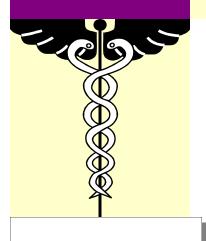
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INSIDE THIS ISSUE

License Renewals	1	
Board Member Profile Board Staff	2	
Did You Know? Board Members	3	
Board Actions AMA Notice	4	
Ending the Patient- Physician Relationship	5	
Continuing Medical Education Regulations	6	
Change of Address Form	7	
Change of Address Information Meeting Dates	8	

West Virginia Board of Medicine Quarterly Newsletter

LICENSE RENEWALS

On Friday, May 12, 2006, licensure renewal applications will be mailed certified to all medical doctors whose last names begin with the letters A through L. Renewal applications will be mailed to the address of record on file at the Board offices. The address of record is the address designated by each physician as his or her preferred mailing address. It is the responsibility of the licensee to keep this office apprised of any address change. In the event of a change of address, the licensee must notify the Board of the change, in writing. (See Change of Address Form on page 7).

As an alternative to the traditional paper renewal process, beginning Monday, May 15, 2006, the Board will have available an online renewal process for those medical doctors who meet all of the following criteria:

- 1. currently hold an ACTIVE medical license;
- 2. have obtained the required continuing medical education;
- 3. answer "no" to all questions listed on page five (5) of the paper application; and
- 4. desire to pay via credit/debit card.

Medical doctors who meet the above criteria are urged to renew online.

For a medical license to remain valid and in force, the fully completed renewal application and fee must be <u>RECEIVED</u> <u>BEFORE</u> Friday, June 30, 2006, at 5:00 p.m. The physician's medical license will be suspended if the required continuing medical education has not been obtained (see article on page 6).

In order to avoid automatic suspension of a medical license, a physician must either:

- 1. complete the six-page renewal application to renew the license; or
- 2. complete the one-page certification included in the renewal application packet to lapse/expire the license.

This information must be completed and <u>RECEIVED</u> <u>BEFORE</u> Friday, June 30, 2006, at 5:00 p.m.

If a licensee does not receive a renewal application, it is his or her responsibility to inform the Board and to request a duplicate. Please contact the Board's Renewal Coordinator at 304.558.2921, Ext. 218, or fax your written request for a duplicate application to 304.558.2084. A duplicate copy of the renewal application will be mailed to the licensee. Illegible and incomplete applications, as well as those received without the fee, will be returned. The Board will be unable to finalize the processing of any application that is not complete. Completion of the renewal application is the responsibility of the licensee.

Every application is computer-generated to include personalized information previously reported by the physician. However, each physician will need to review this information to ensure that it remains accurate. Each physician MUST provide a telephone number. The Board anticipates that this method of renewal will reduce the time necessary for the physician to complete the application.

BOARD MEMBER PROFILE

Bill P. May, D.P.M., served on the Board of Medicine for a ten-year period, from 1977 to 1987, appointed by then Governor Rockefeller. He served as the Board's Vice President in 1986 and 1987. Effective November 15, 2005, Dr. May was reappointed to the Board of Medicine by Governor Joe Manchin, III. He currently serves as a member of the Licensure and Physician Assistant Committees.

Dr. May was educated at Marshall University in Huntington and then from 1964 to 1968, he attended the Illinois College of Podiatric Medicine in Chicago. In 1968, Dr. May was licensed to practice podiatry in West Virginia, and he has been engaged in the private active practice of podiatry in Huntington for almost forty years. In Huntington, he holds admitting privileges at St. Mary's Hospital and Cabell Huntington Hospital. He is a member of the American Podiatric Medical Association and the West Virginia State Podiatric Medical Association.

Dr. May was one of the founders of the Cabell Huntington Surgery Center in Huntington and has done a post-marketing study for Sandoz Pharmaceuticals on Terbinifine and has given numerous lectures in West Virginia and Ohio on Terbinifine for the treatment of fungal infections.

Dr. May resides in Huntington, West Virginia, with his wife. They have two sons and three grandchildren.

Ext #	Staff of the West Virginia Board of Medicine 304.558.2921	
227	Robert C. Knittle, M.S.	Executive Director
214	Deborah Lewis Rodecker, J.D.	Counsel
215	Stephen D. Greer, II, J.D.	Prosecuting Attorney
212	M. Ellen Briggs	Administrative Assistant to the Executive Director
222	Leslie A. Higginbotham	Paralegal/Investigator
210	Charlotte A. Jewell	Receptionist/Physician Assistant Coordinator
216	Michael R. Lilly	Information Systems Coordinator
221	Crystal Lowe	Licensure Analyst
211	Janie Pote	Administrative Assistant to Legal Department
224	Pennie Price	Verification Coordinator
220	Deb Scott	Fiscal Officer
213	Sheree Smith	Complaints Coordinator

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???DID YOU KNOW???

In this day and age, many physicians treat children of divorced parents, in which custody is shared or full custody is given to one parent. At times, a question arises as to who has access to the child's medical records.

West Virginia State Law (West Virginia Code §48-9-601. Access to a child's records.) states:

(b)(1) Each parent has full and equal access to a child's medical records absent a court order to the contrary. Neither parent may veto the access requested by the other parent. If necessary, either parent is required to authorize medical providers to release to the other parent copies of any and all information concerning medical care provided to the child which would otherwise be properly released to either parent.

(2) If the child is in the actual physical custody of one parent, that parent is required to promptly inform the other parent of any illness of the child which requires medical attention.

(3) Each parent is required to consult with the other parent prior to any elective surgery being performed on the child, and in the event emergency medical procedures are undertaken for the child which require the parental consent of either parent, if time permits, the other parent shall be consulted, or if time does not permit such consultation, the other parent shall be promptly informed of the emergency medical procedures: *Provided*, That nothing contained herein alters or amends the law of this state as it otherwise pertains to physicians or health care facilities obtaining parental consent prior to providing medical care or performing medical procedures.

West Virginia Board of Medicine
Board Members

Angelo N. Georges, M.D., President Wheeling

John A. Wade, Jr., M.D., Vice President Point Pleasant

Catherine Slemp, M.D., M.P.H., Secretary Charleston

> Rev. Richard Bowyer Fairmont

Michael L. Ferrebee, M.D. Morgantown

> Ms. Doris M. Griffin Martinsburg

M. Khalid Hasan, M.D. Beckley

> Ms. Beth Hays Bluefield

J. David Lynch, Jr., M.D. Morgantown

Vettivelu Maheswaran, M.D. Charles Town

> Bill May, D.P.M. Huntington

Leonard Simmons, D.P.M. Fairmont

Lee Elliott Smith, M.D. Princeton

Badshah J. Wazir, M.D. South Charleston

Kenneth Dean Wright, P.A.-C. Huntington



BOARD ACTIONS January 2006 — March 2006



EGBERT, CHARLES C., M.D. - Rutland, VT (03/31/06)

WV License No. 22292

<u>Board Conclusion</u>: Relating to inability to practice medicine and surgery with reasonable skill and safety due to abuse of alcohol.

<u>Board Action</u>: Dr. Egbert, having met the requirements for medical licensure in the State of West Virginia, is licensed to practice medicine and surgery in the State of West Virginia effective April 1, 2006, subject to limitations, restrictions, and accommodations for a period of one (1) year.

HARDENBERGH, MARLA JO, M.D. - Morgantown, WV (03/31/06)

WV License No. 22293

<u>Board Conclusion</u>: Relating to inability to practice medicine and surgery with reasonable skill and safety due to abuse of alcohol.

<u>Board Action</u>: Dr. Hardenbergh, having met the requirements for medical licensure in the State of West Virginia, is licensed to practice medicine and surgery in the State of West Virginia effective April 1, 2006, subject to limitations, restrictions, and accommodations for a period of one (1) year.

HIVELY, ROBERT LEE, M.D. - South Charleston, WV (01/09/06)

WV License No. 09991

<u>Board Conclusion</u>: Relating to engaging in a sexual relationship with a patient concurrent with the patient-physician relationship and unprofessional conduct.

<u>Board Action</u>: By CONSENT ORDER dated January 9, 2006, Dr. Hively was PUBLICLY REPRI-MANDED for his conduct of previously engaging in a sexual relationship with one (1) of his female patients. Dr. Hively's license to practice medicine was placed on PROBATION for a five (5) year period, during which five (5) year period, he will comply with specified terms.

MANIS, RICHARD BENEDICT, M.D. - Huntington, WV (03/01/06)

WV License No. 20167

<u>Board Conclusion</u>: Relating to being subjected to disciplinary action by the licensing authority of another state, professional incompetence, and failing to practice medicine at an acceptable level under similar conditions and circumstances.

<u>Board Action</u>: PUBLICLY REPRIMANDED for being subjected to disciplinary action by the licensing authority of the State of Missouri for professional incompetence, and for failing to practice medicine at an acceptable level under similar conditions and circumstances.

NOTICE

A report relating to the ethics of quarantine and balancing public health and personal freedom has been issued by the American Medical Association's Council on Ethical and Judicial Affairs. This is a timely report given the concerns in today's world about smallpox attacks by terrorists or worries about a flu pandemic. For more information, contact AMA Public Information Officer Toni Xenos, 312.464.5557, or use the following web link: http://www.ama-assn.org/ama/pub/ category/15726.html.

The American Medical Association developed this document for the benefit of its members and physicians generally. This resource should not be construed as legal advice. Specific legal questions regarding this information should be addressed by competent counsel.

Ending the Patient-Physician Relationship

Once a patient-physician relationship is begun, a physician generally is under both an ethical and legal obligation to provide services as long as the patient needs them. There may be times, however, when you may no longer be able to provide care. It may be that the patient is noncompliant, unreasonably demanding, threatening to you and/or your staff, or otherwise contributing to a breakdown in the patient-physician relationship. Or, it may be necessary to end the relationship simply due to relocation, retirement, or unanticipated termination by a managed care plan and/or employer.

Regardless of the situation, to avoid a claim of "patient abandonment," a physician must follow appropriate steps to terminate the patient-physician relationship. Abandonment is defined as the termination of a professional relationship between physician and patient at an unreasonable time and without giving the patient the chance to find an equally qualified replacement. To prove abandonment, the patient must show more than a simple termination of a patient-physician relationship. The plaintiff must prove that the physician ended the relationship at a critical stage of the patient's treatment without good reason or sufficient notice to allow the patient to find another physician, and the patient was injured as a result. Usually, expert evidence is required to establish whether termination in fact happened at a critical stage of treatment.

A physician who does not terminate the patient-physician relationship properly may also run afoul of ethical requirements. According to the AMA's Council on Ethical and Judicial Affairs, a physician may not discontinue treatment of a patient as long as further treatment is medically indicated, without giving the patient reasonable notice and sufficient opportunity to make alternative arrangements for care. Further, the patient's failure to pay a bill does not end the relationship, as the relationship is based on a fiduciary, rather than a financial, responsibility. According to the AMA's Code of Medical Ethics, Opinion 8.115, physicians have the option of terminating the patient-physician relationship, but they must give sufficient notice of withdrawal to the relatives, or responsible friends and guardians to allow another physician to be secured.

Appropriate steps to terminate the patient-physician relationship typically include:

- •Giving the patient written notice, preferably by certified mail, return receipt requested;
- •Providing the patient with a brief explanation for terminating the relationship (this should be a valid reason, for instance non-compliance, failure to keep appointments.);
- •Agreeing to continue to provide treatment and access to services for a reasonable period of time, such as 30 days, to allow a patient to secure care from another physician (a physician may want to extend the period for emergency services);
- •Providing resources and/or recommendations to help a patient locate another physician of like specialty; and
- •Offering to transfer records to a newly-designated physician upon signed patient authorization to do so.

Following this protocol may be easier in some situations than others. For example, if a physician has signed a covenant-not-to-compete, chances are the employer will not hand over the patient list upon notice of departure. In instances such as these, you (in consultation with your attorney) may want to provide a model patient termination letter to the party withholding your patients' addresses, and request that the addresses and letter be merged for distribution to your patients. Ideally, you should not be in a contractual arrangement that makes contacting your patients difficult. However, if you find yourself in this situation, work with an attorney to ensure that appropriate steps are taken.

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CONTINUING MEDICAL EDUCATION REGULATIONS

11 CSR 6 2.2 states:

In order to acquire continuing medical education satisfactory to the Board, a physician may:

A. Take continuing medical education designated as Category I by the American Medical Association or the Academy of Family Physicians, or

B. Teach medical education courses or lecture to medical students, residents, or licensed physicians, or serve as a preceptor to medical students or residents: Provided, that a physician may not count more than twenty (20) hours in this category toward the required fifty (50) hours of continuing medical education.

C. Sit for and pass a certification or recertification examination of one of the American Board of Medical Specialties member boards, and receive certification or recertification from said board: Provided, that a physician may not count more than twenty-five (25) hours in this category toward the required fifty (50) hours of continuing medical education. Certification or recertification from any board other than one of the American Board of Medical Specialties member boards does not qualify the recipient for any credit hours of continuing medical education.

There are no other types or categories of continuing medical education satisfactory to the Board.

WEST VIRGINIA CODE §30-1-7a specifies:

Each person issued a license to practice medicine and surgery by the West Virginia Board of Medicine shall complete two (2) hours of continuing education coursework in the subject of end-of-life care including pain management. The two (2) hours shall be part of the total hours of continuing education required and not two (2) additional hours. Effective as of the reporting period beginning the first day of July, two thousand five, the coursework requirement will become a one-time requirement, and all licensees who have not completed the coursework requirement shall complete the coursework requirement prior to their first license renewal.

CHANGE OF ADDRESS FORM

AME:	LICENSE#:	
(Last) (First) y law, you must keep this office apprised of any and a	(Middle)(Suffix)Il address changes.If not currently practicing, check her	re 🗆
REFERRED MAILING ADDRESS (Required)		
his address is public information, except phone & email)	□ Check here if same as preferred mailing ad	dress
	Address 1	
	Address 2	
	_ City, State, Zip, County	
	Phone	
	Email	
	Enter average weekly on call hours for ALL loo	20
Check here if same as preferred mailing address	tions:	ca-
Address 1	-	
	List AVERAGE HOURS worked per week (not or
Address 2	call) at this location: Direct Patient Care:	
City, State, Zip, County	Administration:	
Phone Fax	_ Formal Teaching: Research:	
Email	Other Medical/Podiatric Activities:	
Email		
	 List AVERAGE HOURS worked per week (call) at this location: 	not or
Address 1	Direct Patient Care:	
Address 2	- Administration:	
	Formal Teaching: Research:	
City, State, Zip, County	Other Medical/Podiatric Activities:	
Phone	-	
Address 1	- List AVERAGE HOURS worked per week (not or
Address O	call) at this location: - Direct Patient Care:	
Address 2	Administration:	
City, State, Zip, County	- Formal Teaching: Research:	
Phone	- Other Medical/Podiatric Activities:	
Phone		
Enter your self-designated primary ar	d secondary SPECIALTY here: (M.D.'s and D.P.M.'s ONLY)	

CHANGE OF ADDRESS INFORMATION



NOTE: There is an updated Change of Address Form located on Page 7 of this Newsletter. You may also visit the Board's website at www.wvdhhr.org/wvbom for a Change of Address Form. By law, a licensee of the Board of Medicine must keep this office apprised of any and all address changes. The preferred mailing address of a licensee is the licensee's address of record, which is public information, with the exception of the telephone number and e-mail address.

WEST VIRGINIA BOARD OF MEDICINE 2006 MEETINGS

May 8 July 10 September 11 November 13 ALL BOARD MEETINGS BEGIN AT 9:00 A.M.

WV Board of Medicine



101 Dee Drive, Suite 103 Charleston, WV 25311

Phone: 304.558.2921 Fax: 304.558.2084

www.wvdhhr.org/wvbom Watch for updates and changes.

West Virginia Department of Health and Human Resources

PRESORTED STANDARD US POSTAGE PAID CHARLESTON, WV 25301 PERMIT NO. 271

Place Mailing Address Label Here