

MINUTES

North Carolina Medical Board

March 17-19, 2004

**1203 Front Street
Raleigh, North Carolina**

Minutes of the Open Sessions of the North Carolina Medical Board Meeting March 17-19, 2004.

The March 17-19, 2004, meeting of the North Carolina Medical Board was held at the Board's Office, 1203 Front Street, Raleigh, NC 27609. The meeting was called to order at 8:07 a.m., Wednesday, March 17, 2004, by Stephen M. Herring, MD, President. Board members in attendance were: Charles L. Garrett, MD, President Elect; Robert C. Moffatt, MD, Secretary; H. Arthur McCulloch, MD, Treasurer; E. K. Fretwell, PhD; Robin N. Hunter Buskey, PA-C; Michael E. Norins, MD; Janelle A. Rhyne, MD; George L. Saunders, III, MD; Ms. Shikha Sinha; Edwin R. Swann, MD; and Mr. Aloysius P. Walsh.

Staff members present were: R. David Henderson, JD, Executive Director; Thomas W. Mansfield, JD, Legal Department Director; Mary Wells, JD, Board Attorney; Brian Blankenship, JD, Board Attorney; Marcus Jimison, JD, Board Attorney; Amy Bason, JD, Board Attorney; Ms. Wanda Long, Legal Assistant; Ms. Lynne Edwards, Legal Assistant; Mr. Curtis Ellis, Investigative Department Director; Don R. Pittman, Investigator/Compliance Coordinator; Mr. Edmund Kirby-Smith, Investigator; Mr. Fred Tucker, Investigator; Mrs. Therese Dembroski, Investigator; Mr. Jason Ward, Investigator; Mr. Loy C. Ingold, Investigator, Mr. Bruce B. Jarvis, Investigator; Ms. Jenny Olmstead, Senior Investigative Coordinator; Ms. Myriam Hopson, Investigative Coordinator; Mr. Dale Breaden, Director of Communications and Public Affairs; Ms. Dena Marshall, Public Affairs Assistant; Mrs. Joy D. Cooke, Licensing Director; Ms. Alexa Kapetanakis, PA/NP Coordinator; Ms. Michelle Lee, Licensing Assistant; Tammy O'Hare, GME Coordinator; Ms. Kelli Singleton, Licensing Assistant; Carol Puryear, Licensing Assistant; Jesse Roberts, MD, Medical Director; Ms. Judie Clark, Complaint Department Director; Mrs. Sharon Squibb-Denslow, Complaint Department Assistant; Ms. Sherry Hyder, Complaint Summary Coordinator; Ms. Patricia Paulson, Malpractice/Medical Examiner Coordinator; Mr. Hari Gupta, Operations Department Director; Mrs. Deborah Aycock, Registration Coordinator; Ms. Rebecca L. Manning, Database Coordinator; Mrs. Janice Fowler, Operations Assistant; Mr. Peter Celentano, Comptroller; Mr. David Shere, Receptionist; Mr. Donald Smelcer, Technology Department Director; and Mr. Jeffery T. Denton, Executive Assistant/Board Recorder/Verification Secretary.

MISCELLANEOUS

Presidential Remarks

Dr. Herring commenced the meeting by reading from Governor Easley's Executive Order No. 1, the "ethics awareness and conflict of interest reminder." No conflicts were reported.

Mr. Henderson announced that Mr. Jason Ward, Board Investigator, has tendered his resignation effective the end of April 2004. He will be assuming a position with the DEA.

Dr. Roberts introduced Dr. Kevin Yow who will be assisting him part-time reviewing medical records, charts, etc. as the Board's Assistant Medical Director.

Reentry Into Active Medical Practice

At the November 2002 Board Meeting Dr. Pories stated that many physicians encounter times when they must leave their practices for a variety of reasons that include illness, family responsibilities, military service, and disciplinary actions by the Board. In such situations skills may need to be refreshed to assure safe re-entry into their medical disciplines. Meeting these diverse educational needs is a complex challenge but one that is of great interest to the

Board. He proposes a task force to study this issue. A subsequent motion passed that the Board establish an ad-hoc Task Force for Physician and Physician Assistant Re-Entry that includes membership from the various parties with an interest in this project and that a report outlining the challenges and proposed solutions be presented to the Board. A Task Force composition was also proposed.

At this meeting Dr. Fretwell noted that he had recently discussed this issue with the President and will be moving forward with establishment of the recommended Task Force.

Board Meeting Schedule

Mr. Henderson made the following proposal to the Board via memorandum of March 18, 2004. In summary: Currently, the Board meets monthly for committee meetings, licensing interviews, informal interviews, committee reports, and hearings. In order to allow the Board to concentrate more effectively on committee work and its judicial responsibilities he proposes that during the three-day meetings (odd-numbered months), the Board not conduct any hearings and devote the entire time to committee meetings, license interviews, informal interviews, and committee reports. During the two-day meetings (even-numbered months), he proposes the Board conduct hearings, consider proposed consent orders, and consider recommendations from the Office of Administrative Hearings.

Motion: (EKF, MN) A motion passed to put the above proposal in effect at the June 2004 Board Meeting.

MINUTE APPROVAL

Motion: A motion passed that the February 18-19, 2004, Board Minutes are approved as presented.

ATTORNEY'S REPORT

A motion passed to close the session to prevent the disclosure of information that is confidential pursuant to sections 90-8, 90-14, 90-16, 90-21.22 and 143-318.11(a) of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and to preserve attorney/client privilege.

A written report on 206 cases was presented for the Board's review. The specifics of this report are not included as these actions are not public information.

Motion: A motion was passed by the Board to approve the report as amended.

A motion passed to return to open session.

EXECUTED CASES

BALL, Alan Ray PA
Consent Order executed 2/26/2004

BARBER, Robert Anthony DO
Surrendered accepted 12/22/2003

EATON, Hubert Arthur Jr. MD
Consent Order executed 2/19/2004

GALYON, Ronald Curtis MD
Consent Order executed 12/18/2003

HARBIEH, Jamil George PA
Consent Order executed 2/18/2004

JACOBS, Kenneth Lee MD
Voluntary surrender received 2/2/2004

KEARSE, William Oliver Jr. MD
Consent Order executed 3/3/2004

KEITH, Douglas Charles MD
Consent Order executed 2/19/2004

KLING, Timothy George MD
Consent Order executed 1/22/2004

LESZCZYNSKI, Donald Brian MD
Consent Order executed 1/22/2004

MCCONVILLE, Robert N. PA
Entry of Revocation executed 2/11/2004

MCINTOSH, John Clarke MD
Termination of Consent Order executed 2/2/2004

MILES, Martha Cope MD
Consent Order executed 1/15/2004

NIEMEYER, Meindert Albert MD
Notice of Charges executed 1/16/2004

ROWE, Theodore Charles III MD
Voluntary surrender received 12/15/2003

SESSOMS, Rodney Kevin MD
Termination of Consent Order executed 2/11/2004

TAUB, Harry Evan MD
Consent Order executed 1/22/2004

VILLEGAS, Henry Alberto MD
Consent Order executed 3/4/2004

WHITE, Steven William PA
Consent Order executed 12/3/2003

WILSON, Lawrence, MD
Consent Order executed 3/17/2004

OTHER MATTERS:

Court of Appeals case involving the Board of Pharmacy

Thom Mansfield, Board Legal Director, discussed a recent Court of Appeals case involving the Board of Pharmacy and its implications, if any, for the Medical Board.

PUBLIC AFFAIRS/COMMUNICATIONS PROGRAM REPORT

Dale Breden, Communications Director, presented his report: the data summary on 2003 Board actions is presented here in lieu of the usual report to the Board and has been placed on the Web site and released to the media.

**DATA SUMMARY ON
2003 BOARD ACTIONS**

Raleigh, NC, February 11, 2004: David Henderson, executive director of the North Carolina Medical Board, the state agency that licenses and disciplines physicians, has released a summary of the recently tabulated data on the Board's actions for 2003. The Board's more detailed Annual Report will be released soon, but Mr Henderson said he was pleased to be able to release the basic data on Board actions to the public now. "The Board's Annual Report will be a rich source of information about the Board and its record for 2003, but this summary provides a good picture of an important aspect of the Board's work over the past year," he said.

Mr Henderson noted that the Board's prejudicial actions for 2003 marked a significant increase over 2002, a fact he attributes in part to the development of an expanded staff and an enhanced Board structure. At the same time, he pointed out, it is important to recognize there is a cycle to the level of medical board actions taken over time—a fairly natural rise and fall of action levels that reflects the time and resources required to process different types of cases.

"In order to protect the health, safety, and welfare of the people of North Carolina," Mr Henderson said, "the Board's task is to effectively and fairly address the problems that are reported to it or that it identifies from its oversight of medical practice. The Board is dedicated to that purpose, and I should note that its work includes a wide range of activities not covered by the action figures we are releasing today. However, that does not lessen the importance or significance of these numbers, and we are pleased to provide them in as clear a form as possible."

Mr Henderson pointed out that the Board took prejudicial actions against 103 practitioners in 2003, as compared with 71 in 2002. Of those, 80 were physicians, compared to 58 in 2002. License revocations, suspensions, and consent orders were up over 2002. For all Board actions, both prejudicial and non-prejudicial, the numbers show actions related to 131 practitioners in 2003 compared to 101 in 2002. Of those 131, 106 were physicians, compared to 87 in 2002.

Board Action Summary: 2003

Number of persons against whom prejudicial actions were taken in 2003:

(Each practioner is counted only once below, even if more than one action were taken.)

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80 physicians [58 in 2002]
22 PAs [12 in 2002]
1 NP [1 in 2002]
0 EMT [0 in 2002]
103 Total [71 total in 2002]

Number of persons about whom non-prejudicial actions were taken in 2003:

(Each practitioner is counted only once below, even if more than one action were taken.)

38 physicians [36 in 2002]
4 PAs [2 in 2002]
1 NP [0 in 2002]
0 EMT [1 in 2002]
43 Total [39 total in 2002]

Combined 2003 prejudicial and non-prejudicial data on individuals:

(Each practitioner is counted only once below, even if more than one action of either type were taken.)

106 physicians [87 in 2002]
23 PAs [12 in 2002]
2 NPs [1 in 2002]
0 EMT [1 in 2002]
131 Total [101 total in 2002]

Categories of Prejudicial Action for 2003:*

Revocations—8 [3 in 2002]
Suspensions—29 (26 by consent order) [15 in 2002 (12 by consent order)]
Summary Suspensions—3 [2 in 2002]
Surrenders—22 (2 by consent order) [27 in 2002 (1 by consent order)]
License Denials—3 [9 in 2002]
Temporary Licenses Issued (limiting practice) —
18 (all by consent order) [12 in 2002(all by consent order)]
Consent Orders—71 [36 in 2002]
(As noted above, various actions are often taken via consent orders.)
**More than one action may be taken against a single person.*

Categories of Non-Prejudicial Action for 2003:*

Dismissals—6 [1 in 2002]
Temporary Licenses Extended (based on compliance)—35 [27 in 2002]
Temporary Licenses Made Full and Unrestricted—7 [14 in 2002]
Consent Orders Lifted—11 [19 in 2002]
**More than one action may be taken concerning a single person.*

Private Letters of Concern for 2003:

(A PLOC is sent on a confidential basis to a practitioner when formal action is not warranted but when the Board wishes to call the practitioner's attention to a situation or problem that could lead to more serious consequences. PLOCs are useful preventive devices and are part of the Board's effort to prevent problems as well as react to them.)

243 [211 in 2002]

EXECUTIVE COMMITTEE REPORT

Stephen Herring, MD; Charles Garrett, MD; Robert Moffatt, MD; Arthur McCulloch, MD; Aloysius Walsh

The Executive Committee of the North Carolina Medical Board was called to order at 7:30 am, Wednesday March 18, 2004 at the offices of the Board. Present were: Stephen M. Herring, MD, Chair; Charles L. Garrett, MD; Harlan A. McCulloch, MD; Robert C. Moffatt, MD; Aloysius P. Walsh; and Janelle A. Rhyne, MD. Members of the staff in attendance were R. David Henderson (Executive Director), Hari Gupta (Director of Operations), and Peter T. Celentano, CPA (Comptroller).

Financials

Mr. Celentano, CPA, presented to the committee the January 2004 compiled financial statements. January is the third month, and the end of the first quarter, of fiscal year 2004.

Mr. Henderson reminded the Committee how tight our current budget situation is.

Mr. Henderson reminded the Committee the possibility of a shortfall in the current year's budgeted revenues for physician registration income. This possible shortfall would be the result of the current CME requirements that went into effect in 2001.

Dr. Herring was interested in knowing how much money the Board had saved over the last year as a result of all of the cost-saving measures that have been implemented. Mr. Henderson stated that the Board had likely saved well over \$100,000 with the renovation and various other steps that have been taken to improve efficiency.

Dr. Garrett made a motion to accept the financial statements as reported. Dr. Moffatt seconded the motion and the motion was approved unanimously.

The January 2004 Investment Summary was reviewed and accepted as presented.

Old Business

There was no old business to discuss.

New Business

NC Physicians Health Program – 12/31 Financial Statements: Mr. Celentano reviewed with the Committee the compiled year-end financial statements for the NC Physicians Health Program, Inc. They are currently showing a surplus of over \$250,000 and appear to be in a sound financial position at the end of 2003.

Temporary Employee – RTL Applications: Mr. Henderson stated to the Committee that a need has arisen to hire a second temporary employee in the licensing department for a period of two months to help alleviate the processing of the over 750 RTL applications that come in during the months of May and June each year. Mr. Celentano told the Committee that this person would cost approximately \$2,000 per month. Dr. Garrett made a motion to approve the expenditure of \$4,000 to hire a temporary employee to help process the RTL applications for the current year. The motion was seconded and approved unanimously.

Background checks – Licensing Applicants: Dr. Moffatt reviewed with the Committee the current method for processing criminal background checks and the procedure that is followed for fingerprint cards that are returned. After a thorough discussion, Dr. Garrett made the following motion: An applicant would be eligible to receive a license after one of two things occurred: 1) the NC State Bureau of Investigations reports to the North Carolina Medical Board that a set of fingerprint cards is sufficient to conduct a background check, or 2) The NC SBI rejects the first set of fingerprint cards and a second set of fingerprint cards has been obtained from the applicant. The motion was seconded and approved unanimously.

The meeting was adjourned at 8:35am.

POLICY COMMITTEE REPORT

Robert Moffatt, MD, Chair; Aloysius Walsh; Arthur McCulloch, MD; George Saunders, MD; Janelle Rhyne; MD

The Policy Committee of the North Carolina Medical Board was called to order at 3:10 p.m., Wednesday, March 17, 2004, at the office of the Board. Present were: Robert Moffatt, MD, Chair; Aloysius P. Walsh; Arthur McCulloch, MD; George L. Saunders, MD; and Janelle A. Rhyne, MD. Also attending were: Stephen M. Herring, MD, Board President, Jesse Roberts, MD, Medical Director, NCMB; Thomas Mansfield, JD, Director, Legal Department, NCMB (PC Staff); Amy Bason, JD (PC Staff); Melanie Phelps, JD, North Carolina Medical Society; Dale G Breden, Public Affairs Director, NCMB; and Mr. Jeffery T. Denton, Board Recorder (PC Staff).

Notes:

- (1) **Recommendation to Board** is the Committee's request for Board consideration of an item.
- (2) **Action** items are related to the Committee's own work or deliberations.
- (3) [] Information within these brackets denotes *background information*

Ethical guidelines for the Use of Electronic Mail between Patients and Physicians (Mr. Mansfield and Ms Phelps)

[A report from the AMA Council on Ethical and Judicial Affairs titled "Ethical Guidelines for the Use of Electronic Mail Between Patients and Physicians" was presented to the Committee. Dr. Garrett stated this report is exhaustive and has several good points. He asked if our licensees might be aided if they had a position statement on this subject.

At the February Policy Committee meeting, Mr. Mansfield and Mr. Breden were asked to explore this report with a goal of extracting some precise information for North Carolina licensees on the use of e-mail and privacy issues. Ms Phelps was requested to brief the committee on what the HIPAA implications might be.

At the April committee meeting Ms Phelps was unable to attend and this item was tabled.

At the August committee meeting Ms Phelps reported that she has not had a chance to review this issue as yet.

Ms. Phelps reported that this is associated with security and privacy regulations. The Board's position currently is in line with the HIPAA regulations and the security part of the bundle does not go into effect until 2005. She proposes a *Forum* article to articulate the concerns, pros, cons and pitfalls, and wait until the security regulations associated with HIPAA become clearer. She recommends not implementing a position statement at this time. The Board

passed a motion that an article be prepared for the *Forum*. Ms. Phelps has volunteered to write such an article.

At the October 2003 meeting Ms. Phelps reported that the article is a work-in-progress and she will update the committee at a future meeting.

At the January 2004 meeting Ms. Phelps reported that there is nothing to report at this time due to the continuing changes with HIPAA. The article is on hold at the present time.]

At the March 2004 Policy Committee Meeting Ms. Phelps and Ms. Bason reported that due to the ongoing implementation of the HIPAA regulations; the need to consult with other experts in this field; the complexity of the issues involved; and the need to explore the software side of this issue they recommended that this item be tabled until more information is available.

Motion: A motion passed that this item be tabled and removed from the agenda until such time that additional detailed information is available.

Board's Medical Records Statements and HIPAA (Ms Phelps)

[The Medical Board is reviewing the Position Statements due to recent implementation of the new HIPAA rules to ensure the Medical Board's statements are in compliance.

At the June committee meeting Ms Phelps reported to this meeting that she had reviewed the Board's position statements and there are five that are potentially affected. Most are minor but the access to physician records position statement may require a significant change. A team was formed to work on this issue: Mr. Mansfield, Ms Yonowitz, Ms Phelps, and Mr. Henderson.

At the August Committee meeting the following three revised position statements were presented to the Policy Committee which reviewed, discussed and modified as needed and the Board adopted a motion to approve them: The Physician-Patient Relationship, Access to Medical Records, and Departures Form or Closings of Medical Practices.

At the October meeting Ms. Yonowitz and Ms. Phelps reported that they had sent out some queries for guidance on what actually constitutes the medical record (x-rays, fetal monitoring screens, etc.). They have received some responses and have further queries to make.

At the January 2004 committee meeting the Chair directed that all committee members review the Position Statement *Retention of Medical Records* and be prepared to discuss this at the March 2004 committee meeting.]

Prior to the March committee meeting Ms. Bason forwarded addition information to committee members for review. She reported that this is a complex issue that needs to be considered but may take additional time to explore. She noted that North Carolina currently mirrors the AMA's policy on medical records but may wish to narrow the focus to North Carolina.

At present, there are a host of outside agencies with retention requirements for various periods of time (Medicare, Medicaid, insurance companies, etc.). There is no one place to go to for this information.

A discussion ensued that included individual Board Members relaying their own experiences and actions with regards to medical records retention. The current trend is to convert records to an electronic format.

Action: Staff is to develop a platform of reference materials for consideration that will attempt to encompass the various requirements and laws. The goal is to provide licensees with a list of helpful information.

Scope of Nursing Practice

[At the January committee meeting Dr. McCulloch presented the committee with copies of the *North Carolina Board of Nursing Advisory Statements* noting that the document had been distributed at the Allied Health Committee earlier in the day as a carryover item from 2003. The item was to be added to the March agenda.]

Background material covering previous discussions by the Medical Board on this subject was reviewed including the minutes of the last major Board discussion of this topic in 1999.

Mr. Mansfield noted that if the Board feels that a nurse is performing acts that are the practice of medicine the Board can approach the Nursing Board, report it to the Attorney General's Office and seek an injunction. The Board is not aware of any current problems in this regard.

Motion: A motion passed that the Board continue to monitor the *North Carolina Board of Nursing Advisory Statements*. This remains a sensitive issue with the Medical Board.

Teacher-Student Relationships

Dr. Herring submitted that there continues to be abusive physicians in teaching positions that are not being reported to the Board. Students right now have nowhere to go and just "have to take it." Until they know where to go it will continue. He stated that the Board needs to address this type of disruptive behavior. Towards this end he proposes a position statement.

Dr. McCulloch stated that it sounds like we are going to come up with a policy statement that says that "physicians should act appropriately. It sounds unnecessary." Unprofessional conduct is already a violation of the Medical Practice Act.

Dr. Saunders stated that he believes the Board's responsibility goes beyond just enforcing the rules and the Board should push the profession forward. He continued that when we see these disruptive physicians we have a moral obligation to do something about it. He believes that most universities have policies in place but a position statement from the Board will put disruptive teachers on notice. The Socratic method is acknowledged as a valid and valuable teaching method but has the potential for abuse.

Mr. Mansfield stated that he is not opposed to having this type of position statement, which would essentially state that if you are engaged in this type of behavior it might result in disciplinary action by the Board. In addition, he suggested that if a position statement is adopted there should be an article in the *Forum* highlighting it. Mr. Breaden concurred with this suggestion.

Action: Mr. Mansfield and Ms. Bason are to work on a position statement to be put to a vote at the April 2004 Board Meeting. Between now and then they are to send a draft to Board Members for review in order to expedite the approval process.

There being no further business, the meeting adjourned at 4:15p.m. The next meeting of the Policy Committee is tentatively set for 3:00 p.m. Wednesday, April 21, 2004.

ALLIED HEALTH COMMITTEE REPORT

Arthur McCulloch, MD; Robin Hunter-Buskey, PAC; E. K. Fretwell, PhD

Also in attendance: Michael Norins, MD, Marcus Jimison, Jennifer Hedgepeth, Lisa Shock, Melanie Phelps, Alexa Kapetanakis

Pharmacist Proposed Rule for Administering Vaccinations – David Work, Executive Director of the Board of Pharmacy, suggested a minor change of the Pharmacist Proposed Rule. In d(3)(A), it was suggested to add the word “successful” to strengthen the requirement. A pharmacist would not only have to complete an initial course, but would need to successfully complete the course. The Allied Health Committee approved this addition. The proposed rule:

New Proposed Rule Draft Language for NC Pharmacist Administration of Vaccines

(a) Purpose. The purpose of this section is to provide standards for pharmacists engaged in the administration of vaccines as authorized in § 90-85.3(r) of the North Carolina Pharmacy Practice Act and Chapter 46 .2507 of the North Carolina Administrative Code.

(b) Definitions. The following words and terms, when used in this section, shall have the following meanings, unless the context clearly indicates otherwise.

(1) “ACPE” means American Council on Pharmaceutical Education

(2) “Administer” means the direct application of a drug to the body of a patient by injection, inhalation, ingestion, or other means by:

(A) a pharmacist, an authorized agent under his/her supervision, or other person authorized by law; or

(B) the patient at the direction of a practitioner.

(3) “Antibody” means a protein in the blood that is produced in response to stimulation by a specific antigen. Antibodies help destroy the antigen that produced them. Antibodies against an antigen usually equate to immunity to that antigen.

(4) “Antigen” means a substance recognized by the body as being foreign; it results in the production of specific antibodies directed against it.

(5) “Board” means the North Carolina Board of Pharmacy

(6) “Confidential record” means any health-related record that contains information that identifies an individual and that is maintained by a pharmacy or pharmacist such as a patient medication record, prescription drug order, or medication order.

(7) “Immunization” means the act of inducing antibody formation, thus leading to immunity.

(8) “Medical Practice Act” means the North Carolina Medical Practice Act

(9) “Physician” means a currently licensed M.D. or D.O. in good standing with the North Carolina Medical Board who is responsible for the on-going, continuous supervision of the pharmacist pursuant to written protocols between the pharmacist and the physician.

(10) “Vaccination” means the act of administering any antigen in order to induce immunity; is not synonymous with immunization since vaccination does not imply success.

(11) “Vaccine” means a specially prepared antigen, which upon administration to a person will result in immunity.

(12) Written Protocol--A physician's order, standing medical order, or other order or protocol. A written protocol must be prepared, signed and dated by the physician and pharmacist and contain the following:

(A) the name of the individual physician authorized to prescribe drugs and responsible for authorizing the written protocol;

- (B) the name of the individual pharmacist authorized to administer vaccines;
 - (C) the immunizations or vaccinations that may be administered by the pharmacist;
 - (D) procedures to follow, including any drugs required by the pharmacist for treatment of the patient, in the event of an emergency or severe adverse reaction following vaccine administration
 - (E) the reporting requirements by the pharmacist to the physician issuing the written protocol, including content and time frame
 - (F) locations at which the pharmacist may administer immunizations or vaccinations;
 - (G) the requirement for annual review of the protocols by the physician and pharmacist; and
 - (H) prohibition of administration to patients under 18 years of age.
- (c) Policies and Procedures
- (1) Pharmacists must follow a written protocol as specified in subsection (b)(12) of this section for administration of vaccines and the treatment of severe adverse events following administration.
 - (2) The pharmacist administering vaccines must maintain written policies and procedures for handling and disposal of used or contaminated equipment and supplies.
 - (3) The pharmacist or pharmacist's agent must give the appropriate vaccine information to the patient or legal representative with each dose of vaccine. The pharmacist must ensure that the patient or legal representative is available and has read, or has had read to them, the information provided and has had their questions answered prior to administering the vaccine.
 - (4) The pharmacist must report adverse events to the primary care provider as identified by the patient.
- (d) Pharmacist requirements. Pharmacists who enter into a written protocol with a physician to administer vaccines shall:
- (1) hold a current provider level cardiopulmonary resuscitation (CPR) certification issued by the American Heart Association or the American Red Cross or equivalent;
 - (2) successful completion of a certificate program in the administration of vaccines accredited by the Centers for Disease Control, the ACPE or a similar health authority or professional body approved by the Board;
 - (3) maintain documentation of:
 - (A) Successful completion of the initial course specified in paragraph (2) of this subsection;
 - (B) 3 hours of continuing education every 2 years beginning January 1, 2006, which are designed to maintain competency in the disease states, drugs, and administration of vaccines;
 - (C) current certification specified in paragraph (1) of this subsection;
 - (D) original written physician protocol;
 - (E) annual review and revision of original written protocol with physician;
 - (F) any problems or complications reported; and
 - (G) items specified in subsection (g) of this section.
- (e) Supervising Physician responsibilities. Physicians who enter into a written protocol with a pharmacist to administer vaccines shall:
- (1) be responsible for the formulation or approval and periodic review of the written protocols
 - (2) to be easily accessible to the pharmacist administering the vaccines or be available through direct telecommunication for consultation, assistance, direction, and provide adequate back-up coverage; and
 - (3) review written protocol with pharmacist at least annually and revise if necessary.
- (f) Supervision. Pharmacists involved in the administration of immunizations or vaccinations shall be under the supervision of a physician. Physician supervision shall be considered adequate if the delegating physician:

- (1) is responsible for the formulation or approval of the physician's order, standing medical order, standing delegation order, or other order or protocol and periodically reviews the order or protocol and the services provided to a patient under the order or protocol;
 - (2) has established a physician-patient relationship with each patient 18 years of age or older and referred the patient to the pharmacists;
 - (3) is geographically located so as to be easily accessible to the pharmacist administering the immunization or vaccination;
 - (4) receives, as appropriate, a periodic status report on the patient, including any problem or complication encountered; and
 - (5) is available through direct telecommunication for consultation, assistance, and direction.
- (g) Drugs. The following requirements pertain to drugs administered by a pharmacist:
- (1) Drugs administered by a pharmacist under the provisions of this section shall be in the legal possession of:
 - (A) a pharmacy, which shall be the pharmacy responsible for drug accountability, including the maintenance of records of administration of the immunization or vaccination; or
 - (B) a physician, who shall be responsible for drug accountability, including the maintenance of records of administration of the immunization or vaccination;
 - (2) Drugs shall be transported and stored at the proper temperatures indicated for each drug;
 - (3) Pharmacists while actively engaged in the administration of vaccines under written protocol, may have in their custody and control the vaccines identified in the written protocol and any other drugs listed in the written protocol to treat adverse reactions; and
 - (4) After administering vaccines at a location other than a pharmacy, the pharmacist shall return all unused prescription medications to the pharmacy or physician responsible for the drugs.
- (h) Record Keeping and Reporting
- (1) A pharmacist who administers any vaccine shall maintain the following information, readily retrievable, in the pharmacy records regarding each administration:
 - (A) The name, address, and date of birth of the patient;
 - (B) The date of the administration;
 - (C) The administration site of injection (e.g., right arm, left leg, right upper arm);
 - (D) route of administration of the vaccine;
 - (E) The name, manufacturer, lot number, and expiration date of the vaccine;
 - (F) Dose administered;
 - (G) The name and address of the patient's primary health care provider, as identified by the patient; and
 - (H) The name or identifiable initials of the administering pharmacist.
 - (2) A pharmacist who administers vaccines shall document annual review with physician of written protocol in the records of the pharmacy that is in possession of the vaccines administered.
- (i) Confidentiality.
- (1) The pharmacist shall comply with the privacy provisions of the federal Health Insurance Portability and Accountability Act of 1996 and any rules adopted pursuant to this act; and
 - (2) Any other confidentiality provisions of federal or state laws.
 - (3) Violations of these rules by a pharmacist and/or supervising physician shall constitute grounds by the licensee's respective Board to initiate disciplinary action against that licensee's license.

Primary Source Verification for PA education - The committee reviewed a form that physicians send to their medical school to receive verification of successful completion of medical school. The Allied Health Committee has chosen to include primary source verification of PA education as a requirement for licensure. It was also decided for the staff to re-review the physician assistant application to find differences in the PA application from the physician application. Changes that would strengthen the PA application will be submitted back to the Allied Health Committee.

EMS Compliance Committee Report – The Allied Health Committee reviewed an attachment titled “The Use of Epinephrine by EMT’s.” The committee was concerned with the risk for incorrect dosages and the costs of the alternatives to auto injectors. The committee has asked staff to respond to the document with a letter stating the concerns.

EMS Advisory Council Report– The Committee accepted this report as information.

NP Joint Subcommittee Report – The Joint Subcommittee met March 17, 2004 at the Board of Nursing. Dr. McCulloch gave a verbal summary to the Medical Board of this meeting. The Joint Subcommittee discussed national certification for NP’s and NP rule changes. A hearing for the NP Rule Changes also occurred on March 17, 2004 at the Board of Nursing.

APPLICANTS LICENSED

PA - (*)Indicates PA has not submitted Intent to Practice Forms)**

<u>PHYSICIAN ASSISTANT</u>	<u>PRIMARY SUPERVISOR</u>	<u>PRACTICE CITY</u>
Sears, Stephanie	***	
PA Applicants to be licensed after receipt of acceptable SBI report-		
Clarke, James Jr.	***	
Garver, Gloria	***	
Ibach, Maria	***	
Malkki, Rita	***	
Mara, George	Garman, Steve	Elizabeth City
Newton, Jessica	***	

PA - Intent to Practice Forms Acknowledged

<u>PHYSICIAN ASSISTANT</u>	<u>PRIMARY SUPERVISOR</u>	<u>PRACTICE CITY</u>
Abraham, Mufiyda	Eweje, Peter Afolabi	Jacksonville
Achard, Malinda Lou	Anderson, Joseph Robert	Asheville
Arcuri, Philip Eugene	Tuttle-Newhall, Janet Elizabeth	Durham
Ashier, Saurabh	Tuttle-Newhall, Janet Elizabeth	Durham
Bair, Bruce Lamar	Elston, Scott Cody	Garner
Bair, Bruce Lamar	Talerico, Paul J.	Wilson
Bass, Julie Margaret	Fruth, Joanne Marie	Oxford
Brinke, Paige Snow	Larson, Jeffery Dee	Murphy
Burns, Erin Michelle	Tuttle-Newhall, Janet Elizabeth	Durham
Campbell, Jennifer Lynn	Tuttle-Newhall, Janet Elizabeth	Durham
Cavedo, Colleen Vehovic	Comstock, Lloyd Karr	Yanceyville
Chiles, Clare Ellen	Tuttle-Newhall, Janet Elizabeth	Durham
Cicutto, Elizabeth Gail	Liu, Debra Chih-Fen	Winston-Salem

Collins, Samuel Lindsay	Tuttle-Newhall, Janet Elizabeth	Durham
Corbett, Stephanie Nicole	Reyes, Rodolfo Constantino	Benson
Corbett, Stephanie Nicole	Woodall, Leonard Schmick	Smithfield
Daniel, Selwyn George	Bennett, Ward Emerson	Rocky Mount
Davis, Tracy Denise	Tuttle-Newhall, Janet Elizabeth	Durham
Desai, Samir Sanmukh	Tuttle-Newhall, Janet Elizabeth	Durham
Dial, Michael Lynn	Talerico, Paul J.	Wilson
Dodge, Julie Stone	Comstock, Lloyd Karr	Yanceyville
Donay, Jason Joseph	Tuttle-Newhall, Janet Elizabeth	Durham
Doss, Brian Wesley	Kelly, Samuel Steven	High Point
Dossenbach, Memory E.	Carducci, Bryan	Burlington
Dossenbach, Memory E.	McGeary, Scott Alan	Cary
Drinkwater, Don Michael	Huffmon, George VanBuren III	Wilmington
Edge, Kendra Dian	Smull, David Lawrence	Winston-Salem
Falsion-Flemming, K	Kelly, Samuel Steven	High Point
Fishburne, Gina Maggiano	Sicard, Michael William	Matthews
Fitch, James Milton	Talerico, Paul J.	Wilson
Fleishman, Leonie Masters	Branch, Malcolm Stanley	Durham
Fox, James Robert	McKean, Thomas Kevin	Hickory
Gibson, Scott David	Broyles, William Kevin	Durham
Gregory, Ginger Dobbins	Ferguson, Robert Lee Jr.	Hope Mills
Gregory, Ginger Dobbins	Guha, Subrata	Fuquay-Varina
Guy, Thomas Sloane III	Ellis, Randy Sue	Elkin
Hanley, Brian Thomas	Albritton, Mark Walden	Marion
Harbieh, Jamil George	Talerico, Paul J.	Wilson
Harris, Patricia Covington	Gaspari, Michael Marion	Charlotte
Haubert, Deborah Anne	Dalton, Timothy John	Winston-Salem
Haymond, Alvin Henry Jr.	Daily, Jeffrey Morris	Monroe
Hendrix, Cherilyn Marie	Tuttle-Newhall, Janet Elizabeth	Durham
Henzler, Martha Claire	Bloomfield, Robert Lee	Winston-Salem
Hicks, Robert Dean	Johnson, Walter Wallace	Charlotte
Hobgood, Steven Todd	Crocker, Daniel Lind	Rocky Mount
Homiak, Phornphan M	Krause, Robert Allen	Jacksonville
Icard, Terry Ann	Holter, John Frederick	Greenville
Jenkins, Walter Houston Jr.	Maria, Josette	Dunn
Johnson, Andrea Marie	Kindl, James Douglas	Greensboro
King, Harold Walters Jr.	Stewart-Carballo, Charles Willy	Lillington
Kirsch, Eric David	Gingras, Jeannine L.	Charlotte
MacDonell, Stuart John	Hess, Suzanne Powell	Advance
Maddux, Joseph Michael	Marston, William Arnold	Durham
Mallico, Amanda Freeman	Garmon-Brown, Ophelia Eugenia	Matthews
Marcantonio, Canio T	Fuller, Stanley Brian	Winston-Salem
Martinez, Jessica Anne	Merrick, Homer Curtiss III	Morehead City
McHatton, Timothy L.	Ferguson, Robert Lee Jr.	Hope Mills
McHatton, Timothy L.	Guha, Subrata	Clayton
Melia, Emily Suzanne	Tokunboh, Julius I. Kehinde	Kannapolis
Minor, David Francis	Pertile, Rachel O'Neill	Thomasville
Morris, Delton Nobe	Reyes, Rodolfo Constantino	Benson
Parker, Sherri Lynn	Tuttle-Newhall, Janet Elizabeth	Durham
Paterson, Kimberly Brown	Horger, Edgar Olin IV	Wilmington
Pedacchio, Misty Hochrein	Kelly, Samuel Steven	High Point

Purcell, Kim Phillips	Martin, Patrick David	Wilmington
Rappaport, Richard Alan	Knapp, Iva Louise	Greensboro
Reale, Robyn Marie	Tuttle-Newhall, Janet Elizabeth	Durham
Reardon, Kenneth George	Brigham, Craig Donald	Charlotte
Ricard, Denis Philip	Tucker, Jessica Maria Pinzon	Pembroke
Rice, John Fitzgerald	Miller, Mark Frederic	Burlington
Ruppe, Elena Polyanskaya	Kelly, Catherine Margaret	Fayetteville
Sanders, Edwina Renee	Walsh, Thomas Raymond	High Point
Shinnick, Jill B	McGeary, Scott Alan	Cary
Small, Tina Marie	Osta, Elie Michel	Snow Hill
Smith, Allyson Martin	Ellis, Randy Sue	Elkin
Smith, Laurie	Watkins, Roy Wayne	Waynesville
Stroud, Joan Marie	James, John Clay	Gastonia
Talbert, Karen Agnes	Cook, David Cleo	Wilmington
Talbert, Karen Agnes	Cook, David Cleo	Wilmington
Wagner, Shawn Michael	Talerico, Paul J.	Wilson
Warren, Catherine Sineath	Taylor, Robert Pelham	Pikeville
Weathers, Paul Michael	Gingras, Jeannine L.	Charlotte
Weiss, Stanley	Pridgen, James Henry	Wilmington
Whitehead, Marjorie M	Garmon-Brown, Ophelia Eugenia	Matthews
Wilkinson, James Lee	Thornton, David Christopher	Pinehurst
Wilson, Phyllis Mack	Rush, Paul Fletcher	Laurinburg

NP – Initial Applications Recommended for Approval after Staff Review-

<u>NURSE PRACTITIONER</u>	<u>PRIMARY SUPERVISOR</u>	<u>PRACTICE CITY</u>
Christopher, Kandice	Choksi, Janak	Burlington
Cline, Kimberly	Guarino, Clinton	Hickory
Gray, Deanna	Ehrhart, Troy	Jacksonville
Grother, Joan	Richardson, Cris	Asheboro
Grother, Joan	Thomas, Millard III	Asheboro
Luttrell, Michael	Stouffer, George	Chapel Hill
Sawyer, Marcelyn	James, John	Gastonia
Guentensberger, Deborah	Cheifetz, Ira	Durham
Rice, Lynn	Kubicki, Steven	Raleigh
Pierce, Vicki	Lynn, Nicholas	Pinehurst
Bentley, Susan	Jemsek, Josph	Huntersville
Williams, Tomika	Good, David	Winston-Salem

NP - Subsequent Applications administratively approved-

Angrisani, Patricia	Curran, Diana	Hendersonville
Anna, Sherilyn	Gough, William III	Asheville
Bailey, Rhonda	Hannapel, Andrew	Chapel Hill
Baskin, Robin	Williams, Ameliann	Asheville
Blackburn, Angela	Thomason, Michael	Charlotte
Brown, Carol	Thomas-Montilus, Sandhya	Lumberton
Brown, Susan	Keith, Douglas	Garner
Burrgett, Shelly	Cheifetz, Ira	Durham
Cameron, Nancy	DiLauro, Michele	Eden
Carroll, Kathleen	Kiratzis, Philip	Asheville

Carter, Carole	St. John, Thomas	Brevard
Compeggie, Cindy	Forehand, Mary	Wilmington
Conley, Carlye	Frazer, Joe III	Asheville
Coughlin, Dolores	Dunn, Laura	Concord
Craven, Susan	Darwish, Amir	Rockingham
Darling, Michelle	Keith, Douglas	Garner
Darling, Michelle	Tharwani, Hareh	Durham
Davis, Donna	Erlandson, Stephen	Elkin
Disalvo, Linda	Holt, Kenneth	Raleigh
Duke, Cheryl	Kraemer, M Suzanne	Greenville
Elesha-Adams, Mary	Lee, Sue	Trenton
Galloway-Daniels, Sonya	Powell, Bayard	Winston-Salem
Gamewell, Marilyn	Bentley, Ralph	Statesville
Gamewell, Marilyn	Coarsey, Stephen	Statesville
Gamewell, Marilyn	Kepley, Michael	Statesville
Gonder, Angela	Brandon, Henry	Boone
Gregor-Holt, Nansi	Hoole, Axalla	Chapel Hill
Gunn, Jennifer	Olson, Ronald	Durham
Hanley, Jennifer	Thompson, Sidney Earl	Fayetteville
Hardin, Theresa	Lackey, Philip	Charlotte
Harwood, Linda	Ladd, Lisa	Asheville
Hawthorne, Mary	Olson, Ronald	Durham
Hillyard, Christine	Gupta, Vinita	Fort Bragg
Hussey, Elizabeth	Wellman, Samuel Jr.	Hickory
Kassmann, Barbara	Kurtzberg, Joanne	Durham
Lavoie-Vaughan, Nanette	Buhr, Gwendolyn	Winston-Salem
Little, Judith	Alexander, James	Charlotte
Lowe, Eleanor	Blomeley, Charles	Mill Spring
Luka, Lydia	D'Angio, Salvatore	Asheville
Lutman, Joni	Partridge, James	Durham
Mabe, David	Helsabech, Eric	Asheboro
Marshall, Virginia	Barkley, John	Charlotte
McNeil-Hall, Amanda	Fesperman, Joseph	N Wilkesboro
Melkonian, Jennifer	Kokenes, Dennis	Charlotte
Merrill, Diane	Koehler, Daniel	Mooreville
Messick, Sally	Page, Stephen	Collettsville
Miller, Penny	Deigan, Eric	Cary
Newton, Gloria	Cummins, Larry	Linville
Nielsen, Patricia	Hopkins, Lawrence	Winston-Salem
Oxford, William	Taylor, Robert	Pikeville
Plumer, Devon	Gioia, Frank	Charlotte
Plumer, Devon	Nakayama, Don	Wilmington
Quarless, Ashley	Iruela, Maria	Winston-Salem
Rodgers, Teri	Khuri, Radwan	Memphis, TN
Rosenbloom, Linda	Sevier, Robert	Greensboro
Schontz, Carly	Olson, Ronald	Durham
Spence, Suzanne	Olson, Ronald	Durham
Starr, Tamara	Capucao, Joel	Wilmington
Steele, Pamela	Burks, Arvil Jr.	Durham
Taylor-Miller, Bertha	Schmits, W Richard Jr.	Warsaw
Thorneburg, Dana	Dasher, James	High Point

Williams, Shauna
Wilson, Rebecca
Wolfe, Vicky

Mullen, Matthew
Frazier, Richard
Dearie, Joseph

Chapel Hill
Enfield
Rocky Mount

Clinical Pharmacist Practitioner Applications-

CPP
Garrett, Anna
Ives, Timothy
Miller, Catherine
Prevette, Rebecca

PRIMARY SUPERVISOR
Gessner, Martin
Chelminski, Paul
Aronson, Richard
Vyas, PK

PRACTICE CITY
High Point
Chapel Hill
Greensboro
Garner

CPP Change in Status Form-

Tapscott, William

Grissman, Mark

Graham

Motion: A motion passed to approve the Committee report and the vote list as presented.

LICENSING COMMITTEE REPORT

Robert Moffatt, MD, Chair; Robin Hunter-Buskey, PAC; George Saunders, MD; Michael Norins, MD

Criminal History Record Checks

Catchline: Previously the Board approved allowing applicants to proceed with the personal interview and licensing if their applications were being delayed because the SBI had to do a "name search" for the background check due to bad quality of fingerprints. We have recently experienced another snafu – The SBI is not forwarding the rejected prints to the FBI for rejection because they know they will be rejected. Some applicants are unable to obtain good fingerprints (occupational hazard, thin skin, trauma, etc.). Therefore a name search cannot be requested. Currently there are about 4 applicants in this situation. Feb 2004 Board Action: Allow these applicants the same privilege as applicants obtaining a name search – to proceed with the interview and license approval while additional prints are being obtained to proceed with a background check. Pursue scheduling an interview with the Director of this Division of the SBI to establish written protocols on how poor quality prints will be processed. Recommend staff check with the Bar Association and Board of Nursing to see how they are handling these types of situations. Give an update on the March License Committee agenda.

UPDATE: Spoke with NC Law Examiners – they are experiencing the same difficulties – they are having applicants send in additional sets of prints. NC Board of Nursing is experiencing no difficulties. Prints are being submitted to FBI after two rejections. Names search results are received usually within two weeks.

Committee Recommendation: Accept the following as information.

The meeting with the SBI resulted in an agreement that the FBI will conduct a name search on applicants with 2 rejections by the SBI. They require all rejected fingerprint cards accompany the request for a name search. The SBI was requested to put this agreement in writing to the Board. This request is being taken under consideration.

Based on previous Board action this process will allow applicants to proceed with the license process of appearing for the interview and approval by the Board if the application is otherwise routine.

Make clear to the applicant that if any information is picked up on the background check their license is subject to annulment or other action by the Board.

BOARD ACTION: Accept as information.

The meeting with the SBI resulted in an agreement that the FBI will conduct a name search on applicants with 2 rejections by the SBI. They require all rejected fingerprint cards accompany the request for a name search. The SBI was requested to put this agreement in writing to the Board. This request is being taken under consideration.

Based on previous Board action this process will allow applicants to proceed with the license process of appearing for the interview and approval by the Board if the application is otherwise routine. Make clear to the applicant that if any information is picked up on the background check their license is subject to annulment or other action by the Board.

TABLE this item until the April meeting. Research issuing temporary licenses until the CHRC is received and refer to the Legal Department to prepare a recommendation for the Board on how technicalities can be worked out if action has to be taken against a license.

Procedure for return of license interview forms

Catchline: Staff was requested to look into the possibility of Board Members returning the interview form electronically and report at the March meeting.

Committee Recommendation: Continue to return the original interview form in the self-addressed, stamped envelope.

BOARD ACTION: Continue to return the original interview form in the self-addressed, stamped envelope.

AAPS-American Association of Physician Specialists

Catchline: This organization is requesting the Board consider their certification process equivalent to ABMS and AOA's certification. They would like to have the opportunity to make a presentation to the Board at a future meeting. Joy Cooke has spoken with Dale Austin at the FSMB to get clarification on the statement "We have been granted official status with the FSMB..." Mr. Austin's explanation is "FSMB granted AAPS "observer status". This means AAPS can get FSMB materials and attend the annual meeting. Efforts to contact the Utah Osteo Board for information have been unsuccessful so far. Gary Clark at the Oklahoma Osteo Board confirmed that the Oklahoma Board wrote new rules that define what process to go through to be recognized and AAPS does this. Oklahoma concluded AAPS is trying to do the right thing. We received a CD that contains Examination Blueprints, Technical Report, and Practice Analysis Survey Instruments if any Board Members want to look at it.

Committee Recommendation: Have the Legal Department prepare a letter to AAPS asking if their letter is to be considered a request for a rule change and if so they must follow requirements under the law set out in Article 2 A

BOARD ACTION: Have the Legal Department prepare a letter to AAPS asking if their letter is to be considered a request for a rule change and if so they must follow requirements under the law set out in Article 2 A of Chapter 150 of the General Statutes.

Dr. Moffatt requested staff obtain a copy of the basic eligibility requirements for ABMS & AOA certification.

Reporting of Resident Training Licenses to the Board

Catchline: Staff currently has administrative authority to issue RTL licenses for "routine" applicants. In the past these licenses have not been reported to the Board. It has been suggested that a list of newly issued resident training licenses be presented to the Board.

Committee Recommendation: Report twice a year all resident training licenses issued providing name of the physician, medical school of graduation, institution entering for residency and specialty.

BOARD ACTION: Report twice a year all resident training licenses issued providing name of the physician, medical school of graduation, institution entering for residency and specialty.

Rules Update

Catchline: The new license rules were filed 12/19/03; a public hearing was held 2/17/04; held open for public comment until 4/2/04; update on public comments will be reported to the Board at the April meeting. Effective date will be July 1, if rules are filed by May 1.

Committee Recommendation: Accept as information

BOARD ACTION: Accept as information

Question #2 on the Board's application forms

Catchline: The committee is currently working on rewording Question 2. It currently reads – Have you ever been convicted of, pled guilty to, pled no contest or received a prayer for judgment continued (PJC) to a violation of a federal, state or local law including any and all traffic violations?

Committee Recommendation: Accept as information

BOARD ACTION: Refer to legal and report back at the April meeting. Consider breaking the question down to two questions, i.e.:

(1) Have you ever been convicted of, pled guilty to, pled no contest or received a prayer for judgment continued (PJC) to violation of a federal, state or local law?

(2) Have you ever been charged with driving under the influence or while impaired?

Reinstatement/Reactivations

Catchline: Reminder that when an applicant for reinstatement or reactivation interviews the license is effective the day of the interview – it does not require approval by the Board unless the Board Member has a specific reason to seek the Board's approval. Therefore the physician is required to register the license on his next birthday.

Committee Recommendation: Accept as information

BOARD ACTION: Accept as information

Proposal for Re-entry

BOARD ACTION: In view of numerous physicians applying for license who have been away from the clinical settings for several years, the License Committee was tasked to draw up a proposal on how to handle these applicants.

Recommend publishing an article in the Forum on the subject of re-entering medicine once a procedure/policy has been established.

A motion passed to close the session to investigate, examine, or determine the character and other qualifications of applicants for professional licenses or certificates while meeting with respect to individual applicants for such licenses or certificates.

The Board reviewed four license applications. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

SPLIT BOARD LICENSURE INTERVIEWS

A motion passed to close the session to investigate, examine, or determine the character and other qualifications of applicants for professional licenses or certificates while meeting with respect to individual applicants for such licenses or certificates.

Seven licensure interviews were conducted. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

APPLICANTS PRESENTED TO THE BOARD

Alehegn Asres	Sharif Mohammed Riaz	Michael Allen Evans
Behnaz Susheel Atree	Chowdhury	Rita Mary Feldman
James Laurence Baker	Sam Yeol Chun	Tiffanie Spring Ferry
Matthew David Barker	Chad Michael Clark	Jeffrey Blake Frost
Lawrence Adrian Bass	David Alan Clayman	John Peter Gambino
Cecile Elisabeth Francin Becker	Brian Scott Claytor	Michael Joseph Gillespie
Wyndee Leigh Bess	Mauricio Gabriel Cohen	Erik Jonathan Gustke
Debra Lynn Best	Rebecca Fischer Connor	Laurie Lynn Gutstein
Katherine Rachel Birchard	Albert James Cook II	Craig Allyn Harr
Thomas Michael Boden	Paul Raymond Cunningham	Jennifer Meade Hart
Josie Barnes Bowen	Martin Tyler Deal	Julie Christine Haviland
Manuel Jose Caceres	Thomas Joseph De Caro	Kevin Hsu
Maria Esperanza Caceres	Raymond Jerome J. Estrella de	Cheryl Lynn Jackson
Michael Thomas Capps	la Rosa	Singaravelu Jagadeesan
Daniel Ricardo Carrizosa	Jose A. Diaz-Buxo	William Bryan Jennings
Coleman Delynne Carter	Stanley Frank Dziedzic	James Joseph Jura Jr.
	Aaron Gregory Ellison	Andrew Laurence Kaplan

John David Kisella
Ruby Kochhar
Susan Jane Kring
Alyson Renee Kuroski-Mazzei
John Alex Kustan
Michael Christopher Lang
Stacy Comfort Le
Mark Steven Lemel
Jeffrey Allen Lohr
Tamika Jo Lott
Simon A. Mahler
Erin Michelle Mancuso
Thomas Francis Marino
Habib Abul Masood
Frederick Leo Matti
Matthew Douglas McLaren
Connette Pearl McMahan
Mary Ransom Medlin
Peter Ashley Millward
Girish Somashekhar Munavalli
Meenakshi Natarajan
Matthew Jonah Neulander
Van Duy Nguyen
Raymond Francis Nungesser

Myo Marlar Nwe
Jeffrey Scott Overcash
Allan Paris Jr.
Thomas Frank Payton
Erica Lee Peterson
Ernest Paul Phillips, Jr.
John Duane Pierson
George Demetrios Politis
Simms Hunter Rentz Jr.
Tate Mosley Rogers, Jr.
Ronald Martin Rosen
Sujana Samala
Caroline Healy Sanders
Kenton Lee Sanders
David Orestes Scamurra
David Scott Schillinger
Derek Thomas Schneider
Kimberley Platt Shanks
Neil David Sherman
Paul Raymond Shook
Faisal Ahmed Siddiqui
Henry Grady Skelton III
Michael Edward Stadnick
George Arthur Stanley

James Richard Staten
Mark Frederick Stegelman
LaClaire Williams Stewart
Eric Everitt Stone
Nancy Nai-Hsin Sun
Michael Raymond Tamberella,
III
Raymond Lewis Thomas
Lori Ann Rubach Trefts
Sara Boland Trepanier
Joseph Anthony Veys
Carrie Hale Vice
Martha Coward Wasserman
Paul Louis Wasserman
Henry Charles Watkins
Frederick Dennis Watson Jr.
Karen Elizabeth Weck-Taylor
Christopher George Willett
Barbara Jane Wilson
William Leicester Woodard Jr.
Laura Marjean Worrel
Hong Yi

LICENSES APPROVED BY ENDORSEMENT AND EXAM

Alehegn Asres
James Laurence Baker
Matthew David Barker
Lawrence Adrian Bass
Cecile Elisabeth Francin Becker
Wyndee Leigh Bess
Debra Lynn Best
Katherine Rachel Birchard
Thomas Michael Boden
Josie Barnes Bowen
Manuel Jose Caceres
Maria Esperanza Caceres
Michael Thomas Capps
Daniel Ricardo Carrizosa
Sharif Mohammed Riaz Chowdhury
Sam Yeol Chun
Chad Michael Clark
David Alan Clayman
Brian Scott Claytor
Rebecca Fischer Connor
Albert James Cook II
Raymond Jerome J. Estrella de la Rosa
Aaron Gregory Ellison
Rita Mary Feldman

Tiffanie Spring Ferry
Jeffrey Blake Frost
John Peter Gambino
Michael Joseph Gillespie
Erik Jonathan Gustke
Laurie Lynn Gutstein
Craig Allyn Harr
Jennifer Meade Hart
Julie Christine Haviland
Kevin Hsu
Singaravelu Jagadeesan
William Bryan Jennings
James Joseph Jura Jr.
Andrew Laurence Kaplan
John David Kisella
Ruby Kochhar
Susan Jane Kring
Alyson Renee Kuroski-Mazzei
John Alex Kustan
Michael Christopher Lang
Stacy Comfort Le
Mark Steven Lemel
Jeffrey Allen Lohr
Tamika Jo Lott

Simon A. Mahler
Erin Michelle Mancuso
Thomas Francis Marino
Habib Abul Masood
Frederick Leo Matti
Matthew Douglas McLaren
Connette Pearl McMahon
Mary Ransom Medlin
Peter Ashley Millward
Girish Somashekhar Munavalli
Meenakshi Natarajan
Matthew Jonah Neulander
Van Duy Nguyen
Raymond Francis Nungesser
Myo Marlar Nwe
Jeffrey Scott Overcash
Allan Paris Jr.
Thomas Frank Payton
Erica Lee Peterson
John Duane Pierson
Simms Hunter Rentz Jr.
Ronald Martin Rosen
Sujana Samala
Caroline Healy Sanders
Kenton Lee Sanders
David Scott Schillinger
Derek Thomas Schneider
Kimberley Platt Shanks
Neil David Sherman
Paul Raymond Shook
Faisal Ahmed Siddiqui
Henry Grady Skelton III
Michael Edward Stadnick
George Arthur Stanley
James Richard Staten

Mark Frederick Stegelman
LaClaire Williams Stewart
Eric Everitt Stone
Nancy Nai-Hsin Sun
Lori Ann Rubach Trefts
Joseph Anthony Veys
Carrie Hale Vice
Martha Coward Wasserman
Paul Louis Wasserman
Henry Charles Watkins
Frederick Dennis Watson Jr.
Karen Elizabeth Weck-Taylor
Christopher George Willett
Barbara Jane Wilson
William Leicester Woodard Jr.
Laura Marjean Worrel
Hong Yin

APPLICANTS FOR REINSTATEMENT

Coleman Delynnne Carter
Martin Tyler Deal
Thomas Joseph De Caro
Michael Allen Evans
Ernest Paul Phillips, Jr.
Michael Raymond Tamberella, III
Raymond Lewis Thomas

APPLICANTS FOR REACTIVATION

Paul Raymond Cunningham
Jose A. Diaz-Buxo
Stanley Frank Dziejdzic
Cheryl Lynn Jackson
Tate Mosley Rogers, Jr.

COMPLAINT COMMITTEE REPORT

Aloysius Walsh; Edwin Swann, MD; Shikha Sinha; Michael Norins, MD

A motion passed to close the session to prevent the disclosure of information that is confidential pursuant to sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes.

The Complaint Committee reported on 48 complaint cases. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

MALPRACTICE COMMITTEE REPORT

Aloysius Walsh; Edwin Swann, MD; Shikha Sinha; Michael Norins, MD

A motion passed to close the session to prevent the disclosure of information that is confidential pursuant to sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes.

The Malpractice Committee reported on 31 cases. A written report was presented for the Board's review. The Board adopted the committee's recommendation to approve the written report. The specifics of this report are not included as these actions are not public information.

A motion passed to return to open session.

MEDICAL EXAMINER COMMITTEE REPORT

Aloysius Walsh; Edwin Swann, MD; Shikha Sinha; Michael Norins, MD

A motion passed to close the session to prevent the disclosure of information that is confidential pursuant to sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes.

The Medical Examiner Committee reported on four cases. A written report was presented for the Board's review. The Board adopted the committee's recommendation to approve the written report. The specifics of this report are not included as these actions are not public information.

A motion passed to return to open session.

NORTH CAROLINA PHYSICIANS HEALTH PROGRAM (NCPHP) COMMITTEE REPORT

Edwin Swann, MD; Michael Norins, MD; E. K. Fretwell, PhD

A motion passed to close the session to prevent the disclosure of information that is confidential pursuant to section 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes.

NCPHP Compliance Committee met on 03/17/04. The following cases were discussed:

The Board reviewed 34 cases involving participants in the NC Physicians Health Program. The Board adopted the committee's recommendation to approve the written report. The specifics of this report are not included as these actions are not public information.

A motion passed to return to open session.

INVESTIGATIVE COMMITTEE REPORT

Charles Garrett, MD; Arthur McCulloch; Shikha Sinha; Janelle Rhyne, MD

A motion passed to close the session to prevent the disclosure of information that is confidential pursuant to sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes.

The Investigative Committee reported on 29 investigative cases. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

INFORMAL INTERVIEW REPORT

A motion passed to close the session to prevent the disclosure of information that is confidential pursuant to sections 90-8, 90-14, 90-16 and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes.

Eight informal interviews were conducted. A written report was presented for the Board's review. The Board adopted the Split Boards' recommendations and approved the written report as modified. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

ADJOURNMENT

This meeting was adjourned on March 19, 2004.

Robert C. Moffatt, MD
Secretary