

Someshwar, Jean Ruth
Strafford, James Craigmiles

Uihlein, Thomas William

**Permanent podiatric physician licensure:**

Yeaman, William Edward Daniel

The motion of the Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the following six applicants, listed along with their state of principal licensure, were granted permanent medical licensure through an Interstate
Medical Licensure Compact Commission (IMLCC) application between the November 2017 and January 2018 Board meetings:

Campbell, John David        Arizona
Collins, James Ivan         Arizona
Hasenyager, Carol Ann       Wisconsin
Prabhu, Maitreyi Ramrao     Arizona
Toh, Benjamin Teong         Illinois
Youssef, Nancy Hany         Illinois

Also, the Board has received five requests for Letters of Qualification (LOQ) to be issued by the Board as the state of principal licensure. Of these, three applications are pending completion. Letters of Qualification were issued to Jacqueline Joy Kraus, M.D. and Sean Michael Rogers, M.D.

Dr. Rahim reported that the Committee discussed FBI guidelines for communicating with applicants regarding the results of a criminal history record check.

Dr. Lakin moved that the Board accept and ratify the report of the Licensure Committee. Mr. Wooton seconded, and the motion carried.

Dr. Rahim extended his thanks to Dr. Faheem and the Board for taking the report of the Licensure Committee out of turn. Dr. Rahim left the meeting at this time, and was not present for the remainder of the meeting.

Mr. Wright reported that the Legislative Committee met yesterday, Sunday, January 7, 2018, at which time Mr. Spangler reported that the Legislative Rule-Making Review Committee has approved the Board’s proposed legislative rule 11 CSR 1B,
Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants. Board staff will monitor the rule as it goes through the 2018 legislative session.

Mr. Wright reported that the Committee will hold four interim meetings between this Board meeting and the March 12, 2018 Board meeting. The tentative dates of these meetings are:

- January 25, 2018  5:00 pm
- February 8, 2018  5:00 pm
- February 22, 2018  5:00 pm

and

- March 8, 2018  5:00 pm.

Ms. Harman moved that the Board to delegate authority to the Legislative Committee to act on behalf of the Board as necessary to respond to legislative matters at these meetings, and any other meetings which may become necessary during the 2018 legislative session. Dr. Steele seconded, and the motion carried.

Mr. Wright reported that at its November 2017 meeting, the Board authorized staff to research issuing educational permits to residents, and to draft a bill for the Committee and Board to review for possible introduction in the 2018 legislative session. A copy of the draft bill was available for members to review. The bill removes language which provides that “a person engaged in graduate medical training in a program approved by the Accreditation Council for Graduate Medical Education or the board” is exempt from the licensing requirements. Additionally, the bill identifies the requirements that a resident must meet in order to be issued an educational permit by the Board. The bill provides the Board authority to promulgate an emergency rule. Implementation of the rule will require a database change and a possible increase in staff; therefore, the Committee recommends that the implementation of the rule become effective in July 2019. Dr. Gupta moved that the Board support introduction of the bill relating to the issuance of resident educational permits in the 2018 legislative session. Reverend Bowyer seconded, and the motion carried.
Mr. Wright reported that at its November 2017 meeting, the Board authorized staff to work collectively with legislative counsel on draft legislation to modify West Virginia Code §30-3-14 to include changing the burden of proof in Board disciplinary matters from clear and convincing evidence to a preponderance of evidence standard, which would align the Board of Medicine and the Board of Osteopathic Medicine. Rather than becoming an independent bill, the burden of proof standard has been incorporated in the Opioid Reduction Act. The language in the Opioid Reduction Act:

1. Changes the burden of proof in Board disciplinary matters from clear and convincing evidence standard to a preponderance of evidence standard;
2. Limits issuing an opiate to a patient in an emergency room setting for outpatient use to a three-day supply;
3. Limits the initial prescription of an opiate to a patient in an outpatient setting to a seven-day supply;
4. Sets forth requirements for practitioners, which includes requiring practitioners to access the Controlled Substance Monitoring Program (CSMP);
5. Broadens the access that licensing boards have regarding accessing the CSMP database;
6. Requires that the Board of Pharmacy report to licensing boards quarterly regarding abnormal prescribing practices; and
7. Establishes parameters on how a licensing board may use information gathered from quarterly CSMP reports received from the Board of Pharmacy.

The Committee recommended that the Board support this bill in principal and monitor the bill during the upcoming legislative session. The motion of the Legislative Committee was given by Wright, and the motion carried.
Mr. Wright reported that the West Virginia Bureau for Public Health will be releasing a report regarding recommendations to address the opioid crisis. The Committee recommended that the Board delegate Mr. Spangler authority to take a position with regard to the report. The motion of the Legislative Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that there has been legislation drafted which would permit at least one Board investigator to carry a firearm once they have received appropriate training; however, legislative counsel have been unable to find a sponsor for the bill. Board staff will seek a sponsor for the bill.

Mr. Wright reported that it is unclear if there will be legislation introduced during the 2018 session related to physician advertising, but Board staff will monitor any such legislation if it is introduced, and will report back to the Committee and the Board.

Mr. Wright reported that legislation will likely be introduced in the upcoming legislative session that would combine the West Virginia Board of Examiners for Registered Professional Nurses and the West Virginia Board of Licensed Practical Nurses. Board staff will monitor any such legislation, and will keep the Committee and the Board apprised.

Mr. Wright reported that there is talk of a bill which would provide for prescribing authority for psychologists who hold a Ph.D. The Committee recommended that the Board oppose legislation granting prescribing authority for Ph.D. psychologists, if such legislation is introduced. The motion of the Legislative Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that during the Legislative Committee meeting, Dr. Gupta reported on the proposed medical cannabis rules.
Mr. Wright reported that during the Legislative Committee meeting, Dr. Gupta reported on the bill to be introduced in the upcoming legislative session in an effort to reorganize the West Virginia Department of Health and Human Resources. This bill provides that the Board of Medicine, as well as other regulatory boards, would “remain as autonomous entities but may be subject to administrative oversight of the Department of Health and Compliance for purposes of consistency of service delivery.” The Committee has concerns with the way the draft bill is proposed, and therefore recommended that the Board not support the bill as written. The motion of the Legislative Committee was given by Mr. Wright, and the motion carried.

Mr. Wright moved that the Board accept and ratify the report of the Legislative Committee. The motion carried.

Ms. Alley provided an update on two pending litigation matters. The matter of Shivkumar Iyer, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent is currently going through the appeal process, and the Board is awaiting the Supreme Court’s ruling.

In the matter of Omar Khalid Hasan, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent, briefs have been submitted, and the Board is awaiting a decision by the Kanawha County Circuit Court.

Ms. Alley reported that there was a hearing scheduled to convene January 9-11, 2018; however, the hearing has been continued.

Ms. Alley reported that there is a hearing scheduled to convene on February 2, 2018, in a disciplinary matter. The Board anticipates that one more hearing will be
scheduled in the near future.

Mr. Wright provided the report of the Physician Assistant Committee which met on Saturday, January 6, 2018.

Mr. Wright reported that Jessica Faye Dunkley, P.A.-C. entered into a Consent Order with the Board on April 4, 2017, which restricted her practice as a physician assistant to direct supervision for a minimum period of six months. At its November 2017 meeting, the Physician Assistant Committee reviewed the documentation submitted by her supervising physician, who had also recommended lifting the restriction of direct supervision. The Committee recommended Ms. Dunkley be released from her Consent Order. An Order Terminating Consent Order was entered on November 13, 2017.

Mr. Wright asked Board members to review the list of physician assistants up for action, and to advise of any conflicts. Reverend Bowyer declared a conflict with regard to Patricia Ann Parrish, P.A.-C., as Ms. Parrish will be employed by Fairmont Clinic, and he is a member of the Fairmont Clinic Board. Reverend Bowyer left the meeting room at this time. Mr. Wright recommended that Ms. Parrish be approved for physician assistant licensure. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried. Reverend Bowyer returned to the meeting room at this time.

The Physician Assistant Committee recommended that the following applicants be approved for physician assistant licensure:

Toni Rebekah Davison, P.A.-C.
Jason R. Fantini, P.A.-C.
Samantha Jane Hanson, P.A.-C.
Maureen E. McDonough, P.A.-C.
James Carroll O’Connor, P.A.-C.
Emily N. Penz, P.A.-C.
Heather Ann Whetzel, P.A.-C.
The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that Meredith L. Wisser, P.A.-C. requested to practice in her maiden name of George, although she has legally changed her name to Wisser. The Committee recommended that Ms. Wisser be approved for physician assistant licensure pending receipt of an application submitted in her legal name of Meredith L. Wisser, P.A.-C. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that Allison Ann Brown, P.A.-C. appeared before the Physician Assistant Committee at its November 2017 meeting to discuss her application. Her application was placed on hold pending receipt of additional information from the Delaware Board of Medicine. Based upon the Committee’s review of the additional information submitted, the Committee recommended that Ms. Brown be approved for physician assistant licensure. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

The Physician Assistant Committee recommended that Brian Thomas Jarrell, P.A.-C. be approved for reinstatement of licensure. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that Board staff have authorized forty-one (41) practice agreements for the period of November 13, 2017 to January 5, 2018. Additionally, fifty-nine (59) collaborating physicians were designated. Staff also processed a total of 339 Prescriptive Authority Amendment Forms for currently authorized practice agreements.

Mr. Wright reported that the National Commission on Certification of Physician Assistants (NCCPA) certification for seven actively licensed physician assistants expired
effective December 31, 2017. These physician assistants have been notified to practice using the designation of P.A. rather than P.A.-C.

Mr. Wright moved that the Board accept and ratify the report of the Physician Assistant Committee. The motion carried.

Dr. Challa was not present at the January 7, 2018, Complaint Committee meeting. In his absence, Dr. Upton chaired the meeting and provided the following report:

A special meeting of the Complaint Committee was held on November 30, 2017, at which time the Committee initiated complaint number 17-197-W.

Pursuant to the January 7, 2018, Complaint Committee meeting, Dr. Upton reported the following activities:

**CLOSURES**

17-170-P    David Mark Anderson, M.D.
17-146-W    Deborah Lynn Chadwick, M.D.
17-164-W    David Anthony Ciarolla, M.D.
17-179-V    David Wellington Cook, M.D.
17-165-W    Thomas Alan Durnell, M.D.
17-149-H    Michael L. Harris, M.D.
16-151-W    Mohammad Khalid Hasan, M.D.
17-18-W     Mohammad Khalid Hasan, M.D.
17-166-W    Nolan Mark Hill, M.D.
17-117-W    James Michael Holehouse, M.D.
17-169-F    Antonio Santiago Garcia Merino, M.D.
17-155-F    Georgianna Maynell Richards, M.D.
17-83-W     William Peter Matthew Southcott, M.D.
17-172-W    Terence Wayne Triplett, M.D.
INITIATED COMPLAINTS

18-02-W
18-03-W
18-04-W
18-05-W
18-06-W
18-07-W
18-08-W
18-09-W
18-10-W
18-11-W
18-12-W
18-13-W
18-14-W
18-15-W
18-16-W
18-17-W
18-18-W
18-19-W
18-20-W
18-21-W
18-22-W

CONSENT ORDERS

Dr. Upton requested that the Board authorize the Complaint Committee to move forward with offering four Consent Orders and/or Amended Consent Orders in ongoing Complaint Committee matters. The motion of the Complaint Committee was given by Dr. Upton, and the motion carried.

FULLY EXECUTED CONSENT ORDERS

Dr. Upton reported that since the November meeting, fully executed Consent Orders have been entered with respect to the following licensees:

Charles Paul Honsinger, III, M.D. – On November 13, 2017, the licensee entered into a Consent
Order with the Board which imposed a fine in the amount of $500.00 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Rodhan Abass Khthir, M.D. – On January 2, 2018, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500.00 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Paul Basil Papadimitriou, M.D. – On January 2, 2018, the licensee entered into a Consent Order with the Board which publicly reprimanded him for improper treatment of a patient and placed him on probation for one year with specific terms and conditions, including successful completion of training and education and a requirement that he engage in appropriate practices and maintain proper prescribing records when he regularly prescribes controlled substances to a patient.

All Consent Orders are available on the Board’s website.

Dr. Upton reported that a public hearing was scheduled to convene on January 9, 10 and 11, 2018, in the matter of Muhammed Samer Nasher-Alneam, M.D. Prior to the public hearing, Dr. Nasher-Alneam moved to continue the hearing. In conjunction with his motion to continue, Dr. Nasher-Alneam agreed to certain restrictions and limitations on his practice, in the form of a Proposed Interim Consent Order, that would remain in effect until the complaints at issue are resolved by a Final Board Order. The public hearing was continued by Order of the Hearing Examiner, and the Proposed Interim Consent Order was submitted to the Complaint Committee for consideration. Prior to today’s meeting, the Proposed Interim Consent Order was made available for Board members to review.
Foster reported that the Interim Consent Order does not impose discipline upon the physician, rather it restricts the physicians prescribing to ensure public protection while the matter is pending. The Complaint Committee recommended that the Board accept Dr. Nasher-Alneam’s Interim Consent Order. The motion of the Committee was given by Dr. Upton, and the motion carried.

Dr. Upton moved that the Board accept and ratify the report of the Complaint Committee, and the motion carried.

There being no further business to consider, Reverend Bowyer moved that the meeting be adjourned. Dr. Steele seconded, and the motion carried.

Ahmed D. Faheem, M.D., D.L.F.A.P.A.
President

Rahul Gupta, M.D., M.P.H, M.B.A., F.A.C.P.
Secretary
WEST VIRGINIA BOARD OF MEDICINE  
Board Meeting Agenda  
March 12, 2018 at 9:00 a.m.  

CALL TO ORDER

Public Comments

Announcements

Approval of Minutes – January 8, 2018

Committee and Staff Reports, Discussion and Action:

- Executive/Management Committee Report
  - Correspondence Received Regarding Malpractice Reporting
  - Correspondence Received Regarding Supporting the Practice of Physician Assistants
  - Correspondence Received Regarding Temporary License Billing and Credentialing
  - Correspondence Received Regarding Suggested Changes to the Ryan Haight Act Regulations
  - Correspondence Received Regarding Prescription Drug Related Overdose Deaths in West Virginia
  - Fiscal Reports / Purchasing Card Transactions for January and February 2018
  - Review of Board Policies and/or Procedures and Proposed Updates
    - Position Statement on Corporate Practice of Medicine
    - Collaborative Relationships for Prescriptive Authority with APRNs or Certified Nurse Midwives
  - Update, Review and Follow-up Regarding Strategic Planning
  - Report of Other Discussion Which Occurred at the March 11, 2018 Meeting

- Legislative Committee Report
  - Board of Medicine Legislative Rules 11 CSR 1B and 11 CSR 6
  - Overview of the 2018 Legislative Session
  - Rulemaking for the 2019 Legislative Session
  - Legislative Goals for 2019
- Report of Other Discussion Which Occurred at the March 11, 2018 Meeting

- **Board Attorney Report**
  - Update on Pending Litigation Matters
    - *Shivkumar Iyer, M.D. v. West Virginia Board of Medicine*
    - *Omar Khalid Hasan, M.D. v. West Virginia Board of Medicine*
  - Pending Public Hearings
  - Review of Recent Kentucky Opinion Regarding the North Carolina Dental Board Case

- **Physician Assistant Committee Report**
  - Consent Order Update
  - Committee Recommendations on Licensure Applicants (Physician Assistants)
    - Appearances
    - Discussion
    - New Applicants
    - Reinstatement / Reactivation
  - Report of Other Discussion Which Occurred at the March 10, 2018 Meeting

- **Licensure Committee Report**
  - Consent Order Update
  - Committee Recommendations on Licensure Applicants (Medical Doctors and Podiatric Physicians)
    - Appearances
    - Discussion
    - New Applicants
    - Reinstatement / Reactivation
  - Report of Other Discussion Which Occurred at the March 10, 2018 Meeting

- **Complaint Committee Report**
  - Closures
  - Initiated Complaints
  - Findings of Probable Cause to Substantiate Charges of Disqualification Under §30-3-14, if any
  - Authorization of Consent Orders
- Consent Order Update
- Consideration of Possible Revocation Pursuant to W. Va. Code §30-3-14(d) – Rodney Lee Curtis, II, M.D.
- Other Matters Originating from the March 11, 2018 Meeting

ADJOURNMENT
CALL TO ORDER

Public Comments

Announcements

Approval of Minutes – January 8, 2018

Committee and Staff Reports, Discussion and Action:

- Executive/Management Committee Report
  - Correspondence Received Regarding Malpractice Reporting
  - Correspondence Received Regarding Supporting the Practice of Physician Assistants
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  - Correspondence Received Regarding Prescription Drug Related Overdose Deaths in West Virginia
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  - Review of Board Policies and/or Procedures and Proposed Updates
    - Position Statement on Corporate Practice of Medicine
    - Collaborative Relationships for Prescriptive Authority with APRNs or Certified Nurse Midwives
  - Update, Review and Follow-up Regarding Strategic Planning
  - Report of Other Discussion Which Occurred at the March 11, 2018 Meeting

- Legislative Committee Report
  - Board of Medicine Legislative Rules 11 CSR 1B and 11 CSR 6
  - Overview of the 2018 Legislative Session
  - Rulemaking for the 2019 Legislative Session
  - Legislative Goals for 2019
- Report of Other Discussion Which Occurred at the March 11, 2018 Meeting

- **Board Attorney Report**
  - Update on Pending Litigation Matters
    - *Shivkumar Iyer, M.D. v. West Virginia Board of Medicine*
    - *Omar Khalid Hasan, M.D. v. West Virginia Board of Medicine*
  - Pending Public Hearings
  - Review of Recent Kentucky Opinion Regarding the North Carolina Dental Board Case

- **Physician Assistant Committee Report**
  - Consent Order Update
  - Committee Recommendations on Licensure Applicants (Physician Assistants)
    - Appearances
    - Discussion
    - New Applicants
    - Reinstatement / Reactivation
  - Report of Other Discussion Which Occurred at the March 10, 2018 Meeting

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  - Consent Order Update
  - Committee Recommendations on Licensure Applicants (Medical Doctors and Podiatric Physicians)
    - Appearances
    - Discussion
    - New Applicants
    - Reinstatement / Reactivation
  - Report of Other Discussion Which Occurred at the March 10, 2018 Meeting

- **Complaint Committee Report**
  - Closures
  - Initiated Complaints
  - Findings of Probable Cause to Substantiate Charges of Disqualification Under §30-3-14, if any
  - Authorization of Consent Orders
- Consent Order Update
- Consideration of Possible Revocation Pursuant to W. Va. Code §30-3-14(d) – Rodney Lee Curtis, II, M.D.
- Other Matters Originating from the March 11, 2018 Meeting

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Board Meeting Minutes
March 19, 2018

A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 19th day of March 2018 at 9:00 a.m.

The following Board members were present for the meeting:

Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P., Secretary
Reverend Janet Harman
Carrie Lakin, D.P.M.
Victoria Mullins, P.A.-C.
Ashish Sheth, M.D.
Russell O. Wooton
K. Dean Wright, P.A.-C.

The following Board members attended the meeting via teleconference:

Ahmed D. Faheem, M.D., D.L.F.A.P.A., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
Reverend O. Richard Bowyer
Harry Duncan, M.D.
David Mullins, M.D.
Mustafa Rahim, M.D.
Wes Steele, M.D.
Matthew Upton, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame
Leslie A. Thornton, CMBI
Andrew R. Wessels
Dr. Faheem called the meeting to order. Reverend Bowyer moved that the January 8, 2018 board meeting minutes be approved. Dr. Challa seconded, and the motion carried.

Dr. Faheem announced that the 2018 Federation of State Medical Boards annual meeting will be held on April 26-28, 2018, in Charlotte, North Carolina. The early-bird registration deadline is today, March 19, 2018, and registration closes on April 9, 2018. He instructed any member who is interested in attending the meeting to see Mr. Spangler at the conclusion of today’s meeting.

Mr. Spangler congratulated Dr. Faheem on his nomination to serve on the Federation of State Medical Boards Nominating Committee.

Dr. Faheem reported that the Executive/Management Committee met on Sunday, March 11, 2018, at which time the Committee reviewed and discussed correspondence regarding the reporting of medical malpractice settlements and judgments to the Board of Medicine. The Committee authorized Board staff to begin reviewing the Board’s Medical Professional Liability Claim Report Form, and to present proposed modifications to the Committee at the next meeting. Additionally, the Committee directed legal staff to review a request for expungement of a medical malpractice settlement claim report and provide a recommendation at the May 2018 Legislative Committee meeting regarding this matter.

Dr. Faheem reported that the Committee reviewed and discussed correspondence from the Washington State Medical Commission (WSMC). The WSMC is unable to attend the 2018 Federation of State Medical Boards meeting and asks that the West Virginia Board of Medicine speak to WSMC’s resolution entitled Supporting the Practice Physician Assistants. The Committee believes that it would be premature to opine on the issue until ample time for further discussion and consideration is had.
Dr. Faheem reported that the Committee reviewed and discussed correspondence that was received regarding the ability for licensees who hold an active temporary license with the Board to bill for their services. Mr. Spangler will follow-up with the appropriate individuals regarding this request, indicating that a temporary license is an active license, and therefore they should not be treated any different than other licensees who hold an active license with the Board.

Dr. Faheem reported that the Committee reviewed correspondence that was received regarding the Drug Enforcement Agency’s efforts to amend the regulations of the Ryan Haight Act, which relates to prescribing controlled substances through the use of telemedicine. The Committee recommended that the Board oppose any changes to the Ryan Haight Act. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that the Committee reviewed correspondence that was received from a student at George Washington University’s School of Public Health regarding addressing prescription drug related overdose deaths in West Virginia. Mr. Spangler will respond to the sender reporting that current legislation and other initiatives are in alignment with her recommendations.

Dr. Faheem reported that the Committee reviewed and approved the fiscal report and purchasing card transactions for the months of January and February 2018.

Dr. Faheem reported that the Board’s current position statement on the corporate practice of medicine was adopted in November 2013. The Committee recommended that the Board re-adopt the Position Statement on the Corporate Practice of Medicine without modification. The motion of the Committee was given by Dr. Faheem, and the motion carried.
Dr. Faheem reported that the current policy regarding collaborative relationships for prescriptive authority with Advanced Practice Registered Nurses (APRNs) or certified nurse midwives was adopted in March 2012. The Committee recommended that the Board adopt the policy regarding collaborative relationships for prescriptive authority with APRNs or certified midwives and authorize Board staff to make technical, non-substantive changes to the policy. The motion of the Committee was given by Dr. Faheem, and the motion carried. The revised policy will be presented to the Board for consideration at the May 2018 meeting.

Dr. Faheem reported that the Committee reviewed the Board’s strategic plan for 2018, which identifies the Board’s goals and objectives for the year. A copy of the document was made available to members for review. The Committee recommended that the Board ratify the strategic plan as presented. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that the Committee would like to begin conducting annual strategic planning sessions. At the January meeting, the Committee selected October 20, 2018 as the proposed date for a half-day planning session. Due to schedule conflicts, the Committee recommended that the Board hold a strategic planning session on either Saturday October 6, 2018 or Saturday October 13, 2018. Dr. Faheem asked members to review their calendar and email their preferred date for the meeting to Ms. Frame as soon as possible.

Dr. Faheem moved that the Board accept and ratify the report of the Executive / Management Committee. The motion carried.

Mr. Wright reported that the Legislative Committee met on Sunday, March 11, 2018, at which time Mr. Spangler reported that the Board’s legislative rules 11 CSR 1B,
Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants, and 11 CSR 6, Continuing Education for Physician and Podiatric Physicians, have completed the legislative process and are awaiting the Governor’s signature. The rule bundle bill, which contained 11 CSR 1B and 11 CSR 6, was amended in Senate Judiciary Committee. The amendment strikes 12.1.ii.B of 11 CSR 1A, prohibiting the use of patient testimonials in physician advertising, and re-numbers the remaining paragraph. Board staff will file the final rules with the Secretary of State’s office. Licensees will be notified of the changes to these rules via e-mail. The changes will also be outlined in the June 2018 edition of the Board’s newsletter.

Mr. Wright reported that Senate Bill 273, reducing the use of certain prescription drugs, was monitored closely throughout the session by the Committee. The bill has completed the legislative process and is awaiting the Governor’s signature. The Committee has concerns with the requirement in this bill which provides that the practitioner “shall consider” any of the following treatment alternatives prior to starting a patient on an opioid: physical therapy, acupuncture, massage therapy, osteopathic manipulation, chronic pain management program and chiropractic care. The final version of the bill was not available online at the time of the Legislative Committee meeting on Sunday, May 11, 2018. Based upon a subsequent review of the final version by Board staff, Mr. Wright reported to the Board that the language is “shall refer or prescribe” rather than “shall consider.” Additionally, a practitioner is required to conduct and document the results of a physical examination every 90 days for any patient that he or she continues to treat with any Schedule II controlled substance. The Committee recommended that the Board authorize staff to explore seeking removal of the requirement that a physical examination be performed every 90 days. The motion of the Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that House Bill 4199, permitting a nursing home to use trained individuals to administer medication, has completed the legislative process and is awaiting
the Governor’s signature. This bill will allow individuals who meet eligibility requirements and who have passed training and competency tests developed by the authorizing agency to administer medications to residents of a nursing home. The Committee has concerns with this bill and has authorized Mr. Spangler to speak with the Governor regarding the concerns.

Mr. Wright reported that the following bills, which were monitored by the Committee, have completed the legislative process and are awaiting the Governor’s signature:

**Senate Bill 313** – waiving occupational fees and licensing requirements for certain low-income individuals, military families and young workers

**Senate Bill 434** – specifying documents not subject to discovery in certain proceedings

**Senate Bill 499** – requiring two years of approved postgraduate clinical training for persons with foreign medical degrees

**Senate Bill 576** – relating to the Patient Injury Compensation Fund

**House Bill 4027** – creating an education permit for allopathic physician residents

**House Bill 4217** – permitting an attending physician to obtain a patient’s autopsy report

**House Bill 4336** – updating the schedule of controlled substances

Mr. Wright reported that the following bills were closely monitored by the Committee, but were not passed:

**Senate Bill 448** – relating generally to professional associations

**Senate Bill 473** – requiring insurance coverage for the prescription drug Varenicline

**House Bill 4011** – requiring agencies, when submitting a new rule or changes, to also identify two existing rules that could be repealed

**House Bill 4014** – relating to reorganization of the West Virginia Department of Health and Human Resources

**House Bill 4154** – establishing the 2018 Regulatory Reform Act

**House Bill 4218** – relating to medical professional liability
House Bill 4304 – creating the Board of Nursing

House Bill 4345 – relating to limitation on permits for growers, processors and dispensaries of medical cannabis

House Bill 4481 – relating to mandatory inter-board reporting by licensees or registrant of the boards of medicine, osteopathic medicine and nursing

Mr. Wright reported that the following study resolutions were approved by the legislature:

1. the feasibility of a single building to house all occupational and professional regulatory boards;
2. licensure, certification and registration forms of occupational and professional regulation;
3. limiting the use of certain criminal records to disqualify a person from license to practice an occupation; and
4. iSelect MD pilot project regarding telemedicine.

Mr. Wright reported that Board staff will begin rulemaking for introduction in the 2019 legislative session.

Mr. Wright reported on potential legislative goals for 2019, which include:

1. changing the burden of proof in disciplinary matters from a clear and convincing evidence standard to a preponderance of evidence standard, so that the Board of Medicine language and the Board of Osteopathic Medicine language align;
2. permitting at least one board investigator to carry a firearm;
3. consolidation of the Board of Medicine and Board of Osteopathic Medicine; and
4. physician assistant requirements.

The Committee recommended that the Board authorize staff to explore the above matters that are identified as 2019 legislative goals. The motion of the Committee was given by
Mr. Wright, and the motion carried.

Mr. Wright moved that the Board accept and ratify the report of the Legislative Committee. The motion carried.

Mr. Wright acknowledged the Board and Staff members for the excellent job that they did throughout the 2018 legislative session.

Ms. Alley provided an update on two pending litigation matters. The matter of Shivkumar Iyer, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent is currently going through the appeal process, and the Board is awaiting the Supreme Court’s ruling.

The Board is awaiting a decision by the Kanawha County Circuit Court in the matter of Omar Khalid Hasan, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent.

Ms. Alley reported that a hearing was held on February 2, 2018, in a disciplinary matter. The Board anticipates receiving the Hearing Examiner’s Findings of Fact, Conclusions of Law and Recommended Decision with regard to this matter in the spring.

Ms. Alley reported that there are two complaint matters which are in a continued posture, and the public hearings in those matters will be rescheduled at a later date.

Ms. Alley reported that there are two matters for which it is anticipated that a Complaint Notice of Hearing will be issued later this spring.

Ms. Alley provided an overview of a recent Kentucky opinion regarding the North
Carolina Dental Board case. This was a favorable case, with a Board structure similar to our Board. Also, like our Board, their rules were subject to the legislative process. Board staff will continue to monitor judicial opinions related to this topic.

Mr. Wright provided the report of the Physician Assistant Committee which met on Saturday, March 10, 2018.

Mr. Wright asked Board members to review the list of physician assistants up for action, and to advise of any conflicts. No conflicts were declared.

The Physician Assistant Committee recommended that the following applicants be approved for physician assistant licensure:

Amber Mae Beckman, P.A.-C.
Ronald Winston Bewick, Jr., P.A.-C.
Richard Annon Corley, Jr., P.A.-C.
Rebecca Lynn D’Eramo, P.A.-C.
Randi Linn Dillon, P.A.-C.
Cody Ann McGovern Eccard, P.A.-C.
Kaitlyn Arielle Garnett, P.A.-C.
Jessica Chaney Hansroth, P.A.-C.
Holly Marie Harris, P.A.-C.
Randall Douglas Kelly, P.A.-C.
Jordan Rhea Kerr, P.A.-C.
Skerdilaid Licaj, P.A.-C.
Joshua James Rogers, P.A.-C.
Megan J. Schweid, P.A.-C.
Natalie Anne Sesto, P.A.-C.
Thomas A. White, P.A.-C.
Eric Francis Williams, P.A.-C.

The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.
Mr. Wright reported that the Committee will maintain the application of Lindsey Megan Fancett, P.A.-C. on hold pending receipt of additional information.

The Licensure Committee recommended that Sarah Legih LaSala, P.A.-C. be offered approval of licensure through a Consent Order with the following terms:

1. that any practice agreement submitted must be reviewed by the Physician Assistant Committee prior to authorization;
2. that Ms. LaSala practice under direct supervision for a minimum of six months; and
3. that Ms. LaSala’s collaborating physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when direct collaboration should be lifted.

The Committee reviewed a proposed practice agreement which may be resubmitted to include the modifications required by the Consent Order. The motion of the Committee was given by Mr. Wright, and the motion carried.

The Physician Assistant Committee recommended that Weslyn Anna Letfler, P.A.-C. and David Runyon, P.A.-C. be approved for reinstatement of licensure. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that the Committee discussed the delegation of morphine pump refills and maintenance in an office-based setting. The Committee directed staff to authorize agreements delegating this advanced duty with evidence of the appropriate training and logs for refills and maintenance only. Physician assistants are not permitted to make changes in dosage/calibration of the pump without direction from the collaborating physician.

Mr. Wright reported that the Committee discussed a proposed practice agreement which requested delegation of joint aspirations. The logs submitted were not site specific as is required for joint injections. The Committee directed staff that joint aspiration delegation
would also be site specific and would require the appropriate logs for authorization to delegate this advanced duty.

Mr. Wright reported that the Committee discussed the inquiry of a physician assistant relating to the emergent administration of morphine for cardiac treatment in the absence of the collaborating physician. The Committee directed staff to inform the physician assistant that the collaborating physician may delegate this in the Emergency Care section of the delegated medical acts provided that specific protocols are outlined in the agreement.

Mr. Wright reported that Board staff have authorized 121 practice agreements for the period of January 8, 2018 to March 9, 2018. Additionally, 148 alternate collaborating physicians were designated.

Mr. Wright moved that the Board accept and ratify the report of the Physician Assistant Committee. The motion carried.

Dr. Rahim delivered the report of the Licensure Committee, which met on Saturday, March 11, 2018.

Dr. Rahim reported that four applicants appeared before the Licensure Committee to discuss their applications. Based thereupon the Committee made the following recommendations:

Approve Cletus Cheyuo, M.D. for permanent medical licensure;

Approve Khurram Nawaz Ali, M.D. for reactivation of licensure; and
Approve Butchi Babu Paidipaty, M.D. for permanent medical licensure pending receipt of the patient injury compensation fund assessment fee.

The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the Committee will maintain the application of Gilbert Niles Clinton, II, M.D. on hold pending receipt of additional information.

Dr. Rahim reported that the Licensure Committee reviewed and discussed fifteen applications. Based thereupon, the Committee made the following recommendations:

Approve the following applicants for permanent medical licensure:

Esther S. V. Ajjarapu, M.D.
Mohammed Abdulaziz AlJasmi, M.D.
Gary Saint Aubyn Letts, M.D.
David Julius Zelman, M.D.

Approve Kinila T. Mohan, M.D. for permanent medical licensure pending receipt of the patient injury compensation fund assessment fee.

Accept the work history as satisfactory and approve Linda Carol Jackson, M.D. for permanent medical licensure based on the following factors: Dr. Jackson has practiced medicine in the US territory of the Virgin Islands since March 2011; she is fully and actively licensed in two other states; she holds American Board of Medical Specialties Board certification; and she passed the SPEX exam in July 2013.

Accept the total hours of continuing medical education as satisfactory and approve Jesus Alfredo Martinex, Jr., M.D., for reactivation of permanent medical licensure pending receipt of the patient injury compensation fund assessment fee.

The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.
The Licensure Committee recommended that the Board accept the respective requests to withdrawal their application from:
Sandor Mecs, M.D.
Michael Patrick Parsons, M.D.

The motion of the Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the Committee will maintain the applications of Gianna Joanne Link, M.D. and Amy Alice Davidson, D.P.M. on hold pending receipt of additional information.

Dr. Rahim reported that the following applicants will be invited to appear before the Committee in May:
Tarek Alasil, M.D.
Dennis Michael Grolman, M.D.
Aldo Antonio Molinar, M.D.
Walid Mohamed Radwan, M.D.

Dr. Rahim asked Board members to review the list of physicians up for action and to advise of any conflicts. No conflicts were declared.

The Committee recommended that the Board approve the following applicants for permanent medical licensure:
Amro Almradi
Stuart Douglas Anderson
Jaime Sa Moreira De Argila
Sadaf Ashfaq
Achuta Ram Aynampudi

Jeffrey Brian Banyas
Brian Anthony Boone

Joseph Lin-Yun Chow
Kristen Marie Critelli
Melanie Chang Elchico
Karen Darfler Ernst

Lora Beth Fetty
Deborah Lynn Gever
Peter Louis Griffin

Tuan Xuan Ha
Dona Tawfig Hasou
Tia Heng
Richard Manalo Hidalgo
Todd Mark Hoffman
Farnaz Houshmand

Viacheslav Iremashvili
Tina Islam

Susanne Sugeen Kim

Jacob Keenon Labahn
Andrew David Levin
Diana Patricia Lewis

Richard Alexander Misiaszek
Alicia Ann Morgan
William Stuart Musser

Vivien Louise Ruth Newbold
Ajitesh Ojha
Annette Corinne Olin
Francis Onwudimisho Onwochei
Cletus Kobiah Oppong

Rahul Nileshkumar Patel
Casey Dawn Patick
James Willis Patterson
Phillip Ryan Purnell

Kristina Kimberley Rached
Azeem Abdul Rehman
Gary Dean Ross

Jawad Ahmed Salim
Molly Elizabeth Seidler
Asad Shafiq
Sanaz Nicky Soltani
Josif Stakic

Constance Roseann Tambakis-Odom
Jhapat Bahadur Thapa
Brett Alan Tomlin
Gregory Todd Trecha

Neil Alden Venard

Sam Obi Wanko
Kylen Pierce Whipp
Authrine Chevanne Whyte
Jon Daniel Wilson
William Leicester Woodard, Jr.

Paul Andrew Yates

The motion of the Committee was given by Dr. Rahim, and the motion carried.

The Committee recommended that the Board approve the following applicants for licensure:

Permanent medical licensure pending receipt of the patient injury compensation fund assessment fee:

Honorio Manuel Valdes Murua
Irfan Zeb

Permanent podiatric physician licensure:

Amber Marie Allen
Jenna Louise Hollnagel
The motion of the Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the following eight applicants, listed along with their state of principal licensure, were granted permanent medical licensure through an Interstate Medical Licensure Compact Commission (IMLCC) application between the January 2018 and March 2018 Board meetings:

<table>
<thead>
<tr>
<th>Name</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jennifer Kim Bogan</td>
<td>Arizona</td>
</tr>
<tr>
<td>Cedric Emden Davis, II</td>
<td>Arizona</td>
</tr>
<tr>
<td>Mark Nutter Griffith</td>
<td>Wisconsin</td>
</tr>
<tr>
<td>Johara Adam Hassan</td>
<td>Illinois</td>
</tr>
<tr>
<td>Vikas Jain</td>
<td>Illinois</td>
</tr>
<tr>
<td>Gary Stewart Meredith</td>
<td>Arizona</td>
</tr>
<tr>
<td>James Albert Meserow</td>
<td>Illinois</td>
</tr>
<tr>
<td>Troy Lane Potthoff</td>
<td>Nebraska</td>
</tr>
</tbody>
</table>

Also, during this period, the Board received four requests for a Letter of Qualification (LOQ) to be issued by the Board as the state of principal licensure. Letters of Qualification were issued to:

- Mohamad Bassam Haffar
- Camille Marie Ristroph
- Krysztof Maciej Sobieraj

A Letter of Qualification denial was issued to Jamie Lee Cichon, M.D.

Dr. Rahim reported that the completion of several applications is being delayed by the lengthy turnaround time for another medical board to provide primary source verification of its licensee’s status to our Board. Staff confirmed with staff from the other Board that verifications are currently being processed approximately 11 weeks after receipt. The Committee recommended that the Executive Director send a letter to the other Board regarding concerns with the delayed response time and its impact on applicants.
Dr. Rahim moved that the Board accept and ratify the report of the Licensure Committee. The motion carried.

Dr. Challa delivered the report of the Complaint Committee, which met on Sunday, March 11, 2018.

CLOSURES

17-141-W  Charlotte Martha Akor, M.D.
17-196-M  Ziad Abed Al-Kareem Al-Qudah, M.D.
18-20-W  Ellen Renee Brown, M.D.
17-92-J  Daniel Scott Frame, M.D.
17-183-W  Rachel S. Gilman, M.D.
17-173-H  Dawn Reed Jones, M.D.
17-202-N  Donald Gerould Klinestiver, M.D.
17-194-F  Jeffry Shobe Life, M.D.
17-199-T  Charles Lye, M.D.
17-161-B  Sandra K. May, P.A.-C
17-174-W  Kathryn S. Moffett, M.D.
17-177-H  Rafael Evencio Molina, M.D.
18-10-W  Darren Blaine Nease, M.D.
18-12-W  John Eugene Parker, M.D.
17-184-W  Victor Thomas Perrone, M.D.
17-175-W  Mitchell Nicholas Rashid, M.D.
17-185-W  Salah Philip Razzook, M.D.
17-186-W  Patrick Gerard Rosario, M.D.
17-190-W  Hassan Nicholas Shamma, M.D.
17-200-M  Robert Lee Wheeler, M.D.
18-18-W  Alison Marie Wilson, M.D.
18-19-W  Jessica Rose Galang Ybanez-Morano, M.D.

INITIATED COMPLAINTS

18-41-W
18-42-W
WITHDRAWAL OF PREVIOUS INITIATED COMPLAINTS

18-06-W
18-11-W
18-13-W
18-15-W

FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14

17-123-W    Sarah Brooke Cash, M.D.

CONSENT ORDERS

Dr. Challa requested that the Board authorize the Complaint Committee to move forward with offering twelve Consent Orders and/or Amended Consent Orders in ongoing Complaint Committee matters. The motion of the Complaint Committee was given by Dr. Challa, and the motion carried.
FULLY EXECUTED CONSENT ORDERS

Dr. Challa reported that since the January meeting, fully executed Consent Orders have been entered with respect to the following licensees:

George Michael Dwyer, M.D. – On January 8, 2018, the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $500.00 for being unable to produce documentation during the CME audit which demonstrated successful completion of the required Board approved course on drug diversion training and best practice prescribing of controlled substances during the requisite time frame.

Joy Jeannine Juskovich, M.D. – On March 5, 2018, the licensee entered into a Consent Order with the Board which establishes the terms and conditions under which she may maintain her inactive status license and a process for Dr. Juskovich to demonstrate her fitness to practice medicine and, at a future date, petition for an active status license.

All Consent Orders are available on the Board’s website.

Dr. Challa moved that the Board accept and ratify the report of the Complaint Committee, and the motion carried.

Dr. Challa reported that the Complaint Committee reviewed certified court records regarding Rodney Lee Curtis, II, M.D., license number 15668, in association with an ongoing matter. Copies of certified court records were made available for all members to review. Dr. Challa asked Jamie Alley to present this matter to the Board.

Ms. Alley reported that §30-3-14(d) of the West Virginia Medical Practice Act imposes a nondiscretionary duty upon the Board to revoke a license if a licensee has been found guilty and / or pled guilty in a court of competent jurisdiction to any felony involving
prescribing, selling, administering, dispensing, mixing or otherwise preparing a prescription drug, including a controlled substance under state or federal law, for other than generally accepted therapeutic purposes. The Board has obtained certified documents from the Court of Common Pleas in Belmont County, Ohio which verify that Dr. Curtis was found guilty of two counts of drug trafficking involving controlled substances, two counts of possession of controlled substance drugs, and one misdemeanor count of possession of drugs. Reverend Bowyer moved that the Board concluded that it had received sufficient proof to determine that Dr. Curtis has been found guilty in a court of competent jurisdiction of four felonies involving prescribing, selling, administering, dispensing, mixing or otherwise preparing a prescription drug, including a controlled substance under state or federal law, for other than generally accepted therapeutic purposes, and that his license therefore be revoked pursuant to W. Va. Code § 30-3-14(d). Dr. Rahim seconded the motion. Dr. Faheem ordered a roll call vote upon the motion. A vote was taken:

Reverend O. Richard Bowyer – aye
Kishore K. Challa, M.D. – aye
Timothy Donatelli, D.P.M. - aye
Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P., - aye
Reverent Janet Harman – aye
Carrie Lakin, D.P.M. – aye
David Mullins, M.D. – aye
Victoria Mullins, P.A.-C. – aye
Mustafa Rahim, M.D. – aye
Ashish Sheth, M.D. – aye
Wes Steele, M.D. – aye
Matthew Upton, M.D. – aye
Rusty Wooton – aye
K. Dean Wright, P.A.-C. – aye
By unanimous vote, with a quorum of the Board present and voting, the motion carried.

There being no further business to consider, Mr. Wright moved that the meeting be adjourned. Mr. Wooton seconded, and the motion carried.

Ahmed D. Faheem, M.D., D.L.F.A.P.A.  
President

Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P.  
Secretary
CALL TO ORDER

Public Comments

Announcements

Approval of Minutes – March 19, 2018

Committee and Staff Reports, Discussion and Action:

- **Consideration of Recommended Decision and Possible Board Action**
  - Stephen Scott Brown, M.D.

- **Executive/Management Committee Report**
  - Correspondence Received Regarding the Corporate Practice of Medicine
  - Medical Professional Liability Reporting
    - Proposed revisions regarding reporting settlement / judgments to the Board
    - Correspondence Received Requesting Expungmenet of Report of Settlement
      - Abnash C. Jain, M.D.
      - Brian Powell, M.D.
      - Alison Wilson, M.D.
      - Mahreen Hashmi, M.D.
  - Review of Board Policies and/or Procedures and Proposed Updates
    - Collaborative Relationships for Prescriptive Authority with APRNs or Certified Nurse Midwives
  - Board of Medicine Guidance Regarding Closing or Departing from Practice
  - Board of Medicine Guidance Regarding Termination of the Patient – Physician Relationship
  - Board of Medicine Guidance Regarding Records Retention
  - Fiscal Reports / Purchasing Card Transactions for March and April 2018
- 2019 Budget
- Updates
  - 2018 Renewal
  - 2018 Upcoming Presentations/Requests
  - Staffing
  - Strategic Planning
- Report of Other Discussion Which Occurred at the May 6, 2018 Meeting

- **Legislative Committee Report**
  - Report Regarding the FSMB Annual Meeting
  - Board of Medicine Legislative Rules 11 CSR 1B and 11 CSR 6
  - Board of Medicine Legislative Rule 11 CSR 1A
  - Update on the 2018 Legislative Session
    - Action by the Governor
    - Senate Bill 273
  - Regulatory Moratorium
  - Rulemaking for the 2019 Legislative Session
    - 11 CSR 1A
    - Education Permit
  - 2018 Special Meetings
  - Report of Other Discussion Which Occurred at the May 6, 2018 Meeting

- **Personnel Committee Report**
  - Employee Evaluation Review and Recommendation
  - Report of Other Discussion Which Occurred at the May 6, 2018 Meeting

- **Board Attorney Report**
  - Update on Pending Litigation Matters
    - *Shivkumar Iyer, M.D. v. West Virginia Board of Medicine*
    - *Omar Khalid Hasan, M.D. v. West Virginia Board of Medicine*
  - Pending Public Hearings

- **Physician Assistant Committee Report**
  - Consent Order Update
  - Committee Recommendations on Licensure Applicants (Physician Assistants)
• Appearances
• Discussion
• New Applicants
• Reinstatement / Reactivation
  ▪ Report of Other Discussion Which Occurred at the May 5, 2018 Meeting

• Licensure Committee Report
  ▪ Consent Order Update
  ▪ Committee Recommendations on Licensure Applicants (Medical Doctors and Podiatric Physicians)
    • Appearances
    • Discussion
    • New Applicants
    • Reinstatement / Reactivation
  ▪ Report of Other Discussion Which Occurred at the May 5, 2018 Meeting

• Complaint Committee Report
  ▪ Closures
  ▪ Initiated Complaints
  ▪ Findings of Probable Cause to Substantiate Charges of Disqualification Under §30-3-14, if any
  ▪ Authorization of Consent Orders
  ▪ Consent Order Update
  ▪ Other Matters Originating from the May 6, 2018 Meeting

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE
Board Meeting Minutes
May 7, 2018

A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 7th day of May 2018 at 9:00 a.m.

The following Board members were present for the meeting:

Ahmed D. Faheem, M.D., D.L.F.A.P.A., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P., Secretary
Reverend O. Richard Bowyer
Timothy Donatelli, D.P.M.
Reverend Janet Harman
Carrie Lakin, D.P.M.
David Mullins, M.D.
Victoria Mullins, P.A.-C.
Mustafa Rahim, M.D.
Ashish Sheth, M.D.
Wes Steele, M.D.
Matthew Upton, M.D.
Russell O. Wooton
K. Dean Wright, P.A.-C.

The following Board member was absent:

Harry Duncan, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Greg S. Foster, Esq.
Jamie C. Frame
Leslie A. Thornton, CMBI
Andrew R. Wessels
The following representative from the Attorney General’s office was present:

Kelli Talbott, Deputy Attorney General

Dr. Faheem called the meeting to order. Dr. Rahim moved that the March 19, 2018 board meeting minutes be approved. Reverend Bowyer seconded, and the motion carried.

Dr. Faheem announced that in preparation for the election of officers at the July 2018 Board meeting, he has established a Nominating Committee which will consist of the following members:
Reverend O. Richard Bowyer, Chair
Victoria Mullins, P.A.-C.
Matthew Upton, M.D.

He further announced that if any Board member is interested in running for office or would like to recommend a fellow Board member for nomination, to contact a member of the Nominating Committee. The Committee will meet in June to develop a slate of nominees for the election of officers at the July 2018 meeting of the Board.

Dr. Faheem introduced Kelli Talbott, Deputy Attorney General, who was present to advise the Board in the matter of West Virginia Board of Medicine, Petitioner, v. Stephen Scott Brown, M.D., Respondent, Complaint No. 17-101-W. The following members declared a conflict with regard to this matter, and left the meeting room at this time:
Ahmed D. Faheem, M.D., President
Kishore K. Challa, M.D., Vice President
Reverend O. Richard Bowyer
Ashish P. Sheth, M.D.
Wes Steele, M.D.
Matthew Upton, M.D.

Mr. Spangler, Ms. Alley, Ms. Thornton, and Mr. Foster also left the meeting room at this time.

Prior to today’s meeting, a copy of the hearing documents, the Hearing Examiner’s Recommended Findings of Fact, Conclusions of Law and Recommended Decision, and a draft Board of Medicine Final Decision and Order was made available to the members who are not conflicted from this matter. A quorum of the Board being present, Ms. Talbott gave the procedural history of the case and reported on the Hearing Examiner’s Findings of Fact, Conclusions of Law and Recommended Decision. Following discussion, Dr. Rahim moved that the Board adopt and accept the Hearing Examiner’s Recommended Findings of Fact, Conclusions of Law and Recommended Decision as presented. Dr. Rahim further moved that the Board modify the Final Decision and Order to include that Dr. Brown shall not be eligible to apply for, or to be considered for, re-licensure with the Board until he has obtained unrestricted re-licensure in the Commonwealth of Kentucky. Mr. Wooton seconded, and the motion carried unanimously.

Dr. Faheem reported that the Executive/Management Committee met on Sunday, May 6, 2018, at which time the Committee reviewed and discussed correspondence concerning a request to address the prohibition against the corporate practice of medicine as it applies to physician-owned for-profit hospitals. The requestor asked the Board to extend the current exemption for non-profit hospitals to for-profit hospitals which are entirely physician owned. The Committee considered this issue at length and heard from the attorney for the hospital in question. Based upon its review, the Committee had several unanswered questions and has directed staff to research how other states apply the prohibition against the corporate practice of medicine to both for-profit and not-for-profit hospitals, and report back. The Committee will revisit the issue at its July 2018 meeting.
Dr. Faheem reported that at its March 2018 meeting, the Committee authorized Board staff to begin reviewing the Board’s Medical Professional Liability Claim Report Form, and to present proposed modifications to the Committee. Board staff concluded that no modifications were needed to the report form. Draft Guidelines for Identifying and Reporting Practitioners on a Medical Professional Liability Claim Report were presented to the Committee for consideration. These guidelines will be available on the Board’s website and will be provided to medical malpractice insurance carriers. Additionally, Committee members reviewed a draft letter to be sent to practitioners informing them when the Board has been notified a medical malpractice payment was made on their behalf and allowing them 30 days to contest the validity of the report prior to the report becoming part of the physician’s historical record. The Committee recommended that the Board adopt the Guidelines and the letter as presented. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that at its March 2018 meeting, the Committee directed legal staff to review a request for expungement of a medical malpractice settlement claim report and provide a recommendation at the next meeting regarding this matter. Since the March meeting, the Board has received additional requests for expungement of medical malpractice settlement claim reports. The Committee recommended that the Board expunge the medical malpractice settlement claim report for the following licensees:

Abnash C. Jain, M.D.
Brian Powell, M.D.
Alison Wilson, M.D.

The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that a request was submitted for expungement of a medical malpractice settlement claim report involving Mahreen Hashmi, M.D. Upon review, Board
staff have determined that Dr. Hashmi was identified by name in the Notice of Claim and complaint, and was identified by conduct in the Release. Therefore, the Committee recommended that the Board decline the request for expungement of the medical malpractice settlement claim report regarding Mahreen Hashmi, M.D. The motion of the Committee was given by Dr. Faheem, and the motion carried.

The Committee recommended that the Board delegate authority to staff to act upon expungement requests related to malpractice reporting if it is clearly determined that the licensee was improperly reported to the Board, and that the Executive / Management Committee will review all requests that are questionable. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that the Board’s current policy regarding collaborative relationships for prescriptive authority with advanced practice registered nurses or certified nurse midwives was adopted in 2012. The Committee recommended that the Board adopt the Policy Statement Regarding Minimum Requirements and Guidelines for Physicians in Collaborative Relationships for Prescriptive Authority with Advanced Practice Registered Nurses; Standard of Practice as presented. The motion of the Committee was given by Dr. Faheem, and the motion carried.

Dr. Faheem reported that Board staff frequently receive telephone calls inquiring about closing or departing from a medical practice, termination of the patient-physician relationship, and records retention requirements. Currently, callers are referred to Board of Medicine newsletter articles, which were published in December 2015, that relate to these topics. Staff have requested, and the Committee has approved placing the articles concerning terminating the physician-patient relationship and closing a medical practice in a more prominent position on the Board’s website. Board staff will seek input from other entities regarding record retention guidelines and will revise the records retention article accordingly for inclusion on the website at a later date.
Dr. Faheem reported that the Committee approved the fiscal report and purchasing card transactions for the months of March and April 2018.

Dr. Faheem reported that the 2018 license renewal for physicians with last names beginning with the letters A-L, controlled substance dispensing practitioners with last names beginning with the letters A-L, and PLLCs began on May 2, 2018. The Board is utilizing paper renewal applications for controlled substance dispensing practitioner registrations and PLLCs.

Dr. Faheem reported that the following individuals will present to the Board at upcoming meetings:

Michael Zanolli, M.D. of the FSMB will present at the July 2018 meeting
Dawn Morton-Rias, Ed.D., P.A.-C. will present at the November 2018 meeting

Dr. Faheem reported that the Complaints Coordinator and the Paralegal for the Board recently resigned. We wish them both well in their future endeavors.

Dr. Faheem reported that the annual Board of Medicine strategic planning session will be held on Saturday October 6, 2018. Further information will be provided as it becomes available.

Dr. Faheem moved that the Board accept and ratify the report of the Executive / Management Committee. The motion carried.

Dr. Faheem reported that the Personnel Committee met with Mr. Spangler on Sunday, May 6, 2018, and reviewed staff performance evaluations and current staffing.
composition. The Committee discussed the Executive Director’s recommendatin for salary increases. The Committee recommended that the Board adopt the Executive Director’s recommendations for salary increases for the fiscal year 2019 in a manner consistent with the State Budget Office’s across the Board raises as established by the legislature. The motion of the Committee was give by Dr. Faheem, and the motion carried.

Dr. Faheem moved that the Board accept and ratify the report of the Personnel Committee. The motion carried.

Mr. Wright reported that the Legislative Committee met on Sunday, May 6, 2018, at which time Mr. Spangler reported that several board and staff members recently attended the Federation of State Medical Boards (FSMB) annual meeting in Charlotte, N.C.

During the House of Delegates meeting, Mr. Spangler served as a teller and Dr. Faheem was elected to the FSMB Nominating Committee. Additionally, the House of Delegates adopted a proposal from the Bylaws Committee which creates a Staff Fellow category that will allow each member board to denote one individual to serve as a Staff Fellow of the FSMB. Dr. Faheem has nominated Mr. Spangler to serve in this capacity for the Board of Medicine.

Additionally, during the Administrators In Medicine (AIM) meeting, it was announced that beginning in October 2019, there will be a certification program available to licensing Board analysts. Our Board is excited to participate in this upcoming certification program.

Mr. Wright reported that the final version of the Board’s legislative rules 11 CSR 1B and 11 CSR 6 have been filed with the Secretary of State’s office and will become effective on July 1, 2018. Legislation was passed during the 2018 session which directs the
Board to strike 12.1.ii.B of 11 CSR 1A, prohibiting the use of patient testimonials in physician advertising, and re-letter the remaining paragraph. The Secretary of State’s office has directed the Board to modify 11 CSR 1A prior to May 9, 2018. The Committee recommended that the Board authorize staff to file 11 CSRA 1A with the Secretary of State’s Office. The motion of the Committee was given by Mr. Wright, and the motion carried. This change will be communicated to Board licensees.

Mr. Wright reported that the following bills, which were monitored by the Committee, completed the legislative process, but were vetoed by the Governor:

Senate Bill 313 – waiving occupational fees and licensing requirements for certain low-income individuals, military families and young workers

Senate Bill 434 – specifying documents not subject to discovery in certain proceedings

Senate Bill 442 – establishing universal forms and deadlines when submitting prior authorizations electronically

House Bill 4199 – permitting a nursing home to use trained individuals to administer medication

Mr. Wright reported that Senate Bill 273, reducing the use of certain prescription drugs, was passed during the 2018 legislative session and becomes effective on June 7, 2018. A synopsis of this bill is available on the Board’s website. The Committee has concerns with the requirement in this bill which requires a practitioner to conduct and document the results of a physical examination every 90 days for any patient that he or she continues to treat with any Schedule II controlled substance. The Committee recommended that the Board authorize Dr. Faheem to write a letter to the Governor which identifies the Board’s concerns regarding Senate Bill 273. The motion of the Committee was given by
Mr. Wright, and the motion carried.

Mr. Wright reported that the Governor has issued an Executive Order known as the “Regulatory Moratorium” which provides that “prior to filing any proposed rule with the Secretary of State and the Legislative Rule-Making Review Committee agencies shall provide written notice to the Governor.” Mr. Spangler has spoken with Ashley Summit, counsel at the Governor’s office, who stated that proposed modifications to an existing rule or any new rule will need to be submitted to her via e-mail for review. Ms. Summit will review the rule and will respond via e-mail, within a couple of days, indicating whether or not the agency is authorized to move forward with filing the proposed rule with the Secretary of State’s office. The Committee encouraged Mr. Spangler to communicate with other Chapter 30 Boards to obtain their thoughts and opinions regarding the moratorium.

Mr. Wright reported that prior to the July 2018 meeting, rulemaking action will need to be taken with regard to 11 CSR 1A to bring it into alignment with the statutory changes regarding residency requirements for international medical graduates and to promulgate legislative and emergency rules regarding educational permits. The Committee scheduled a special meeting for Thursday June 14, 2018 at 5:00 p.m.

Mr. Wright moved that the Board accept and ratify the report of the Legislative Committee. The motion carried.

Mr. Foster provided an update on two pending litigation matters. The matter of Shivkumar Iyer, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent is currently going through the appeal process, and the Board is awaiting the Supreme Court’s ruling.
Mr. Foster reported that the Board is awaiting a decision by the Kanawha County Circuit Court in the matter of Omar Khalid Hasan, M.D., Petitioner, v. West Virginia Board of Medicine, Respondent.

Mr. Foster reported that there are two complaint matters which are in a continued posture, and the public hearings in those matters will be rescheduled at a later date.

Mr. Wright provided the report of the Physician Assistant Committee which met on Saturday, May 5, 2018.

Mr. Wright reported that at the March 19, 2018 Board meeting, the Physician Assistant Committee recommended, and the Board approved, that Sara Leigh LaSala, P.A.-C. be granted licensure pursuant to a Consent Order with the following terms: (1) that any practice agreement submitted must be reviewed by the Physician Assistant Committee; (2) that Ms. LaSala practice under direct collaboration for a minimum of six months; and (3) that Ms. LaSala’s collaborating physician send quarterly status reports updating the Committee on her progress and a recommendation regarding when direct collaboration should be lifted. Ms. LaSala agreed to these terms and a Consent Order to that effect was entered on April 24, 2018.

Mr. Wright asked Board members to review the list of physician assistants up for action, and to advise of any conflicts. No conflicts were declared.

The Physician Assistant Committee recommended that the following applicants be approved for physician assistant licensure:

Danielle Marie Abel, P.A.-C.
Caitlyn Anne Andryka, P.A.-C.
Matthew Edward Barker, P.A.-C.
Morgan Leigh Copeland, P.A.-C.
Christopher Wayne Milligan, P.A.-C.
Megan Diane Przybrowski, P.A.-C.
Beth Ann Ryan, P.A.-C.
Susan Post Tubens, P.A.-C.

The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that the Committee will maintain the application of Cheryl-Ann Leslie-Theal, P.A.-C. on hold pending receipt of additional information and will request that Ms. Leslie-Theal appear before the Committee at its July 2018 meeting.

The Physician Assistant Committee recommended that Saudat Olayink Olushola Akinola-Hadley, P.A.-C. be approved for licensure pending receipt of an original verification document. The motion of the Physician Assistant Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that Richard Santostefano, P.A.-C. entered into a Consent Order with the Board on October 4, 2017, which restricted his practice as a physician assistant to direct collaboration for a minimum period of six months. Mr. Santostefano’s collaborating physician has submitted quarterly status reports and has recommended lifting the restriction of direct supervision. The Committee recommended that Mr. Santostefano be released from his Consent Order through an Order Terminating Consent Order. The motion of the Committee was given by Mr. Wright, and the motion carried.

The Physician Assistant Committee recommended that Lindsey Megan Fancett, P.A.-C.’s amended application be accepted, and that Ms. Fancett be approved from licensure. The motion of the Committee was given by Mr. Wright, and the motion carried.
Mr. Wright reported that due to a data entry error, the license expiration date for Cynthia Jean Hurst, P.A.-C. was out of alignment with the Board of Medicine physician assistant licensure cycle. Ms. Hurst has submitted a modified renewal application. The Committee recommended that the Board accept Ms. Hurst’s license renewal application and adjust her license expiration date to March 31, 2019. The motion of the Committee was given by Mr. Wright, and the motion carried.

The Committee received correspondence from Janice Shipe-Spotloe, P.A.-C, Director of Advanced Practice Professionals at West Virginia University Medicine asking the Board: (1) to remove the current requirements which limits the number of physician assistants a physician may collaborate with; and (2) to make an exception regarding this requirement for clinics which are part of the West Virginia University Heart & Vascular Institute. Currently, a physician may collaborate with up to five physician assistants. In an emergency room or other hospital setting, a physician may collaborate with up to five physician assistants per shift. The Committee directed staff to send a letter to West Virginia University Medicine which explains that the collaboration limitations identified in the submitted correspondence are set by statute, and the Board does not have the authority to change them or approve exceptions to them absent legislative action.

Mr. Wright reported that the Committee reviewed two practice agreements which involves the use of telemedicine for Medication Assisted Treatment (MAT).

Mr. Wright reported that Board staff have authorized 93 practice agreements for the period of March 10, 2018 to May 4, 2018. Additionally, 207 alternate collaborating physicians were designated.

Mr. Wright moved that the Board accept and ratify the report of the Physician Assistant Committee. The motion carried.
Dr. Rahim delivered the report of the Licensure Committee, which met on Saturday, May 5, 2018.

Dr. Rahim reported that five applicants appeared before the Licensure Committee to discuss their applications. Based thereupon the Committee made the following recommendations:

Approve Matthew Steven Zell, M.D. for permanent medical licensure; and

Approve Alddo Antonia Molinar, M.D. for permanent medical licensure pending receipt of the patient injury compensation fund assessment fee.

The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the Committee will maintain the application for the following individuals on hold pending receipt of additional information:

Cynthia Erin Prather, M.D.
Richard Mendel, M.D.
Tarek Alasil, M.D.

Dr. Rahim reported that in addition to the applicants listed above, Walid Mohamed Radwan, M.D. appeared before the Committee to discuss a matter related to his current Consent Order. No action was taken with regard to Dr. Radwan.

Dr. Rahim reported that the Licensure Committee reviewed and discussed thirteen applications. Based thereupon, the Committee made the following recommendations:
Approve the following applicants for permanent medical licensure:

Mark Daniel Fierro, M.D.
Christopher Paul Graviss, M.D.
John Willard Horns, M.D.
Casey John Jason, M.D.
Kim Bridgette Jones-Fearing, M.D.

Approve for permanent medical licensure pending receipt of the patient injury compensation fund assessment fee:

Diana Whiteman Muldrow, M.D.
David Douglas Schram, M.D.

Accept the medical school education verification for Gita Haddadi, M.D. from Isfahan University in Iran as satisfactorily verified based on the following factors: there is currently no diplomatic relationship between the Iranian and US governments, Isfahan University has not complied with the requests for verification of education from the FCVS; and in accordance with current Board policy, two of the applicant’s classmates have submitted notarized letters attesting to graduating from medical school with her, and approve Dr. Haddadi for permanent medical licensure.

Accept the total hours of continuing medical education as satisfactory and approve the following applicants for reactivation of permanent medical licensure pending receipt of the patient injury compensation fund assessment fee:

Kevin Gerard Hibbett, M.D.
Justin Alexander Saunders, M.D.

The motion of the Licensure Committee was given by Dr. Rahim, and the motion carried.
Dr. Rahim reported that the Committee will maintain the application of Mohammed Ahmed Abdel Salam Osman, M.D. on hold until the July 2018 Board meeting.

Dr. Rahim reported that the following applicants will be invited to appear before the Committee in May:

Benjamin Jay Bryant, M.D.
Gregory Arnold Nelcamp, M.D.

Dr. Rahim asked Board members to review the list of physicians up for action and to advise of any conflicts. No conflicts were declared.

The Committee recommended that the Board approve the following applicants for licensure:

Anil Agarwal
Farzad Amiri
Soon Bahramil
Cortney Rae Ballengee
Elizabeth Marianne Bass
Bonny Lorraine Beck
Katherine Marie Beckett
Michael D. Berven
Anthony Michael Briningstool
Benjamin Keith Brooks
Thomas Darrell Carico
Antonios Emanuel Chryssos
Craig Daniel Clark
Mircea N. Coca
Neil Russell Copeland
Jonathan David Cuda
Heman Kirit Dave
Marek Tadeusz Didluch
Susan Victoria Ellor
Cherie Darlene Ertha
Kirmanj Muhammad Faraj
Linda Ann Frielings
Gayle Ann Galan
Juanita Garces
Salwa Morcos Gendi
Christopher Alan Gisler
Kenneth Alan Griggs
Priyadarshan Gupta
Shipra Gupta
Srilekha Sudha Hota
Bruce Oliver Hough
Ronald Jay Innerfield
Vishal Hitendrabhai Jariwala
Russell Oliver Kosik
Richard Scott Krupkin
Elizabeth Jane May
Bruce McNeil Milburn, Jr.
Stephen Lawrence Miller
Melissa Ann Moore
Marco Naguib
Suman Narasimhamurthy
Arbi Nazarian
Matthew David Nicholls
Matthew David Nitz
Orestis Pappas
Claire Elizabeth Paxton
David Matthew Paxton
Lucas Benjamin Payor
Colleen Megan Pettrey
Behdod Poushamchi
Apoorv Prasad
Wasiq Faraz Rawasia
Travis Logan Rearick
Andrew Mark Reibach
Syed Muhammad Azfar Rizvi
Brian Edwin Rose
Neil Bruce Rosenshein
Amit Arun Sangave
Mahdis Sarrafi
Katherine Blaney Seachrist
Sonya Colleen Seccuro
Rohan Vipulkumar Shah
Marlana Renee Sheridan
Robert Paul Smith
Anthony Francis Steratore
Levi Daniel Stevens
Suraj Suku
Bonnie Heather Templeton
Parthasarathy Deenadayalan Thirumala
Jacklyn Bichthuy Tran-Nguyen
Sean Robert Tubens
Wallisa Tejarnette Vaughn
Jeffrey Lawrence Werchowski
Philip Matthew Yargosz
Yosaf Zeyed
Sasa Zivkovic
Candace Folley Zubricky

Permanent medical licensure pending receipt of the patient injury compensation fund assessment fee:

Toks Ebiyon Macarthy
Mark Daniel Miller
Matthew Scott Ruyie
Terry Gene Sanders, II
David Shi

Reactivation of permanent medical licensure:

Sean Matthew Porbin

Permanent podiatric physician licensure:

Jeffrey Addison Michael
Daniel Robert Wright

The motion of the Committee was given by Dr. Rahim, and the motion carried.

Dr. Rahim reported that the following eight applicants, listed along with their state of principal licensure, were granted permanent medical licensure through an Interstate Medical Licensure Compact Commission (IMLCC) application between the March 2018 and May 2018 Board meetings:
John David Harrington    NE
Heather Dawn Hawthorne  KS
Omar Krad              IL
Jane Eleanor Lykins    AZ
Rastislav Osadsky      AZ
Lee Douglass Roberson  AL
Adam Justin Rodos      IL
Diya Hassan Tantawi   WI

Also, during this period, the Board received four requests for a Letter of Qualification (LOQ) to be issued by the Board as the state of principal licensure. Letters of Qualification were issued to:

Samir Agarwal
Wesley Lee Asbury, Jr.
Sean Thomas Keesee
Hang Thanh Vu

The following applicants requested but were ineligible to receive a Letter of Qualification:

Ronald Jay Innerfield
Stephen Ray Smith

Dr. Rahim moved that the Board accept and ratify the report of the Licensure Committee. The motion carried.

Dr. Challa delivered the report of the Complaint Committee, which met on Sunday, May 6, 2018.

CLOSURES

16-152-W  Hassan Arshad Jafary, M.D.
17-20-W     Hassan Arshad Jafary, M.D.
17-135-W     Shawn Wayne Coffman, M.D.
17-203-S     Bruce Max Rothchild, M.D.
18-05-W      Michael Anthony Covelli, M.D.
17-195-S     Shelana Marie Gibbs-McElvy, M.D.
18-26-M      Coy Alden Flowers, M.D.
18-31-S      Mohamad Bassam Haffar, M.D.
18-25-P      Sandra K. May, P.A.-C.
18-28-M      Pushpa Nambi Joseph, M.D.
18-30-B      Muhammad Salman, M.D.
18-65-H      Russell Irvin Voltin, M.D.

INITIATED COMPLAINTS

18-77-W
18-78-W
18-79-W
18-80-W
18-81-W
18-82-W
18-83-W
18-84-W

WITHDRAWAL OF PREVIOUS INITIATED COMPLAINT

18-58-W

FINDINGS OF PROBABLE CAUSE TO SUBSTANTIATE CHARGES OF DISQUALIFICATION UNDER WV CODE §30-3-14

17-100-W     Nathan David Airhart, M.D.
16-107-W     Steven Scott Melek, D.P.M.
16-36-W      David Carol Shamblin, M.D.
16-154-W     David Carol Shamblin, M.D.

CONSENT ORDERS

Dr. Challa requested that the Board authorize the Complaint Committee to move forward with offering four Consent Orders and/or Amended Consent Orders in ongoing Complaint Committee matters. The motion of the Complaint Committee was given by Dr.
Challa, and the motion carried.

**FULLY EXECUTED CONSENT ORDERS**

Dr. Challa reported that since the May meeting, fully executed Consent Orders have been entered with respect to the following licensees:

Anna Nicole Antolini, P.A.-C.: On April 30, 2018 the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $200.00 for an inaccurate response to Professional Practice Question Number Twelve on her renewal application.

Darci Nicole Barger, P.A.-C.: On April 30, 2018 the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $200.00 for an inaccurate response to Professional Practice Question Number Twelve on her renewal application.

Stephen J. Mallott, M.D.: On April 18, 2018 the licensee entered into a Consent Order with the Board which imposed a public reprimand for improper treatment of a patient and placed his license in a probationary status for a period of two years with terms, conditions, limitations and restrictions regarding the licensee’s prescribing practices.

Isabelita T. de Mesa, M.D.: On April 18, 2018 the licensee entered into a Consent Order with the Board which imposed a public reprimand for her dishonorable, unprofessional and unethical behavior with respect to her failure to secure her prescription pads and for illegible medical records. She must also successfully enroll and complete Case Western Reserve University’s Intensive CME Course in Medical Documentation: Clinical, Legal and Economic Implications for Healthcare Providers Clinical.
Alberto A. Fernandez, M.D.: On April 24, 2018 the licensee entered into a Consent Order with the Board which imposed a public reprimand for his dishonorable, unprofessional and unethical conduct and suspended the license. The suspension imposed by the Consent Order shall remain in effect until it is lifted or otherwise modified pursuant to a subsequent Order issued by the Board.

Joseph Henry Matusic, M.D.: On April 18, 2018 the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $400.00 for an inaccurate response to Professional Practice Question Number Twelve on his renewal application.

Scott Alan Naegele, M.D.: On April 18, 2018 the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $400.00 for an inaccurate response to Professional Practice Question Number Twelve on his renewal application.

Michael Roy Spindel, M.D.: On April 24, 2018 the licensee entered into a Consent Order with the Board which imposed a fine in the amount of $400.00 for an inaccurate response to Professional Practice Question Number Twelve on his renewal application.

All Consent Orders are available on the Board’s website.

Dr. Challa reported that the next matter relates to possible discipline of a licensee, Steven Scott Melek, D.P.M., license number 269. Dr. Challa asked if there were any declarations of conflict by the Board members present. No conflicts were declared.

Dr. Challa reported that the Complaint Committee has provided Board members with evidence concerning a podiatric physician who may constitute a potential immediate danger to the public if he is allowed to continue to be licensed to practice.
The Complaint Committee has been investigating Complaint No. 16-107-W, against Dr. Melek. This complaint was initiated by the Complaint Committee based upon a report from a physician regarding Dr. Melek’s prescribing of opioid medication to a patient. The significant issues of this case are discussed in the report submitted by the Board’s podiatric expert and investigative reports prepared by Board investigators. The issues are further articulated in the proposed preliminary findings of fact which were forwarded to the members of the Board for consideration.

Mr. Wessels joined the meeting at this time.

Dr. Challa reported that yesterday, May 6, 2018, the Complaint Committee reviewed all of the information developed by the investigation since the Committee’s March 11, 2018 meeting, and determined that, with respect to probable cause exists to substantiate charges to disqualify Dr. Melek from the practice of medicine in West Virginia due to apparent violations of:

a. W. Va. Code § 30-3-14(c)(13), related to prescribing a controlled substance other than in good faith and in a therapeutic manner in accordance with accepted medical standards and in the course of the physician’s professional practice; and/or
b. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.2.a, related to dishonorable unethical or unprofessional conduct including, but not limited to prescribing or dispensing any controlled substance:
   i. With the intent or knowledge that a controlled substance will be used or is likely to be used other than medicinally or for an accepted therapeutic purpose; and/or
   ii. With the intent to evade any law with respect to the sale, use or disposition of the controlled substances; and/or
   iii. For the licensee's personal use, or for the use of his or her immediate family when the licensee knows or has reason to know that an abuse of controlled substance(s) is occurring, or may result from such a practice; and/or
iv. In such amounts that the licensee knows or has reason to know, under the attendant circumstances, that the amounts prescribed or dispensed are excessive under accepted and prevailing medical practice standards; and/or

c. W. Va. Code § 30-3-14(c)(20) and W. Va. Code R. § 11-1A-12.1.i, related to demonstrating a lack of professional competence to practice medicine or podiatry with a reasonable degree of skill and safety for patients; and/or

d. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.1.x, related to engaging in malpractice or failing to practice medicine with that level of care, skill and treatment which is recognized by a reasonable, prudent, podiatric physician; and/or

e. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.1.e and j, related to engaging in unprofessional conduct of a character likely to deceive, defraud or harm the public or any member thereof; and/or

f. W. Va. Code §30-3-14(c)(19), related to gross negligence in the use and control of prescription forms; and/or

g. W. Va. Code §30-3-14(c)(16) and W. Va. Code R. §11-1A-12.1.aa, related to delegating professional responsibilities to a person whom the licensee knew or had reason to know is not qualified by training, experience or licensure to perform the responsibilities; and/or

h. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.1.o, related to the failure to perform any statutory or legal obligation placed upon a licensed physician or podiatric physician, including but not limited to his obligation pursuant to W. Va. Code § 60A-9-5a and W. Va. Code R. § 11-10-3 to access the West Virginia CSMP in association with his prescribing of controlled substances to treat chronic nonmalignant pain; and/or

i. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. §11-1A-12.1.bb, related to the violation of any law which relates to the practice of medicine or podiatric medicine and surgery, when the licensee knows or should know that such action is violative of the law; and/or

j. W. Va. Code § 30-3-14(c)(11) and W. Va. Code R. §11-1A-12.jj, related to the failure to maintain a medical record justifying the course of treatment of a patient; and/or
k. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.1.w, related to self-prescribing controlled substances; and/or
l. W. Va. Code § 30-3-14(c)(17) and W. Va. Code R. § 11-1A-12.1.z, related to practicing medicine and surgery beyond the licensee’s scope of practice.

The West Virginia Medical Practice Act §30-3-14(k) provides that:
if the board determines the evidence in its possession indicates that a physician’s continuation in practice or unrestricted practice constitutes an immediate danger to the public, the board may take any of the actions provided for in subsection (j) of this section on a temporary basis and without a hearing, if institution of procedures for a hearing before the board are initiated simultaneously with the temporary action and begin within fifteen days of the action. The board shall render its decision within five days of the conclusion of a hearing under this subsection.

The Complaint Committee has concluded that the continued practice of Dr. Melek constitutes an immediate danger to the public and recommends that the Board ratify the Committee’s probable cause findings and that the Board further find that the criteria for summary suspension of Dr. Melek’s license have been met.

Dr. Challa moved that the Board accept and ratify the Complaint Committee report with the exception of the possible summary suspension matter, which will require separate consideration and action by the Board. The motion carried.

The following members left the meeting room at this time:
Kishore K. Challa, M.D., F.A.C.C.
Reverend O. Richard Bowyer
Wes Steele, M.D.
Ashish P. Sheth, M.D.
Matthew Upton, M.D.

Ms. Alley provided an overview of the facts and circumstances forming the basis
of the recommendation from the Complaint Committee. After discussion, and with a quorum of the Board present and voting, Dr. Gupta moved that the Board find that it has received evidence that indicates that the continuation in practice of Dr. Melek is a threat to the public, and that the Board summarily suspend Dr. Melek's podiatric license. Mr. Wright seconded, and the motion carried unanimously. Dr. Gupta moved that the summary suspension become effective at 11:59 p.m., today, May 7, 2018. Dr. Lakin seconded, and the motion carried unanimously. Dr. Gupta moved that Notice of Hearing on the summary suspension be provided to the licensee, informing him that a hearing will be held on May 21, 2018 beginning at 9:00 a.m. at the Board office. Dr. Mullins seconded, and the motion carried unanimously. Dr. Gupta moved that the Board authorize the Hearing Examiner to handle non-depository matters regarding this matter. Reverend Harmon seconded, and the motion carried unanimously.

All board members who had left the meeting room, returned to the room at this time.

There being no further business to consider, the meeting adjourned.

ADJOURNMENT

Ahmed D. Faheem, M.D., D.L.F.A.P.A.
President

Rahul Gupta, M.D., M.P.H, M.B.A., F.A.C.P.
Secretary
CALL TO ORDER

Public Comments

- Rulemaking for the 2019 Legislative Session
  - 11 CSR1A
  - Educational Permit

- Regulatory Moratorium

ADJOURNMENT
WEST VIRGINIA BOARD OF MEDICINE

Board Meeting Minutes

June 19, 2018

A meeting of the West Virginia Board of Medicine was held at 101 Dee Drive, Charleston, West Virginia, on the 19th day of June 2018 at 5:00 pm.

The following Board members were present for the meeting:

Reverend Janet Harman
Victoria Mullins, P.A.-C.

The following Board members attended the meeting via teleconference:

Ahmed D. Faheem, M.D., D.L.F.A.P.A., President
Kishore K. Challa, M.D., F.A.C.C., Vice President
Rahul Gupta, M.D., M.P.H., M.B.A., F.A.C.P., Secretary
Reverend O. Richard Bowyer
Harry Duncan, M.D.
Carrie Lakin, D.P.M.
David Mullins, M.D.
Mustafa Rahim, M.D.
Wes Steele, M.D.
Matthew Upton, M.D.
Russell O. Wooton
K. Dean Wright, P.A.-C.

The following Board member was absent:

Ashish Sheth, M.D.

The following Staff members were present:

Mark A. Spangler, M.A.
Jamie S. Alley, Esq.
Jamie C. Frame

Dr. Faheem called the meeting to order. Prior to today's meeting, a copy of the proposed amendments to the Board's legislative rule 11 CSR 1A, Licensing and
Disciplinary Procedures: Physicians; Pediatric Physician and Surgeons, and copy of a proposed new rule series 11 CSR 12, Permitting and Disciplinary Procedures: Educational Permits for Graduate Medical Interns, Residents and Fellows, was made available to members for review.

Mr. Wright reported that the Legislative Committee met on June 14, 2018 to consider the proposed rules. The Committee recommends that the Board approve 11 CSR 1A as modified and authorize staff to move forward with promulgation of the rule. The motion of the Committee was given by Mr. Wright, and the motion carried.

Mr. Wright reported that the Committee recommends that the Board approve 11 CSR 12 as presented and authorize staff to move forward with promulgation of the legislative rule and an emergency rule. The motion of the Committee was given by Mr. Wright, and the motion carried.

Mr. Spangler reported that prior to filing the proposed rules with the Secretary of State’s Office, the Board will provide copies to the Governor’s Officer per the direction of the Legislative Committee.

There being no further business to consider, the meeting adjourned.

Ahmed D. Faheem, M.D., D.L.F.A.P.A.  
President

Rahul Gupta, M.D., M.P.H, M.B.A., F.A.C.P.  
Secretary