# **MINUTES**

North Carolina Medical Board

September 15-17, 2010

1203 Front Street Raleigh, North Carolina

# Minutes of the Open sessions of the North Carolina Medical Board Meeting held September 15-17, 2010.

The September 15-17, 2010 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 8:05 a.m., Wednesday, September 17, 2010, by Donald E. Jablonski, DO, President. Board members in attendance were: George L. Saunders, III, MD, Past President; Janice E. Huff, MD, President-Elect; William A. Walker, MD, Secretary/Treasurer; Ms. Pamela Blizzard; Thomas R. Hill, MD; Dr. Ralph C. Loomis, MD; Ms. Thelma Lennon; Peggy R. Robinson, PA-C; Paul S. Camnitz, MD and Karen R. Gerancher. Absent was John B. Lewis, Jr., LLB.

#### **Presidential Remarks**

Dr. Jablonski commenced the meeting by reading from the State Government Ethics Act, "ethics awareness and conflict of interest reminder." No conflicts were reported.

Dr. Hill gave a brief review of the communication course he recently attended.

# Minute Approval

**Motion** A motion passed to approve the July Board Meeting and the August Hearing Minutes as presented.

#### Announcements

Mr. Thomas Mansfield, Director of the Legal Department, recognized Todd Brosius on his fiveyear anniversary at the NCMB.

Mr. Henderson noted that the Nurse Practitioner Joint Sub Committee will meet today at the Board of Nursing at 5:00pm.

Each Board member received a meeting survey. Mr. Henderson asked the Board members to complete the survey by Friday.

# EXECUTIVE COMMITTEE REPORT

Committee members: Donald E. Jablonski, DO, Chair; Janice E. Huff, MD; George L. Saunders, MD; and William A. Walker, MD.

Also present: Pamela L. Blizzard and Ralph C. Loomis, MD.

Staff: R. David Henderson (Executive Director) and Peter T. Celentano, CPA (Comptroller).

#### **Financial Statements**

<u>Monthly Accounting July 2010:</u> Mr. Celentano, CPA, presented the July 2010 compiled financial statements. May is the ninth month of fiscal year 2010. The Committee recommends the Board accept the financial statements as reported.

#### Old Business

<u>Proposed Changes to Rules regarding Misdemeanor Convictions:</u> The Committee considered proposed changes to the rule regarding publication of misdemeanor convictions on the Board's website. A draft of the proposed amendments to 21 NCAC 32X.0106 was presented by Ms. Christina Apperson, staff attorney with the Board. The Committee recommends the Board accept the proposed amendments to 21 NCAC 32X.0106 and to disseminate copies of the proposed rule change to all Board Members for their review prior to a vote on Friday.

#### New Business

<u>Proposed Fiscal Year 2011 Budget:</u> Mr. Celentano and Mr. Henderson reviewed with the Committee a draft of the proposed budget for fiscal year 2011. The Committee recommends the Board accept the proposed budget and to disseminate copies of the proposed budget to all Board Members for their review prior to a vote on Friday.

<u>Executive Director Performance Review - Personnel</u> Members of the Executive Committee met with its Executive Director, Mr. David Henderson, in a closed session pursuant to NC General Statute §143-318.11(a)(6) to complete his annual performance evaluation.

# POLICY COMMITTEE REPORT

Committee Members: Dr. Loomis, Dr. Walker, and Dr. Camnitz Absent: Judge Lewis

Staff: Todd Brosius, Christina Apperson and Wanda Long

NEW BUSINESS:

# I. A. POSITION STATEMENT REVIEW

1/2010 COMMITTEE RECOMMENDATION: (Loomis/Camnitz) Adopt a 4 year review schedule as presented. All reviews will be offered to the full Board for input. Additionally all reviews will be documented and will be reported to the full Board, even if no changes are made.

1/2010 BOARD ACTION: Adopt the recommendation of the Policy Committee.

			LAST				
		SCHEDULED FOR	REVISED/ REVIEWED/	REVISED/	REVISED/	REVISED/	REVISED/
POSITION STATEMENT	ADOPTED	REVIEW	ADOPTED	REVIEWED	REVIEWED	REVISED	REVIEWED
Professional Obligation to Report Incompetence,							
Impairment, and Unethical Conduct	Nov-98	March 2010	Nov-98				
Medical, Nursing, Pharmacy Boards: Joint Statement on Pain							
Management in End-of- Life Care	Oct-99	May 2010	Oct-99				
What Are the Position Statements of the Board and To Whom Do They							
Apply?	Nov-99	May 2010	Nov-99				
Contact With Patients Before Prescribing	Nov-99	July 2010	Feb-01				
Guidelines for Avoiding Misunderstandings During Physical							
Examinations	May-91	July 2010	Oct-02	Feb-01	Jan-01	May-96	May-93
Office-Based Procedures	Sep-00	Sept 2010	Jan-03				
Access to Physician Records	Nov-93	Sept 2010	Aug-03	Mar-02	Sep-97	May-96	
Medical Supervisor- Trainee Relationship	Apr-04		Apr-04				
The Treatment of Obesity	Oct-87		Jan-05	Mar-96			
HIV/HBV Infected Health Care Workers	Nov-92		Jan-05	May-96			
Writing of Prescriptions	May-91		Mar-05	Jul-02	Mar-02	May-96	Sep-92
Laser Surgery	Jul-99		Jul-05	Aug-02	Mar-02	Jan-00	
Self- Treatment and Treatment of Family Members and Others With Whom Significant Emotional Relationships Exist	May-91		Sep-05	Mar-02	May-00	May-96	
Advertising and Publicity	Nov-99		Sep-05	Mar-01			
Prescribing Legend or Controlled Substances for Other Than Valid Medical or Therapeutic Purposes, with Particular Reference to Substances or Preparations with							
Anabolic Properties	May-98		Nov-05	Jan-01	Jul-98		
Sale of Goods From Physician Offices	Mar-01		Mar-06				
Competence and Reentry to the Active Practice of Medicine	Jul-06		Jul-06				
Availability of Physicians to Their Patients	Jul-93		Jul-06	Oct-03	Jan-01	May-96	
Referral Fees and Fee Splitting	Nov-93		Jul-06	May-96			

Sexual Exploitation of				1		
Patients	May-91	Sep-06	Jan-01	Apr-96		
Care of the Patient Undergoing Surgery or Other Invasive Procedure	Sep-91	Sep-06	Mar-01			
The Physician-Patient Relationship	Jul-95	Sep-06	Aug-03	Mar-02	Jan-00	Jul-98
The Retired Physician	Jan-97	Sep-06				
Physician Supervision of Other Licensed Health Care Practitioners	Jul-07	Jul-07				
Medical Testimony	Mar-08	Mar-08				
Advance Directives and Patient Autonomy	Jul-93	Mar-08	May-96			
End-of-Life Responsibilities and Palliative Care	Oct-99	Mar-08	May-07			
Drug Overdose Prevention	Sep-08	Sep-08				
Policy for the Use of Controlled Substances for the Treatment of Pain	Sep-96	Sep-08	Jul-05			
Medical Record Documentation	May-94	May-09	May-96			
Retention of Medical Records	May-98	May-09				
Capital Punishment	Jan-07	Jul-09				
Departures from or Closings of Medical	Jan-00	Jul-09	Aug-03			
Unethical Agreements in Complaint Settlements	Nov-93	Mar-10	May-96			

# 1. Office-based procedures

9/2010 COMMITTEE RECOMMENDATION: Table this issue to allow comments from the full Board to be received. All comments will be considered at the November Committee meeting.

9/2010 BOARD ACTION: Adopt the Committee recommendation.

Office-based procedures

Preface

This Position Statement on Office-Based Procedures is an interpretive statement that attempts to identify and explain the standards of practice for Office-Based Procedures in North Carolina. The Board's intention is to articulate existing professional standards and not to promulgate a new standard.

This Position Statement is in the form of guidelines designed to assure patient safety and identify the criteria by which the Board will assess the conduct of its licensees in considering disciplinary action arising out of the performance of office-based procedures. Thus, it is expected that the licensee who follows the guidelines set forth below will avoid disciplinary action by the Board. However, this Position Statement is not intended to be comprehensive or

to set out exhaustively every standard that might apply in every circumstance. The silence of the Position Statement on any particular matter should not be construed as the lack of an enforceable standard.

#### General guidelines

#### The Physician's professional and legal obligation

The North Carolina Medical Board has adopted the guidelines contained in this Position Statement in order to assure patients have access to safe, high quality office-based surgical and special procedures. The guidelines further assure that a licensed physician with appropriate qualifications takes responsibility for the supervision of all aspects of the perioperative surgical, procedural and anesthesia care delivered in the office setting, including compliance with all aspects of these guidelines.

These obligations are to be understood (as explained in the Preface) as existing standards identified by the Board in an effort to assure patient safety and provide licensees guidance to avoid practicing below the standards of practice in such a manner that the licensee would be exposed to possible disciplinary action for unprofessional conduct as contemplated in N.C. Gen. Stat. 90-14(a)(6).

#### Exemptions

These guidelines do not apply to Level I procedures.

#### Written policies and procedures

Written policies and procedures should be maintained to assist office-based practices in providing safe and quality surgical or special procedure care, assure consistent personnel performance, and promote an awareness and understanding of the inherent rights of patients.

#### Emergency procedure and transfer protocol

The physician who performs the surgical or special procedure should assure that a transfer protocol is in place, preferably with a hospital that is licensed in the jurisdiction in which it is located and that is within reasonable proximity of the office where the procedure is performed.

All office personnel should be familiar with and capable of carrying out written emergency instructions. The instructions should be followed in the event of an emergency, any untoward anesthetic, medical or surgical complications, or other conditions making hospitalization of a patient necessary. The instructions should include arrangements for immediate contact of emergency medical services when indicated and when advanced cardiac life support is needed. When emergency medical services are not indicated, the instructions should include procedures for timely escort of the patient to the hospital or to an appropriate practitioner.

#### Infection control

The practice should comply with state and federal regulations regarding infection control. For all surgical and special procedures, the level of sterilization should meet applicable industry and occupational safety requirements. There should be a procedure and schedule for cleaning, disinfecting and sterilizing equipment and patient care items. Personnel should be trained in infection control practices, implementation of universal precautions, and disposal of hazardous waste products. Protective clothing and equipment should be readily available.

#### Performance improvement

A performance improvement program should be implemented to provide a mechanism to review yearly the current practice activities and quality of care provided to patients.

Performance improvement activities should include, but are not limited to, review of mortalities; the appropriateness and necessity of procedures performed; emergency transfers; reportable complications, and resultant outcomes (including all postoperative infections); analysis of patient satisfaction surveys and complaints; and identification of undesirable trends (such as diagnostic errors, unacceptable results, follow-up of abnormal test results, medication errors, and system problems). Findings of the performance improvement program should be incorporated into the practice's educational activity.

#### Medical records and informed consent

The practice should have a procedure for initiating and maintaining a health record for every patient evaluated or treated. The record should include a procedure code or suitable narrative description of the procedure and should have sufficient information to identify the patient, support the diagnosis, justify the treatment, and document the outcome and required follow-up care.

Medical history, physical examination, lab studies obtained within 30 days of the scheduled procedure, and pre-anesthesia examination and evaluation information and data should be adequately documented in the medical record.

The medical records also should contain documentation of the intraoperative and postoperative monitoring required by these guidelines.

Written documentation of informed consent should be included in the medical record.

#### Credentialing of physicians

A physician who performs surgical or special procedures in an office requiring the administration of anesthesia services should be credentialed to perform that surgical or special procedure by a hospital, an ambulatory surgical facility, or substantially comply with criteria established by the Board.

Criteria to be considered by the Board in assessing a physician's competence to perform a surgical or special procedure include, without limitation:

#### \* state licensure;

\* procedure specific education, training, experience and successful evaluation appropriate for the patient population being treated (i.e., pediatrics);

\* for physicians, board certification, board eligibility or completion of a training program in a field of specialization recognized by the ACGME or by a national medical specialty board that is recognized by the ABMS for expertise and proficiency in that field. For purposes of this requirement, board eligibility or certification is relevant only if the board in question is recognized by the ABMS, AOA, or equivalent board certification as determined by the Board;

\* professional misconduct and malpractice history;

\* participation in peer and quality review;

\* participation in continuing education consistent with the statutory requirements and requirements of the physician's professional organization;

\* to the extent such coverage is reasonably available in North Carolina, malpractice insurance coverage for the surgical or special procedures being performed in the office;

\* procedure-specific competence (and competence in the use of new procedures and technology), which should encompass education, training, experience and evaluation, and which may include the following:

o adherence to professional society standards;

o credentials approved by a nationally recognized accrediting or credentialing entity; or

o didactic course complemented by hands-on, observed experience; training is to be followed by a specified number of cases supervised by a practitioner already competent in the respective procedure, in accordance with professional society standards.

If the physician administers the anesthetic as part of a surgical or special procedure (Level II only), he or she also should have documented competence to deliver the level of anesthesia administered.

#### Accreditation

After one year of operation following the adoption of these guidelines, any physician who performs Level II or Level III procedures in an office should be able to demonstrate, upon request by the Board, substantial compliance with these guidelines, or should obtain accreditation of the office setting by an approved accreditation agency or organization. The approved accreditation agency or organization should submit, upon request by the Board, a summary report for the office accredited by that agency.

All expenses related to accreditation or compliance with these guidelines shall be paid by the physician who performs the surgical or special procedures.

#### Patient selection

The physician who performs the surgical or special procedure should evaluate the condition of the patient and the potential risks associated with the proposed treatment plan. The physician also is responsible for determining that the patient has an adequate support system to provide for necessary follow-up care. Patients with pre-existing medical problems or other conditions, who are at undue risk for complications, should be referred to an appropriate specialist for preoperative consultation.

#### ASA physical status classifications

Patients that are considered high risk or are ASA physical status classification III, IV, or V and require a general anesthetic for the surgical procedure, should not have the surgical or special procedure performed in a physician office setting.

# Candidates for level II procedures

Patients with an ASA physical status classification I, II, or III may be acceptable candidates for office-based surgical or special procedures requiring conscious sedation/ analgesia. ASA physical status classification III patients should be specifically addressed in the operating manual for the office. They may be acceptable candidates if deemed so by a physician qualified to assess the specific disability and its impact on anesthesia and surgical or procedural risks.

#### Candidates for level III procedures

Only patients with an ASA physical status classification I or II, who have no airway abnormality, and possess an unremarkable anesthetic history are acceptable candidates for Level III procedures.

# Surgical or special procedure guidelines

#### Patient preparation

A medical history and physical examination to evaluate the risk of anesthesia and of the proposed surgical or special procedure, should be performed by a physician qualified to assess

the impact of co-existing disease processes on surgery and anesthesia. Appropriate laboratory studies should be obtained within 30 days of the planned surgical procedure.

A pre-procedure examination and evaluation should be conducted prior to the surgical or special procedure by the physician. The information and data obtained during the course of this evaluation should be documented in the medical record.

The physician performing the surgical or special procedure also should:

\* ensure that an appropriate pre-anesthetic examination and evaluation is performed proximate to the procedure;

\* prescribe the anesthetic, unless the anesthesia is administered by an anesthesiologist in which case the anesthesiologist may prescribe the anesthetic;

\* ensure that qualified health care professionals participate;

\* remain physically present during the intraoperative period and be immediately available for diagnosis, treatment, and management of anesthesia-related complications or emergencies; and

\* ensure the provision of indicated post-anesthesia care.

#### Discharge criteria

Criteria for discharge for all patients who have received anesthesia should include the following:

\* confirmation of stable vital signs;

- \* stable oxygen saturation levels;
- \* return to pre-procedure mental status;
- \* adequate pain control;
- \* minimal bleeding, nausea and vomiting;
- \* resolving neural blockade, resolution of the neuraxial blockade; and
- \* eligible to be discharged in the company of a competent adult.

#### Information to the patient

The patient should receive verbal instruction understandable to the patient or guardian, confirmed by written post-operative instructions and emergency contact numbers. The instructions should include:

- \* the procedure performed;
- \* information about potential complications;

\* telephone numbers to be used by the patient to discuss complications or should questions arise;

- \* instructions for medications prescribed and pain management;
- \* information regarding the follow-up visit date, time and location; and
- \* designated treatment hospital in the event of emergency.

#### Reportable complications

Physicians performing surgical or special procedures in the office should maintain timely records, which should be provided to the Board within three business days of receipt of a Board inquiry.

Records of reportable complications should be in writing and should include:

\* physician's name and license number;

- \* date and time of the occurrence;
- \* office where the occurrence took place;
- \* name and address of the patient;
- \* surgical or special procedure involved;
- \* type and dosage of sedation or anesthesia utilized in the procedure; and
- \* circumstances involved in the occurrence.

#### Equipment maintenance

All anesthesia-related equipment and monitors should be maintained to current operating room standards. All devices should have regular service/maintenance checks at least annually or per manufacturer recommendations. Service/maintenance checks should be performed by appropriately qualified biomedical personnel. Prior to the administration of anesthesia, all equipment/monitors should be checked using the current FDA recommendations as a guideline. Records of equipment checks should be maintained in a separate, dedicated log which must be made available to the Board upon request. Documentation of any criteria deemed to be substandard should include a clear description of the problem and the intervention. If equipment is utilized despite the problem, documentation should clearly indicate that patient safety is not in jeopardy.

The emergency supplies should be maintained and inspected by qualified personnel for presence and function of all appropriate equipment and drugs at intervals established by protocol to ensure that equipment is functional and present, drugs are not expired, and office personnel are familiar with equipment and supplies. Records of emergency supply checks should be maintained in a separate, dedicated log and made available to the Board upon request.

A physician should not permit anyone to tamper with a safety system or any monitoring device or disconnect an alarm system.

#### Compliance with relevant health laws

Federal and state laws and regulations that affect the practice should be identified and procedures developed to comply with those requirements.

Nothing in this position statement affects the scope of activities subject to or exempted from the North Carolina health care facility licensure laws.

#### Patient rights

Office personnel should be informed about the basic rights of patients and understand the importance of maintaining patients' rights. A patients' rights document should be readily available upon request.

#### Enforcement

In that the Board believes that these guidelines constitute the accepted and prevailing standards of practice for office-based procedures in North Carolina, failure to substantially comply with these guidelines creates the risk of disciplinary action by the Board.

#### Level II guidelines

#### Personnel

The physician who performs the surgical or special procedure or a health care professional who is present during the intraoperative and postoperative periods should be ACLS certified, and at least one other health care professional should be BCLS certified. In an office where anesthesia

services are provided to infants and children, personnel should be appropriately trained to handle pediatric emergencies (i.e., APLS or PALS certified).

Recovery should be monitored by a registered nurse or other health care professional practicing within the scope of his or her license or certification who is BCLS certified and has the capability of administering medications as required for analgesia, nausea/vomiting, or other indications.

#### Surgical or special procedure guidelines

#### Intraoperative care and monitoring

The physician who performs Level II procedures that require conscious sedation in an office should ensure that monitoring is provided by a separate health care professional not otherwise involved in the surgical or special procedure. Monitoring should include, when clinically indicated for the patient:

\* direct observation of the patient and, to the extent practicable, observation of the patient's responses to verbal commands;

\* pulse oximetry should be performed continuously (an alternative method of measuring oxygen saturation may be substituted for pulse oximetry if the method has been demonstrated to have at least equivalent clinical effectiveness);

\* an electrocardiogram monitor should be used continuously on the patient;

\* the patient's blood pressure, pulse rate, and respirations should be measured and recorded at least every five minutes; and

\* the body temperature of a pediatric patient should be measured continuously.

Clinically relevant findings during intraoperative monitoring should be documented in the patient's medical record.

#### Postoperative care and monitoring

The physician who performs the surgical or special procedure should evaluate the patient immediately upon completion of the surgery or special procedure and the anesthesia.

Care of the patient may then be transferred to the care of a qualified health care professional in the recovery area. A registered nurse or other health care professional practicing within the scope of his or her license or certification and who is BCLS certified and has the capability of administering medications as required for analgesia, nausea/vomiting, or other indications should monitor the patient postoperatively.

At least one health care professional who is ACLS certified should be immediately available until all patients have met discharge criteria. Prior to leaving the operating room or recovery area, each patient should meet discharge criteria.

Monitoring in the recovery area should include pulse oximetry and non-invasive blood pressure measurement. The patient should be assessed periodically for level of consciousness, pain relief, or any untoward complication. Clinically relevant findings during post-operative monitoring should be documented in the patient's medical record.

#### Equipment and supplies

Unless another availability standard is clearly stated, the following equipment and supplies should be present in all offices where Level II procedures are performed:

\* full and current crash cart at the location where the anesthetizing is being carried out. (the crash cart inventory should include appropriate resuscitative equipment and medications for surgical, procedural or anesthetic complications);

\* age-appropriate sized monitors, resuscitative equipment, supplies, and medication in accordance with the scope of the surgical or special procedures and the anesthesia services provided;

\* emergency power source able to produce adequate power to run required equipment for a minimum of two (2) hours;

- \* electrocardiographic monitor;
- \* noninvasive blood pressure monitor;
- \* pulse oximeter;
- \* continuous suction device;
- \* endotracheal tubes, laryngoscopes;
- \* positive pressure ventilation device (e.g., Ambu);
- \* reliable source of oxygen;
- \* emergency intubation equipment;
- \* adequate operating room lighting;
- \* appropriate sterilization equipment; and
- \* IV solution and IV equipment.

Level III guidelines

#### Personel

Anesthesia should be administered by an anesthesiologist or a CRNA supervised by a physician. The physician who performs the surgical or special procedure should not administer the anesthesia. The anesthesia provider should not be otherwise involved in the surgical or special procedure.

The physician or the anesthesia provider should be ACLS certified, and at least one other health care professional should be BCLS certified. In an office where anesthesia services are provided to infants and children, personnel should be appropriately trained to handle pediatric emergencies (i.e., APLS or PALS certified).

#### Surgical or special procedure guidelines

Intraoperative monitoring

The physician who performs procedures in an office that require major conduction blockade, deep sedation/analgesia, or general anesthesia should ensure that monitoring is provided as follows when clinically indicated for the patient:

\* direct observation of the patient and, to the extent practicable, observation of the patient's responses to verbal commands;

\* pulse oximetry should be performed continuously. Any alternative method of measuring oxygen saturation may be substituted for pulse oximetry if the method has been demonstrated to have at least equivalent clinical effectiveness;

\* an electrocardiogram monitor should be used continuously on the patient;

\* the patient's blood pressure, pulse rate, and respirations should be measured and recorded at least every five minutes;

\* monitoring should be provided by a separate health care professional not otherwise involved in the surgical or special procedure;

\* end-tidal carbon dioxide monitoring should be performed on the patient continuously during endotracheal anesthesia;

\* an in-circuit oxygen analyzer should be used to monitor the oxygen concentration within the breathing circuit, displaying the oxygen percent of the total inspiratory mixture;

\* a respirometer (volumeter) should be used to measure exhaled tidal volume whenever the breathing circuit of a patient allows;

- \* the body temperature of each patient should be measured continuously; and
- \* an esophageal or precordial stethoscope should be utilized on the patient.

Clinically relevant findings during intraoperative monitoring should be documented in the patient's medical record.

#### Postoperative care and monitoring

The physician who performs the surgical or special procedure should evaluate the patient immediately upon completion of the surgery or special procedure and the anesthesia.

Care of the patient may then be transferred to the care of a qualified health care professional in the recovery area. Qualified health care professionals capable of administering medications as required for analgesia, nausea/vomiting, or other indications should monitor the patient postoperatively.

Recovery from a Level III procedure should be monitored by an ACLS certified (PALS or APLS certified when appropriate) health care professional using appropriate criteria for the level of anesthesia. At least one health care professional who is ACLS certified should be immediately available during postoperative monitoring and until the patient meets discharge criteria. Each patient should meet discharge criteria prior to leaving the operating or recovery area.

Monitoring in the recovery area should include pulse oximetry and non-invasive blood pressure measurement. The patient should be assessed periodically for level of consciousness, pain relief, or any untoward complication. Clinically relevant findings during postoperative monitoring should be documented in the patient's medical record.

#### Equipment and supplies

Unless another availability standard is clearly stated, the following equipment and supplies should be present in all offices where Level III procedures are performed:

\* full and current crash cart at the location where the anesthetizing is being carried out (the crash cart inventory should include appropriate resuscitative equipment and medications for surgical, procedural or anesthetic complications);

\* age-appropriate sized monitors, resuscitative equipment, supplies, and medication in accordance with the scope of the surgical or special procedures and the anesthesia services provided;

\* emergency power source able to produce adequate power to run required equipment for a minimum of two (2) hours;

- \* electrocardiographic monitor;
- \* noninvasive blood pressure monitor;
- \* pulse oximeter;
- \* continuous suction device;
- \* endotracheal tubes, and laryngoscopes;
- \* positive pressure ventilation device (e.g., Ambu);
- \* reliable source of oxygen;
- \* emergency intubation equipment;
- \* adequate operating room lighting;

- \* appropriate sterilization equipment;
- \* IV solution and IV equipment;
- \* sufficient ampules of dantrolene sodium should be emergently available;
- \* esophageal or precordial stethoscope;
- \* emergency resuscitation equipment;
- \* temperature monitoring device;
- \* end tidal CO2 monitor (for endotracheal anesthesia); and
- \* appropriate operating or procedure table.

# Definitions

AAAASF - the American Association for the Accreditation of Ambulatory Surgery Facilities. AAAHC - the Accreditation Association for Ambulatory Health Care

ABMS - the American Board of Medical Specialties

ACGME - the Accreditation Council for Graduate Medical Education

ACLS certified - a person who holds a current "ACLS Provider" credential certifying that they have successfully completed the national cognitive and skills evaluations in accordance with the curriculum of the American Heart Association for the Advanced Cardiovascular Life Support Program.

Advanced cardiac life support certified - a licensee that has successfully completed and recertified periodically an advanced cardiac life support course offered by a recognized accrediting organization appropriate to the licensee's field of practice. For example, for those licensees treating adult patients, training in ACLS is appropriate; for those treating children, training in PALS or APLS is appropriate.

Ambulatory surgical facility - a facility licensed under Article 6, Part D of Chapter 131E of the North Carolina General Statutes or if the facility is located outside North Carolina, under that jurisdiction's relevant facility licensure laws.

Anesthesia provider - an anesthesiologist or CRNA.

Anesthesiologist - a physician who has successfully completed a residency program in anesthesiology approved by the ACGME or AOA, or who is currently a diplomate of either the American Board of Anesthesiology or the American Osteopathic Board of Anesthesiology, or who was made a Fellow of the American College of Anesthesiology before 1982.

AOA - the American Osteopathic Association

APLS certified - a person who holds a current certification in advanced pediatric life support from a program approved by the American Heart Association.

Approved accrediting agency or organization - a nationally recognized accrediting agency (e.g., AAAASF; AAAHC, JCAHO, and HFAP) including any agency approved by the Board. ASA -the American Society of Anesthesiologists

BCLS certified - a person who holds a current certification in basic cardiac life support from a program approved by the American Heart Association.

Board - the North Carolina Medical Board.

Conscious sedation -the administration of a drug or drugs in order to induce that state of consciousness in a patient which allows the patient to tolerate unpleasant medical procedures without losing defensive reflexes, adequate cardio-respiratory function and the ability to respond purposefully to verbal command or to tactile stimulation if verbal response is not possible as, for example, in the case of a small child or deaf person. Conscious sedation does not include an oral dose of pain medication or minimal pre-procedure tranquilization such as the administration of a pre-procedure oral dose of a benzodiazepine designed to calm the patient. "Conscious sedation" should be synonymous with the term "sedation/analgesia" as used by the American Society of Anesthesiologists.

Credentialed -a physician that has been granted, and continues to maintain, the privilege by a hospital or ambulatory surgical facility licensed in the jurisdiction in which it is located to provide

specified services, such as surgical or special procedures or the administration of one or more types of anesthetic agents or procedures, or can show documentation of adequate training and experience.

CRNA -a registered nurse who is authorized by the North Carolina Board of Nursing to perform nurse anesthesia activities.

Deep sedation/analgesia - the administration of a drug or drugs which produces depression of consciousness during which patients cannot be easily aroused but can respond purposefully following repeated or painful stimulation. The ability to independently maintain ventilatory function may be impaired. Patients may require assistance in maintaining a patent airway, and spontaneous ventilation may be inadequate. Cardiovascular function is usually maintained. FDA -the Food and Drug Administration.

General anesthesia - a drug-induced loss of consciousness during which patients are not arousable, even by painful stimulation. The ability to independently maintain ventilatory function is often impaired. Patients often require assistance in maintaining a patent airway, and positive pressure ventilation may be required because of depressed spontaneous ventilation or druginduced depression of neuromuscular function. Cardiovascular function may be impaired. Health care professional - any office staff member who is licensed or certified by a recognized professional or health care organization.

HFAP - the Health Facilities Accreditation Program, a division of the AOA.

Hospital -a facility licensed under Article 5, Part A of Chapter 131E of the North Carolina General Statutes or if the facility is located outside North Carolina, under that jurisdiction's relevant facility licensure laws.

Immediately available - within the office.

JCAHO -the Joint Commission for the Accreditation of Health Organizations Level I procedures - any surgical or special procedures:

1. that do not involve drug-induced alteration of consciousness;

2. where preoperative medications are not required or used other than minimal preoperative tranquilization of the patient (anxiolysis of the patient);

3. where the anesthesia required or used is local, topical, digital block, or none; and

4. where the probability of complications requiring hospitalization is remote.

Level II procedures - any surgical or special procedures:

1. that require the administration of local or peripheral nerve block, minor conduction blockade, Bier block, minimal sedation, or conscious sedation; and

2. where there is only a moderate risk of surgical and/or anesthetic complications and the need for hospitalization as a result of these complications is unlikely.

Level III procedures - any surgical or special procedures:

1. that require, or reasonably should require, the use of major conduction blockade, deep sedation/analgesia, or general anesthesia; and

2. where there is only a moderate risk of surgical and/or anesthetic complications and the need for hospitalization as a result of these complications is unlikely.

Local anesthesia - the administration of an agent which produces a transient and reversible loss of sensation in a circumscribed portion of the body.

Major conduction blockade - the injection of local anesthesia to stop or prevent a painful sensation in a region of the body. Major conduction blocks include, but are not limited to,

axillary, interscalene, and supraclavicular block of the brachial plexus; spinal (subarachnoid), epidural and caudal blocks.

Minimal sedation (anxiolysis) - the administration of a drug or drugs which produces a state of consciousness that allows the patient to tolerate unpleasant medical procedures while responding normally to verbal commands. Cardiovascular or respiratory function should remain unaffected and defensive airway reflexes should remain intact.

Minor conduction blockade - the injection of local anesthesia to stop or prevent a painful sensation in a circumscribed area of the body (i.e., infiltration or local nerve block), or the block of a nerve by direct pressure and refrigeration. Minor conduction blocks include, but are not limited to, intercostal, retrobulbar, paravertebral, peribulbar, pudendal, sciatic nerve, and ankle blocks.

Monitoring - continuous, visual observation of a patient and regular observation of the patient as deemed appropriate by the level of sedation or recovery using instruments to measure, display, and record physiologic values such as heart rate, blood pressure, respiration and oxygen saturation.

Office - a location at which incidental, limited ambulatory surgical procedures are performed and which is not a licensed ambulatory surgical facility pursuant to Article 6, Part D of Chapter 131E of the North Carolina General Statutes.

Operating room - that location in the office dedicated to the performance of surgery or special procedures.

OSHA -the Occupational Safety and Health Administration.

PALS certified - a person who holds a current certification in pediatric advanced life support from a program approved by the American Heart Association.

Physical status classification - a description of a patient used in determining if an office surgery or procedure is appropriate. For purposes of these guidelines, ASA classifications will be used. The ASA enumerates classification: I-normal, healthy patient; II-a patient with mild systemic disease; III a patient with severe systemic disease limiting activity but not incapacitating; IV-a patient with incapacitating systemic disease that is a constant threat to life; and V-moribund, patients not expected to live 24 hours with or without operation.

Physician -an individual holding an MD or DO degree licensed pursuant to the NC Medical Practice Act and who performs surgical or special procedures covered by these guidelines. Recovery area - a room or limited access area of an office dedicated to providing medical services to patients recovering from surgical or special procedures or anesthesia.

Reportable complications - untoward events occurring at any time within forty-eight (48) hours of any surgical or special procedure or the administration of anesthesia in an office setting including, but not limited to, any of the following: paralysis, nerve injury, malignant hyperthermia,

seizures, myocardial infarction, pulmonary embolism, renal failure, significant cardiac events, respiratory arrest, aspiration of gastric contents, cerebral vascular accident, transfusion reaction, pneumothorax, allergic reaction to anesthesia, unintended hospitalization for more than twenty-four (24) hours, or death.

Special procedure - patient care that requires entering the body with instruments in a potentially painful manner, or that requires the patient to be immobile, for a diagnostic or therapeutic procedure requiring anesthesia services; for example, diagnostic or therapeutic endoscopy; invasive radiologic procedures, pediatric magnetic resonance imaging; manipulation under anesthesia or endoscopic examination with the use of general anesthesia.

Surgical procedure - the revision, destruction, incision, or structural alteration of human tissue performed using a variety of methods and instruments and includes the operative and non-operative care of individuals in need of such intervention, and demands pre-operative assessment, judgment, technical skill, post-operative management, and follow-up.

Topical anesthesia - an anesthetic agent applied directly or by spray to the skin or mucous membranes, intended to produce a transient and reversible loss of sensation to a circumscribed area.

# 2. Access to medical records

9/2010 COMMITTEE RECOMMENDATION: Substitute "physician" with "licensee" to be consistent with previous changes made to Position Statements. No further changes are recommended.

9/2010 BOARD ACTION: Adopt the Committee recommendation.

# Access to medical records

A physician's licensee's policies and practices relating to medical records under their control should be designed to benefit the health and welfare of patients, whether current or past, and should facilitate the transfer of clear and reliable information about a patient's care. Such policies and practices should conform to applicable federal and state laws governing health information.

It is the position of the North Carolina Medical Board that notes made by a <u>physician</u> <u>licensee</u> in the course of diagnosing and treating patients are primarily for the physician's use and to promote continuity of care. Patients, however, have a substantial right of access to their medical records and a qualified right to amend their records pursuant to the HIPAA privacy regulations.

Medical records are confidential documents and should only be released when permitted by law or with proper written authorization of the patient. <u>Physicians Licensees</u> are responsible for safeguarding and protecting the medical record and for providing adequate security measures.

Each physician licensee has a duty on the request of a patient or the patient's representative to release a copy of the record in a timely manner to the patient or the patient's representative, unless the physician licensee believes that such release would endanger the patient's life or cause harm to another person. This includes medical records received from other physician offices or health care facilities. A summary may be provided in lieu of providing access to or copies of medical records only if the patient agrees in advance to such a summary and to any fees imposed for its production.

Physicians Licensees may charge a reasonable fee for the preparation and/or the photocopying of medical and other records. To assist in avoiding misunderstandings, and for a reasonable fee, the physician licensee should be willing to review the medical records with the patient at the patient's request. Medical records should not be withheld because an account is overdue or a bill is owed (including charges for copies or summaries of medical records).

Should it be the physician's licensee's policy to complete insurance or other forms for established patients, it is the position of the Board that the physician licensee should complete

those forms in a timely manner. If a form is simple, the physician licensee should perform this task for no fee. If a form is complex, the physician licensee may charge a reasonable fee.

To prevent misunderstandings, the physician's <u>licensee's</u> policies about providing copies or summaries of medical records and about completing forms should be made available in writing to patients when the physician-patient relationship begins.

Physicians Licensees should not relinquish control over their patients' medical records to third parties unless there is an enforceable agreement that includes adequate provisions to protect patient confidentiality and to ensure access to those records.<sup>1</sup>

When responding to subpoenas for medical records, unless there is a court or administrative order, physicians licensees should follow the applicable federal regulations.

<sup>1</sup> See also Position Statement on Departures from or Closings of Medical Practices. (Adopted November 1993) (Amended May 1996, September 1997, March 2002, August 2003)

#### OLD BUSINESS:

# II. A. POSITION STATEMENT CONTINUED REVIEW

Issue: In November 2009, the Board approved the Policy Committee's recommendation to review Position Statements at least once every four years. A review schedule has been formulated for the Committee's consideration.

1. Medical, Nursing, Pharmacy Boards: Joint Statement on Pain Management in End-of-Life Care

5/2010 COMMITTEE DISCUSSION: The Committee discussed whether changes should be made to specify that the position statement applies to other licensees as well. It was suggested that, since the position statement was initially propounded as a joint statement, it might be helpful to discuss this matter with the other licensing boards.

5/2010 COMMITTEE RECOMMENDATION: Mr. Brosius to contact the Pharmacy Board and the Nursing Board to determine if they object to the proposed changes and if they will join in those changes.

5/2010 BOARD ACTION: Adopt the Committee recommendation.

7/2010 COMMITTEE RECOMMENDATION: Mr. Brosius to contact the Pharmacy Board and the Nursing Board to determine if they object to the proposed changes and if they will join in those changes.

7/2010 BOARD ACTION: Adopt Committee recommendation.

9/2010 COMMITTEE DISCUSSION: The Committee will wait for a response from the Pharmacy Board and Nursing Board.

9/2010 COMMITTEE RECOMMENDATION: No action is necessary.

9/2010 BOARD ACTION: Adopt the Committee recommendation.

Joint Statement on Pain Management in End-of-Life Care (Adopted by the North Carolina Medical, Nursing, and Pharmacy Boards)

Through dialogue with members of the healthcare community and consumers, a number of perceived regulatory barriers to adequate pain management in end-of-life care have been expressed to the Boards of Medicine, Nursing, and Pharmacy. The following statement attempts to address these misperceptions by outlining practice expectations for physicians and other health care professionals authorized to prescribe medications, as well as nurses and pharmacists involved in this aspect of end-of-life care. The statement is based on:

- the legal scope of practice for each of these licensed health professionals;
- professional collaboration and communication among health professionals providing palliative care; and
- a standard of care that assures on-going pain assessment, a therapeutic plan for pain management interventions; and evidence of adequate symptom management for the dying patient.

It is the position of all three Boards that patients and their families should be assured of competent, comprehensive palliative care at the end of their lives. Physicians, nurses and pharmacists should be knowledgeable regarding effective and compassionate pain relief, and patients and their families should be assured such relief will be provided.

Because of the overwhelming concern of patients about pain relief, the physician needs to give special attention to the effective assessment of pain. It is particularly important that the physician frankly but sensitively discuss with the patient and the family their concerns and choices at the end of life. As part of this discussion, the physician should make clear that, in some end of life care situations, there are inherent risks associated with effective pain relief. *The Medical Board will assume opioid use in such patients is appropriate if the responsible physician is familiar with and abides by acceptable medical guidelines regarding such use, is knowledgeable about effective and compassionate pain relief, and maintains an appropriate medical record that details a pain management plan.* Because the Board is aware of the inherent risks associated with effective pain relief in such situations, it will not interpret their occurrence as subject to discipline by the Board.

With regard to pharmacy practice, North Carolina has no quantity restrictions on dispensing controlled substances including those in Schedule II. This is significant when utilizing the federal rule that allows the partial filling of Schedule II prescriptions for up to 60 days. In these situations it would minimize expenses and unnecessary waste of drugs if the prescriber would note on the prescription that the patient is terminally ill and specify the largest anticipated quantity that could be needed for the next two months. The pharmacist could then dispense smaller quantities of the prescription to meet the patient's needs up to the total quantity authorized. Government-approved labeling for dosage level and frequency can be useful as

guidance for patient care. Health professionals may, on occasion, determine that higher levels are justified in specific cases. However, these occasions would be exceptions to general practice and would need to be properly documented to establish informed consent of the patient and family.

Federal and state rules also allow the fax transmittal of an original prescription for Schedule II drugs for hospice patients. If the prescriber notes the hospice status of the patient on the faxed document, it serves as the original. Pharmacy rules also allow the emergency refilling of prescriptions in Schedules III, IV, and V. While this does not apply to Schedule II drugs, it can be useful in situations where the patient is using drugs such as Vicodin for pain or Xanax for anxiety.

The nurse is often the health professional most involved in on-going pain assessment, implementing the prescribed pain management plan, evaluating the patient's response to such interventions and adjusting medication levels based on patient status. In order to achieve adequate pain management, the prescription must provide dosage ranges and frequency parameters within which the nurse may adjust (titrate) medication in order to achieve adequate pain control. Consistent with the licensee's scope of practice, the RN or LPN is accountable for implementing the pain management plan utilizing his/her knowledge base and documented assessment of the patient's needs. *The nurse has the authority to adjust medication levels within the dosage and frequency ranges stipulated by the prescriber and according to the agency's established protocols.* However, the nurse does not have the authority to change the medical pain management plan. When adequate pain management is not achieved under the currently prescribed treatment plan, the nurse is responsible for reporting such findings to the prescriber and documenting this communication. Only the physician or other health professional with authority to prescribe may change the medical pain management plan.

Communication and collaboration between members of the healthcare team, and the patient and family are essential in achieving adequate pain management in end-of-life care. Within this interdisciplinary framework for end of life care, effective pain management should include:

- thorough documentation of all aspects of the patient's assessment and care;
- a working diagnosis and therapeutic treatment plan including pharmacologic and non-pharmacologic interventions;
- regular and documented evaluation of response to the interventions and, as appropriate, revisions to the treatment plan;
- evidence of communication among care providers;
- education of the patient and family; and
- a clear understanding by the patient, the family and healthcare team of the treatment goals.

It is important to remind health professionals that licensing boards hold each licensee accountable for providing safe, effective care. Exercising this standard of care requires the application of knowledge, skills, as well as ethical principles focused on optimum patient care while taking all appropriate measures to relieve suffering. The healthcare team should give primary importance to the expressed desires of the patient tempered by the judgment and legal responsibilities of each licensed health professional as to what is in the patient's best interest.

(October 1999)

#### II. B. PHYSICIAN ADVERTISING OF BOARD CERTIFICATION

7/2009 BOARD ACTION: Approve proposed rule. Proceed with rule-making process.

9/2009 COMMITTEE DISCUSSION: It was reported that the following rule has been submitted to the Office of Administrative Hearings to be published in the NC Register. A public hearing for the purpose of collecting any comments will be held at the Board's office on November 30, 2009 at 11:00 am. The proposed rule will be submitted to the Board at its December meeting for adoption.

9/2009 BOARD ACTION: Accept as information.

11/2009 COMMITTEE DISCUSSION: It was reported that the following rule has been submitted to the Office of Administrative Hearings and was published in the NC Register. A public hearing for the purpose of collecting any comments will be held at the Board's office on November 30, 2009 at 11:00 am. The Board continues to receive comments. The proposed rule and comments collected will be presented to the Board at its January 2010 meeting for consideration.

11/2009 COMMITTEE RECOMMENDATION: No action necessary.

11/2009 BOARD ACTION: No action necessary.

1/2010 COMMITTEE DISCUSSION: A public hearing was held on November 30, 2009, for the purpose of receiving comments regarding the proposed rule. A taskforce is currently being assembled to further research and consider this issue. No action is necessary at this time.

1/2010 COMMITTEE RECOMMENDATION: For information only. No action necessary at this time.

1/2010 BOARD ACTION: Dr. Jablonski is to appoint a taskforce to further research and consider this issue.

5/2010 COMMITTEE DISCUSSION: The taskforce has been created and its first meeting is scheduled for May 18<sup>th</sup>, 2010.

5/2010 COMMITTEE DISCUSSION: The taskforce has been created and held its first meeting on May 18, 2010. The taskforce invited additional comments on the issue to those present and will table this matter until sufficient time has transpired to allow for additional comment.

5/2010 COMMITTEE RECOMMENDATION: For information only. No action necessary at this time.

5/2010 BOARD ACTION: Adopt Committee recommendation.

7/2010 COMMITTEE DISCUSSION: Mrs. Apperson addressed the Committee regarding the May 18, 2010, taskforce meeting. It was suggested that the Committee consider adding criteria to the proposed rule in order to specify the

requirements that the Board could consider in determining which certifying boards would be approved to use the term "Board Certified." The Committee indicated that there seemed to be a consensus that a licensee must specify what area they are board certified in when advertising and identify the certifying Board. This would prohibit a licensee from advertising as being board certified and the board certification being in a field unrelated to the one being advertised. Additionally, the Committee pointed out that reporting board certifications for hospital credentialing purposes is not advertising. It was suggested that the Committee consider defining advertising. A representative of the NCMS suggested that the rule might work better in conjunction with a position statement. Dr. Walker pointed out that the Board originally had a position statement.

7/2010 COMMITTEE RECOMMENDATION: No action taken.

9/2010 COMMITTEE DISCUSSION: Dr. Walker and Mrs. Apperson presented the Report of the Task Force on Physician Advertising of Board Certification, which included amendments to the proposed Board Rule 21 NCAC 32Y .0101 "Advertising of Specialty Board Certification. Mike Borden, NC Academy of Physician Assistants, suggested that the Committee consider including PAs in the rule. There was some discussion about board certification requirements for non-physician licensees. Representatives from various organizations thanked the Board for allowing them to have input during the process.

9/2010 COMMITTEE RECOMMENDATION: Present the Report of the Task Force on Physician Advertising of Board Certification and proposed amendments to 21 NCAC 32Y .0101 to the full Board and recommend approval and adoption. Limit proposed rule to physicians. Consider whether to adopt specific rules pertaining to advertisements by non-physician licensees.

9/2010 BOARD ACTION: Adopt the Committee recommendation.

North Carolina Medical Board

Task Force on Physician Advertising of Specialty Board Certification Minutes of the Meeting of May 19, 2010

The Meeting of the Task Force on Specialty Board Certification was called to order by Chairman William Walker, M.D. at 6:00 PM Tuesday, May 19, 2010 in the Board Room of the North Carolina Medical Board, 1203 Front Street, Raleigh, NC.

The following Task Force members were present:

William Walker, MD, Chair, Member of the North Carolina Medical Board
Pamela Blizzard, Member of the North Carolina Medical Board
Ralph Loomis, MD, Member of the North Carolina Medical Board
Craig Burkhart, MD(Chapel Hill)
Edward Ermini, MD (Lumberton)
John Fagg, MD (Winston-Salem)
Brian Forrest, MD (Apex)
Cynthia Gregg, MD (Cary)
Paul Francis Malinda, MD (Kernersville)

Warren Pendergast, MD (Raleigh) John C. Pittman, MD (Raleigh) Vivek Tayal, MD (Charlotte & Washington, DC)

Dr. Walker explained the purpose and need for the Task Force. The North Carolina Medical Board selected the Task Force members to serve as a panel of experts to review materials, hear presentations and discuss appropriate standards for physicians who advertise they are board certified. Dr. Walker cautioned the group that the Task Force meeting was not intended as a forum to debate the relative merits of various certifying organizations but rather to define the appropriate use of the term "board certified" in advertising.

The Task Force heard a briefing from Medical Board attorney Todd Brosius on the Board's work on the issue. The Board has broad general authority under N.C.G.S. 90-14(a)(1) to discipline its licensees for unprofessional conduct such as false or misleading advertising. In November 1999 the Board first adopted a Position Statement entitled "Advertising and Publicity" generally cautioning licensees against false advertising and providing guidelines with which to assess the propriety of certain kinds of ads. (Position Statement adopted November 1999; amended March 2001; and revised September 2005). The Board revisited physician board certification advertising standards three years ago when the Board disciplined a physician for advertising his board certification by a patently illegitimate board. The Medical Board subsequently issued proposed rule 21 NCAC 32Y .0101 "Advertising of Specialty and Board Certification" which set criteria that a board must meet before a physician could advertise board-certified status. The Medical Board received 77 letters of public comment at the November 2009 rule hearing, which prompted the Board to delay the rulemaking process pending further solicitation of public input and in-depth discussion with stakeholders. This need for more information precipitated the Task Force's creation.

The Task Force was reminded of the reading materials sent for review prior to the meeting. The group then heard formal presentations concerning board certification criteria and operations from the following individuals representing the following organizations: Cheryl Gross of the American Osteopathic Association Bureau of Osteopathic Specialties; William Carbone, MD, of the American Board of Physician Specialists; Kevin Weiss, MD, of the American Board of Medical Specialties; Scott Fintzen, JD and Michael Will, MD, DDS of the American Board of Cosmetic Surgery; and Janice Ramquist of the North Carolina Integrative Medical Society. The Task Force engaged in conversation with each of the speakers.

Dr. Walker then led a discussion among the Task Force members concerning the evening's presentations. One member suggested the NCMB require physicians who advertise to list board certification and the name of the certifying board. The NCMB should also provide guidelines to assist in identifying legitimate boards. "Board certification" should be meaningful. It should reflect rigorous training and viable testing in a specialty. NCMB should serve as a safety net to discern legitimate boards from illegitimate boards but should allow for some expansion and innovation in the development of new specialty boards as medicine evolves.

Another opined that "board certified" is a widely understood term. A possible alternative would be to permit physicians to advertise that they are "trained in a certain procedure" or "certified to do a certain procedure."

Another task force member recommended that the language of proposed rule 21 NCAC 32Y .0101(a)(4) be amended to require training in the area of specialization. The NCMB needs to educate the public about the significance of "board certification." Yellow pages and internet

sites often erroneously designate a physician as a specialist or attribute board certification when a physician is unaware that his/her information is included an advertisement or listing. It is impossible for a physician to prevent its occurrence and it would be inequitable for the NCMB to punish in those circumstances. It was further suggested that the NCMB Licensee Information Page would be an ideal site to allow for this information.

It was noted that the proposed rule is more lenient than the current Position Statement in that it permits advertisement of board certification by organizations "equivalent to" ABMS-recognized boards. NCMB needs to clarify what is meant by "equivalent" and reference was made to the Texas Medical Board's rule.

It was noted that it will be a time- and resource-intensive undertaking for the NCMB to determine which certifying boards are legitimate and which are not. It was again suggested that if a physician's residency training differs from his board certification, both should be included in an advertisement.

Others suggested looking at Florida's and Texas' approach to advertising of board certification. Another suggestion was to develop a logo to be used in advertisements that signifies the NCMB has approved the board.

Dr. Walker summarized the evening's discussion and added that NCMB policy also needs to recognize the international practice of medicine and foreign-trained physicians with distinguished international credentials cannot be unfairly proscribed from advertising their board certifications because the NCMB was provincial in its approach to policymaking.

Dr. Walker, aware of the issue's inherent complexity and mindful of the late hour, invited interested parties to submit additional written comments on the narrow issue of physician advertising of board certification before June 18. The meeting was adjourned at 9 PM.

Recommendations of the North Carolina Medical Board Task Force on Physician Advertising of Board Certification

The Task Force met at 6 PM on Tuesday, May 18, 2010 in the Board Room of the North Carolina Medical Board, 1203 Front Street, Raleigh, North Carolina. The "Minutes of the Meeting of the North Carolina Medical Board Task Force on Physician Advertising of Board Certification" are incorporated as Attachment 1. The Task Force was charged with discussing and identifying standards for the state's physicians advertising to the public that they are "board certified."

# Defining "Board Certified"

"Board certified" has a special meaning within the health care industry and to the general public. Board Certification requires completion of a residency, licensure by a state medical board, and passing additional examinations in the specialty field. Board certification further assures the public that a physician remains dedicated to lifelong learning and mastery of the specialty field. Board certification connotes that a physician has advanced knowledge and expertise.

The general public relies on the term "board certified" as a means of assessing a physician's clinical ability. Patients who select a board certified physician as their health care professional historically have been safe in assuming that the physician had met rigorous educational, training

and testing requirements. (ABMS letter to NCMB Task Force, May 10, 2010.) A physician's board certification may be used to determine eligibility to contract with managed care entities, for credentialing to serve on hospital staffs, to obtain other clinical privileges, to ascertain competence to practice medicine or for other purposes. (AMA Policy H-275.944 Board Certification and Discrimination (Sub. Res. 701, I-95, Reaffirmed: CME Rep. 7, A-07)) However, the Task Force is focused only on the issue of physician advertising of board certification to the public.

# History of Board Certification

In the early 1900's advances in medical science vastly improved the delivery of health care. Unfortunately this era of rapid medical advancement also allowed less well trained or less well qualified physicians to make claims concerning the extent of their knowledge and training that could not be substantiated. With no formal system in place to validate these claims, neither the public nor the medical profession could trust that a self-designated specialist had the appropriate qualifications. This uncertainty prompted the rise of the specialty board movement.

In 1908 the American Academy of Ophthalmology and Otolaryngology first proposed the notion of specialized training followed by an examination in order to determine a physician's competence in a particular field. The National Board of Medical Examiners and the American Medical Association, among others, worked together to implement standards for graduate medical school education and the recognition of physician specialists which was largely accomplished during the 1920s and 1930s. National specialty boards designated certain clinical and practical experiences as well as graduate course requirements as prerequisites to sit for the examinations. Eventually specialty boards established a uniform system to administer examinations conducted by a group of peers selected by the boards. The rapid and widespread acceptance of specialty boards by the profession began to restrain physicians with little or no formal education in the specialty from designating themselves as specialists. (www.ABMS.org)

There are currently approximately 100 to 200 organizations claiming to certify physicians as specialists. (ABMS letter to NCMB Task Force, May 10, 2010) These certifying boards have a broad spectrum of intellectual, clinical, and academic requirements to achieve certification status. Some boards have been criticized for lacking intellectual rigor and designating physicians as "board certified" without meeting any real standards other than paying the certifying board's fees. These "bogus boards" have degraded the term "board certified" as a measure of reliability. A significant conflict exists between the well established certifying organizations (ABMS and AOA) and newer organizations wishing to become certifying boards. The conflict revolves around a perception of prejudice on the part of the established organizations against newcomers on the grounds of economic issues and differences regarding the quality of the programs and the appropriateness of subdivisions of medical training. There may be varying degrees of truth in the claims made on all sides of the debate. Regardless, the public can no longer safely assume that "board certified" means what it once did. The North Carolina Medical Board wishes to establish guidelines for its physician licensees to avoid misleading the public when advertising "board certification."

NCMB and Standards for Physician Advertising of Board Certification

The Board has broad general authority under N.C.G.S. 90-14(a)(1) to discipline its licensees for conduct such as false or misleading advertising. In November 1999 the Board first adopted a Position Statement entitled "Advertising and Publicity" generally cautioning licensees against false advertising and providing guidelines to assess the propriety of certain kinds of ads.

(Position Statement adopted November 1999; amended March 2001; revised September 2005). The Board revisited physician board certification advertising standards three years ago when the Board disciplined a physician for publicly advertising his board certification by a patently "bogus" board and failing to disclose in advertising that his post graduate training was done in another specialty field. The NCMB felt that its licensees would benefit from more robust advertising guidelines. Accordingly, the NCMB issued proposed rule 21 NCAC 32Y .0101 "Advertising of Specialty and Board Certification" which set criteria that a board must meet before a physician could advertise board-certified status. The Medical Board received 77 letters of public comment at the November 2009 rule hearing, prompting the Board to delay the rulemaking process to create this Task Force to allow for additional public input and discussion among stakeholders.

# Background

The issue of defining the parameters of appropriate advertising of board certification by physician licensees began when the California Board studied the issue in 1990 at the request of the California state legislature. Since then the Texas, Florida and Oklahoma boards have each labored to adopt criteria for distinguishing "bogus" or "sham" certifying boards from their legitimate counterparts. These efforts have given rise to expensive and protracted litigation as well as aggressive lobbying efforts by specialty boards which do not meet the criteria of the various state licensing Boards. At its 2010 Annual Meeting, the Federation of State Medical Boards declined to adopt a resolution asking the FSMB to study advertising standards regarding board certification. The North Carolina Medical Board and the Task Force have endeavored to find a solution that will adequately protect the public.

#### Task Force Recommendations

The issue of advertising board certification is complex and contentious. To fully understand board certification requires a working knowledge of physician residency and fellowship training, the taxonomy of physician specialty designations, and specialty certification boards. Constitutional law concerning commercial free speech, state physician regulatory law and physician specialty politics all relate to the issue of advertising. Consequently the Task Force recommends that the Medical Board adopt a strategy to regulate and educate its physician licensees and educate the general public. First, the Task Force recommends amendments to proposed Rule 21 NCAC 32Y .0101 "Advertising of Specialty and Board Certification." The Board should also amend its current Position Statement, "Advertising and Publicity" (adopted Nov. 1, 1999) to better inform both licensees and the general public in specific terms what the Boards expectations are for specialty and board certification advertising by physicians. Finally, the Board should provide consumer education regarding "board certification" on the Board website with links to appropriate resources.

# Changes to Proposed NCMB Rule 21 NCAC 32Y .0101

The proposed rule, Attachment 2, precludes advertisement of board certification unless the board in question has been approved by the American Board of Medical Specialties; the Bureau of Osteopathic Specialists of the American Osteopathic Association; the Royal College of Physicians and Surgeons of Canada; or a board or association fulfilling the characteristics listed in the rule. The proposed rule further requires that a physician advertising board certification disclose the name of the specialty board granting certification. Finally, the proposed rule requires that if a physician is board-certified in a specialty different than the one in which he or

she is residency- or fellowship-trained, the physician must note that with equal prominence in the advertising materials.

The Task Force recommends against the Medical Board's implementation of any rule, policy or procedure that would require the Medical Board to individually assess the legitimacy of specialty boards that grant board certification status to physicians. The leadership, management, board certification requirements and membership requirements in such organizations are in a state of flux. Assessing specialty boards is a data-intensive, time-intensive and resource-intensive undertaking and requires special expertise. Other state medical boards with such review mechanisms report substantial litigation by certifying boards which do not met the various state licensing boards' criteria. While litigation risk should not prevent the adoption of policies, the cost in time and resources must be considered.

Amendments to the NCMB Position Statement "Advertising and Publicity"

The Task Force recommends amendments to the Position Statement. The Task Force believes that the statement in its present form lacks the specific detail that licensees may rely on when crafting their advertisements to comport with the Board's expectations. The Task Force believes specific guidance serves the licensees and the public better. The statement should reflect NCMB's opinions concerning consumer advertising. The statement should reflect the reality that physicians often cannot control information on the internet in physician listings, consumer rating services and other media. The statement should also encourage physicians to provide accurate current information on the North Carolina Medical Board's Licensee Information Pages. Consideration should be given to the Constitutional protections afforded commercial speech in crafting the Position Statement.

# Consumer Education on the NCMB Website

The Task Force recommends that the North Carolina Medical Board expand the use of the North Carolina Medical Board website as a consumer resource center. The Board should direct its staff to provide educational materials in laymen's terms that explain the significance of the term "board certified." The materials should explain how certifying boards differ from state licensing agencies and give a brief explanation of the history of the development of certifying boards. It should be noted that board certification is used for assessment purposes by a variety of organizations, including insurance panels, hospital privileging committees, and Medicare and Medicaid, among others. The information should include recognition that ABMS- and AOArecognized board certifications are acknowledged by industry experts to represent the "gold standard" for physicians but that other legitimate and credible boards exist. Likewise, the public should be informed that Boards requiring completion of a specialty-specific ACGME-approved postgraduate training program represent the highest standard of physician training and certification. The public should also be informed that there are viable reasons why such board certification is not open to everyone, for example, emergency physicians who graduated from medical school prior to the formal recognition of emergency medicine as an independent specialty. The public should also be afforded a list of criteria the NCMB feels are essential components of a legitimate certifying board. NCMB should also provide a list of "red flags" that identify "bogus" or "sham" boards.

The consumer education page should make clear that the Board's rules governing physician advertising of board certification apply to the limited instance of consumer advertising and do not serve as a referendum on the legitimacy of various certifying boards. The standards should not be used as a benchmark or controlling authority for credentialing organizations or for

privileging purposes. Likewise, the Board's approval of advertising of board certification by boards other than those traditional ABMS- or AOA-approved boards should not be misconstrued as tacit approval of diminution of standards for certifying boards.

# Conclusion

The North Carolina Medical Board Task Force on Physician Advertising of Specialty Board Certification hereby presents this report for consideration by the Policy Committee of the North Carolina Medical Board at the Board's September, 2010 meeting.

Proposed 21 NCAC 32Y .0101 Advertising of Specialty and Board Certification\*

 (a) No physician shall advertise or otherwise hold himself or herself out to the public as being "Board Certified" without proof of current certification by a specialty board approved by the (1) American Board of Medical Specialties; (2) the Bureau of Osteopathic Specialists of the American Osteopathic Association; (3) the Royal College of Physicians and Surgeons of Canada; a board or association that meets the following requirements:

- (1) the organization requires all physicians seeking certification to successfully pass a written or oral examination or both, which tests the applicant's knowledge and skill in the specialty or subspecialty area of medicine. All examinations require a psychometric evaluation for validation;<sup>i</sup>
- (2) the organization requires diplomates to recertify every ten years or less, which requires passage of a valid written examination;
- (3) the organization prohibits all certification and recertification candidates from attempting more than three times in three years to pass the examination;
- the organization has written proof of a determination by the Internal Revenue Service that the certifying board is tax-exempt under Section 501(c) of the Internal Revenue Code;
- (5) the organization has a permanent headquarters and staff sufficient to respond to consumer and regulatory inquiries;
- (6) the organization has written by-laws and a code of ethics to guide the practice of its members and an internal review and control process including budgetary practices to ensure effective utilization of resources; and
- (7) the organization requires all physicians seeking certification to have satisfactorily completed identifiable and substantial training (not consisting solely of experiential or "on the job" training) in the specialty or subspecialty area of medicine in which the physician is seeking certification.

(b) Any physicians advertising or otherwise holding himself or herself out to the public as "Board Certified" as contemplated in paragraph (a) shall disclose in the advertisement the specialty board by which the physician was certified.

(c) A physician that completed his or her training in a specialty or sub-specialty different from the specialty or sub-specialty in which he or she is "Board Certified" as contemplated in paragraph (a) shall note in any advertisements or other public announcements the specialty or sub-specialty in which the physician's residency training or fellowship training was completed. Such advertisements or other public announcements shall list the residency training or fellowship training completed by the physician and the specialty or sub-specialty in which he or she is Board Certified with equal prominence.

(d) The licensee shall maintain and provide to the Board upon request evidence of current board certification and, in the case of non-ABMS, non-AOA and non-RCPSC boards, evidence that the certifying board meets the criteria listed in paragraph (a).

# CONTINUED COMPETENCE COMMITTEE REPORT

Members present were: Paul Camnitz, MD, Chair; and William Walker, MD and Ms. Peggy Robinson, PA-C. Also attending were: Dr. Michael Sheppa, Assistant Medical Director and Maureen Bedell, Staff.

# OLD BUSINESS

1. There was no old business to discuss.

#### NEW BUSINESS

- Dr. Sheppa gave the Committee an update of the Federation of State Medial Board's Special Committee on Reentry. Dr. Sheppa explained that the AMA held a workshop in May 2010 discussing how to handle the potential 40 million new Americans who will have healthcare and their need for physicians. Reentry was one of the topics discussed during that conversation. Then in June 2010 the FSMB held a meeting to address the same general topics. Their goal is to come up with a standard guideline to pass along to all the state boards. A discussion then followed regarding how states are handling the reentry process. It was noted the NC Medical Board is ahead of the curve in this area.
- 2. Dr. Walker gave the committee a general review of on hospital on-going practitioner reviews and how that process, mandated by Joint Commission, might serve as a part if Maintenance of Competence tools. A discussion then followed.
- 3. Dr. Sheppa presented an informal discussion on GME licensure. The Committee discussed the different views regarding the prerequisites for NC applicants and the possibility of changes to the current requirements.

# LICENSE COMMITTEE REPORT

Janice Huff, MD, Chairman, Pamela Blizzard, Thomas Hill, MD, Ralph Loomis, MD, Joy Cooke, Michelle Allen, Mary Rogers, Ravonda James, Scott Kirby, MD, Thom Mansfield, Patrick Balestrieri, Carren Mackiewicz, Nancy Hemphill, Amy Whited, Warren Pendergast, MD, Joe Jordan, PhD

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 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 and/or to preserve attorney/client privilege.

Twenty three licensure applications were considered. 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.

#### OPEN SESSION OLD BUSINESS:

# 1. Statutory Requirement for Postgraduate Training

Issue: At the March 2009 meeting, a motion was passed for staff to investigate the feasibility of changing NCGS 90-9.1(a)(2)a to require completion of more than 1 year of postgraduate education for graduates of a medical college approved by the Liaison Commission on Medical Education, an osteopathic college approved by the American Osteopathic Association or The Committee for the Accreditation of Canadian Medical Schools after graduation from medical school. 11/09 Board Action: Have legal provide an update at the January 2010 meeting. Tasked to legal 12/9/09

01/2010 Board Action: Recommend special project assignment to contact stake holders and research the repercussions it will have on the medical community.

03/2010 Board Action: Legal to provide update at May 2010 meeting.

05/2010 Board Action: Thom Mansfield to continue to get input from stakeholders.

07/2010 Board Action: Dr. Kirby and Thom to pursue meeting with Dr. Gerancher (WFU SOM) and working towards presenting a bill to the legislature next year.

Committee Recommendation: Staff to move forward on presenting a bill to the legislature requiring all physicians to obtain 2 years of postgraduate training for US and IMG graduates.

Board Action: Staff to move forward on presenting a bill to the legislature requiring all physicians to obtain 2 years of postgraduate training for US and IMG graduates.

#### 2. Legal Residence Status

Staff continues to investigate the most practical way to verify that an applicant is a legal resident of the US. 11/09 Board Action: Move forward with staff's proposal. Legal and Licensing Staff have submitted an application to participate in the SAVE program and are awaiting a response to the request.

01/2010 Board Action: Accept as information - Staff to provide update at March meeting.

03/2010 Board Action: Department of Homeland Security has backlog. Legal to provide update at May 2010 meeting.

05/20 10 Board Action: Staff will continue to request status updates from the Department of Homeland Security every 2 months. Legal will provide updates at next committee meeting.

Update: Patrick has submitted a Memorandum of Agreement (MOU) to participate in the SAVE program. Patrick reported we will have an immigration attorney provide staff with a tutorial on immigration laws. GLS will need to be updated prior to implementation, Operations has been notified of this and is working on implementing the changes.

Committee Recommendation: Accept as information

Board Action: Accept as information

**NEW BUSINESS** 

1. Proposed Reentry Rules

Issue: Proposed rules for the reentry process have been drafted for the Board's approval

Committee Recommendation: Accept proposed rules with additional provision allowing physician six months to obtain a new mentor upon receipt of notice of termination of active mentor without having to reapply.

Board Action: Accept proposed rules with additional provision allowing physician six months to obtain a new mentor upon receipt of notice of termination of active mentor without having to reapply.

2. Expedited License

Issue: The Board recently approved rules for an expedited license process. The on-line application was launched on August 27, 2010.

Committee Recommendation: Accept as information

Board Action: Accept as information

3. Requiring FCVS for International Medical Graduates

Issue: Currently the Board requires applicants who have a previously established FCVS profile to have that profile submitted as part of their NCMB license application. Staff has discussed taking the step of "requiring" IMGs to use FCVS based on:

- FCVS' expertise in credentialing IMGs
- FCVS provides ECFMG certification (required of all IMGs)
- 75% of NC's IMG applicants already use FCVS
- 42% of FCVS' data base are IMGs
- FCVS has reduced their cycle time for initial applications and continue to work hard to further reduce the cycle time

There will be an additional cost to the applicant, but it will be beneficial to the applicant in the long run. NCMB will have to do some major advertising of the change and it is not expected to be implemented before September 1, 2011.

Committee Recommendation: Accept proposal requiring IMGs to use FCVS as part of the application process for full license. Have staff move forward with appropriate rule change and an advertising plan. Implementation will not be effective prior to September 2011.

Board Action: Accept proposal requiring IMGs to use FCVS as part of the application process for full license. Have staff move forward with appropriate rule change and an advertising plan.

4. Application Chronological History Section

Issue: As a result of survey responses, staff has discussed changing the chronological section of the application to begin with "medical school" instead of "high school" for all applications. Staff is working on some language that will require applicants to list all schools attended in regard to their current vocation just in case they were dismissed or flunked out.

Committee Recommendation: Do not change the chronological history section.

Board Action: Do not change the chronological history section.

5. Resident Training Licenses issued 2010

Issue: The License Department has issued a total of 830 resident training licenses YTD. A list broken down by institution is available for your review on this Board Book.

Committee Recommendation: Accept as information

Board Action: Accept as information

6. Application Question #10

Issue: It has been recommended to change question 10 on the application form from:

Have you ever been suspended, placed on scholastic or disciplinary probation, expelled or requested to resign from any medical school, residency or fellowship program?

To: While at any medical school, residency or fellowship program, have you ever:

- been suspended, placed on scholastic or disciplinary probation, expelled or requested to resign, or
- withdrawn or gone on leave of absence while under investigation or threat of investigation or disciplinary action?

Committee Recommendation: Approve proposed change to question10.

Board Action: Change question 10 to read:

While at any professional school, or training program, have you ever:

- been suspended, placed on scholastic or disciplinary probation, expelled or requested to resign, or
- withdrawn or gone on leave of absence while under investigation or threat of investigation or disciplinary action?

#### PHYSICIAN APPLICANTS PRESENTED TO THE SEPTEMBER 2010 MEETING

Abraham, Ancy Acquista, Elizabeth Adams, Meredith Claire Brandt Adegoroye, Danielle Folasayo Adkins, Paula Clark Akuneme, Marcel Ikwuoma Alobaidi, Mohammad Tarik Alwair, Hazaim Amao, Enobong Anderson, James Harold Andrews, Camile Marsh Armitage, John Marshall Arrowood, Kyle Elaine Binning Arru, Jason Michael Asplund, Sheryl Lynn Assefa, Daniel Abebe Atkin, Susan Elizabeth Austen, Michael John Averill, Katherine Ann Avosso, Daniel Louis Ayepah, Michael Adrian Ayiku, Bernard Bruce Ayoub, Walaa Ayoub Gabra Baab, Shad Masters Badano, Sara Nelly Bailey, Russell Coyle Baisden, Joseph Myers Bakaj, Gentiana Baker, Arthur Maine Bakhshandeh, Maryam Balaji, Kethandapatti Chakravarthy Baquero, Ashley Barrow, Richard Dowell Baucom, Harrison Bierman Beachum, Gary Hampton Beeson, Janine Serebro Belay, Sileshi Admassu Bevan, Katherine Ann Bhachawat, Ravindra Kumar

Bhowmick, Sumon Kumar Bica, David Pedro Blake, Robert Vincent Bloomquist, Erica Victoria Boschini, Fernando G

Bowen, Meredith Davis Braver, Larry Brayboy, Janel A. Brockway, Georgi Nicole Brooks, Michael Brothers, William George Brown, Carly Beth Bohrer Brown, Daniel Cates Brown, Jennifer Lynn Bryant, Brandon James Bryant, Darren Patrick Bryant, Paul Abbott Buonaccorsi, Peter Paul Burkett, Benjamin William Caballes, Frederick Ryan Michael Locso Cakmakci Midia, Esin Carlson, Richard Carneiro, Kevin Anthony Carner, Stephanie Lynn Carnes, Catherine Kelley Carter, Nathan Marcellous Carter, Philips John Caudill, Paul Hayden Cearlock, Michael Brad Celauro, Kathryn Pierce Chacko, Billy George Chakilam, Ramakrishna Chandrasekaran, Chitrabharathi Chapman, Donald Redding Chen, Qing Chen, Yong Choi, Emily Chun, Deborah Heeran Claeys, Sean Paul ClayRogers, Shelby Lynette Cobos, Franklin Vergara Coelho, Ana Luiza Cohen, Howard Steven Conway, Benjamin John Cook, Daniel Robert Cowan, Lisa Renee Cowart, Loy Dekle Craven, Robert Andrew Crawford, Clifford Addison Crimmins, Kristine Marie Dakakni, Tarek Page 34

Daniel, Rebecca Woods Darbandi-Tonkabon, Ramin Dawson, Shelton Phelps DeCroos, Francis Charindra Dennis, William Ray Desai, Krishna Mahesh Desai, Sapan Sharankishor Desauguste, Rollin Di Giulio, Robert Hugh Dimov, Nikolay Dimov Disanto, Vinson Michael Dixon, Donovan Dave Drayton, Kimberley Anastasia Dvergsten, Jeffrey Arthur Elenbaum, Stephanie Elgergawy, Dawood Soliman Emokpae, Courage Osifo Enarson, Campbell Edwin Ensminger, Jason Leslie Esmaili, Neda Evers, Gregory William Ezzeddine, Serena Diana Farkas, Linda Marie Fein, Melanie Feliz Ortiz, Abraham Flores, Marisa Cosmas Fontenot, Emily Marie Framstad, Mark Alan Friedman, Barry Howard Fuller, Megan Kelly Gade, Suchita Bhalchandra Galvin, Sirisha S. Gao, Lei Garcia, Godofredo Igno Gartrell, Douglas Mervyn Gause, Garrett Brian Geddings, Thomas Maxwell Geertz, Christopher Erik Gegick, Stephen John George, Ezmin Gerber, Nancy Jean Gerena, Gail Theresa Ghei, Sonia Kaur Gilmore, Gail Lee Gleeson, Carol Ann Godino, John

Goel, Anubhi Golding, Lauren Parks Gomez Suarez, Roberto Antonio Gore, Mitchell Ray Gower, William Adam Grant, Hugh Judd Griffin, Richard W. Gruneich, Jonathon Aaron Gualteros, Oscar Mauricio Guba, Alexander Michael Gucilatar, Max Deypalubos Guffrey, Gregg J. Gupta, Sachin Kumar Haas, Susan Abigail Farmer Haines, Joe Douglas Hamid, Nauman Hamrahian, Seyed Mehrdad Handa, Geeta Hansen, Samantha Ford Hardy, Constance Alexis Hathaway, Catherine Kizer Hauschka, Jennie Haynie, Aisha Cecilia Hedelund, Norma Louise Hernandez Grau De Lama, Giselle Marie Hewitt, Jana Lander Hewitt, Stephan Justin Anthony Hipps, John Bates Hodge, Bryan Kenneth Hofmann, Alison Marie Holder, David Michael Holladay, Nathan Brent Holland, Thomas Lawrence Holloway, Robert John Hopkins, Michael Benjamin Hopmeier, Robin Rene Horne, Karen Johnson Hunt, Kori Lynn Huxford, Michelle Canipe Hwang, James Imperial, Eva Angelie Islam, Md. Monirul Jackson, Saundra Alicia Jacobson, Richard David Jadcherla, Sreedevi James, Olga Page 35

Jani, Prashant Gunvantlal Jaquiss, Robert Douglas Jarskog, Lars Fredrik Jayawardena, Suriya Bandara Johns, Cynthia Ruth Johnson, Ian Todd Johnson, Lindsey Rich Jones, Jason Evan Kanaan, Matthew Gary Kaplan, Ivor Barry Karre, Premnath Reddy Karthikeyan, Omkar Kartush, Jack Michael Kavjian, David Alan Kealy, Ryan Matthew Kent, Eric Lance Keogh, Michael James Kertai, Miklos David Kesman, Rebecca Lynn Khairallah, Christian George Khan, Shujaat Ali Khanna, Siddharth Khatri, Pooja Kim, Sunghye Kinsley, Kim Marie Kinsley, Tina Renee Kirsch, Mark Kiser, Michelle McCrain Kiskaddon, Robert Todd Klima, Lawrence David Knable, Mark Eric Kobayashi, Daisuke Kolangaden, Zubin Paulson Kolycheva, Galina N. Kombrinck, Jonathan Michael Komissarova, Yelena Ilinichna Kornegay, Jonathan Hargett Kotha, Kavitha Sravanthi Reddy Kotsko, Jude David Kuskowski, Anne Sinks Ladha, Alim Mirza Lafeber, Thomas Edward Laguerre, Jacques Laicer, Cleopatra Lam, Amanda See-Wei Lam, Hung Du

Lamar, Zanetta Stewart Lareau, Stephanie Ann LaTorre, Louis Donald Lawhon, Jeffrey Leak, Byron Christopher Lechner, Sharon Lydia Jacobson Lee, Jonathan Chuang-Yien Levender, Michelle Marie Levitin, Gregory Michael Li, Zhicheng Lin, Helen Lindzen, Eric Crandall Waggoner Lineberry, Jeffrey Todd Linn, Heather Maude LoGuidice, Michael Anthony Lopez, Robert Ramon Lucchesi, Archana Chakravarthy Mabry, Myra Cummings Mahboob, Rashid Majka, Christopher Paul Mahoney, James Joseph Makonnen, Eyob Mardis, Donald Curtis Marra, Kevin York Marsoni, Nicolo Martin, Rebecca Mathilde Martin, Stephanie Falk Martin, Steve Marshall McAnallen, Terry Joseph McKillen, Julia Baskin McNeeley, Sean Michael Meadows, Robert Steven Mearns, Robert David Menon, Suma Messer, William Brogdon Metkus, Thomas Stephen Mhoon, Justin Thomas Michaels, David Adam Miller, Daniel Jezzard Mirza, Wajahat-Ali Mohamed, Fazil Ayube Mohmand, Hashim Khan Moreno, Andrew Morgan, Christopher Joseph Morrison, Angela Sharnell Mousallem, Talal Imad Page 36

Music, William Leslie Nasir, Ayesha Nawa, John Charles Neumann, Iliana Angelica Nix, David Sydney Nolan, Thomas Edward Nor, Eugene Basil Norbury, John William Nordin, John Robert Norman, Anne-Caroline Nwaokocha, Charles Ngozi Obisesan, Babajide Akanji O'Brien, Virginia Carroll Ofori-Amanfo, George Ogbata, Obiageli Uchenna Okasi, Chetanna Ijeoma Okoye, Sylvia Ifeyinwa Oldt, Robert James O'Leary, Emmeline Margaret Oliver, Joseph Andrew III Ollendorff, Arthur Tullin O'Neill, Lynn Bunch Osaguona, Stephen Efeosa Otaki, Yoshio Overstreet, Susan Lynn Padmanabhan, Ravindran Arcot Parti, Ashna Paruchuri, Vamsee Prasad Patel, Jitendra Keshavlal Patel, Pradeep Reddy Patole, Sonal Shirish Patterson, Ryan William Patterson, Sarah Ann Penumalli, Vikram Reddy Perrigo, Earl Stanley Petty, Christine Anderson Phelps, Tracy Lee Pickard, Robert Elliott Pierce, Richard Allan Pillinger, David Arthur Poetter, Vivian Ruth Polidoro, Angelique Renae Potu, Sangeetha Previti, Michael Charles Purdy, Julianne Kristin Quentzel, Paul Stephen

Rai, Ripudeep Ramsey, Jamie Lauren Rand, Joseph Raspanti, Anthony Edward Raspanti, Elizabeth Neale Raynor, Laura Lee Redding, Rebecca Steddom Reddy, Avinash Gollakistagari Reddy, Srikar Renaud, Stefan Alain Rentas, Evelyn Ricks-Cord, Anila Rondell Riel, Michael Anthony Robinson, Ashlee Allen Roehrs, Philip Andrew Rondla, Chetana Rott, Danielle Elana Rousseau, James Harry Russell, Marsha Yolanda Russo-Rivera, Kristin Mahri Rutterer, Kristin Wilson Sams, Cassandra Marie Santz, Jos Rosario Savarino, Daniel Stephen Sbarro, Mark James Schobert, Carol Marie Scully, Sean Patrick Seaman, Danielle Marie Shah, Ekta Ameesh Shah, Rajal Bipinbhai Shah, Ritesh Rajnikant Shah, Syed Hadi Raza Shahmehdi, Seyed Akhtar Shamleffer, Ibtehal Jaralla Sharma, Kamal Shattuck, Trisha Miller Sheth, Neil Perry Shivadas, Anita Sica, Roger Sebastian Sims, Suzanne Nicole Singaraju, Anupama Singh, Neeru Kaur Sklar, Robert Vincent Slubicki, Monica Nora Smarse, Jeffrey Michael Smith, Robert Stephen Page 37

Snow, Dan Gary Sohagia, Kinjal Bhikhalal Sola-Acevedo, Jessica Sonnenberg, Jill Marie Springs, Harold Leon Stiles, Jeffrey Douglas Stith, James Andrew Stump, Teresa Lynn Sulzer, Jana Leigh Super, Elizabeth Anne Susac-Pavic, Stela Svabek, Steven James Swackhammer, Randy Lee Swann, Leah Joy Martineau Tafel, John Andrews Taft, William Carlisle Tamba, Ismael Taylor, Anna Greta Birch Taylor, Deborah Jo Termini, John Frank Terry, Kimberly Dawn Upshaw, Jana Kristina Urban, Edward John Van Amerongen, Alexander Willem Vara, Manjula Lalijibhai Vaughan, George Dennis Vega, Ana Carolina Venrick, Michael Glen Veras, Emanuela Fernandes Tavora Vignola, Paul Alfred Vithala, Madhuri V Walden, Janica Evelyn Waller, Michael Lee Wang, Bo Wei, Xin Weiss, Mark Steven Weitzel, Scott Matthew Wilber, Monte Dean Wilkinson, Heather Lee Wilson, Lindsay Ann Wisniewski, Mary Louise Wolf, Elizabeth Anne Wong, Jan Howe Wright, Debbie Ruth Wu, Jing Yadav, Manu

Yancey, David Lindsay Yassa, Makram Anwar Yeater, Richard Elwood Young, Jeremy Nathan Zaffino, MaryShell Brosche Zeiler, David Zachary Zhu, Sha

#### LICENSE INTERVIEW REPORT

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 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 and/or to preserve attorney/client privilege.

Six 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.

### LICENSES APPROVED FROM JULY 6, 2010 – AUGUST 31, 2010

#### FULL LICENSE

Abraham, Ancy Acquista, Elizabeth Adams, Meredith Claire Brandt Adegoroye, Danielle Folasayo Akuneme, Marcel Ikwuoma Alobaidi. Mohammad Tarik Amao, Enobong Anderson, James Harold Andrews, Camile Marsh Arru, Jason Michael Asplund, Sheryl Lynn Assefa, Daniel Abebe Atkin, Susan Elizabeth Austen, Michael John Avosso, Daniel Louis Ayepah, Michael Adrian Ayiku, Bernard Bruce Ayoub, Walaa Ayoub Gabra Baab, Shad Masters Badano, Sara Nelly

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Dvergsten, Jeffrey Arthur Elenbaum, Stephanie Elgergawy, Dawood Soliman Emokpae, Courage Osifo Esmaili, Neda Evers, Gregory William Ezzeddine, Serena Diana Farkas, Linda Marie Fein, Melanie Feliz Ortiz, Abraham Flores, Marisa Cosmas Fontenot, Emily Marie Framstad, Mark Alan Fuller, Megan Kelly Gade, Suchita Bhalchandra Galvin, Sirisha S. Gao, Lei Geddings, Thomas Maxwell Geertz, Christopher Erik Gegick, Stephen John George, Ezmin Gerber, Nancy Jean Gerena, Gail Theresa Ghei, Sonia Kaur Gleeson, Carol Ann Godino, John Goel, Anubhi Golding, Lauren Parks Gomez Suarez, Roberto Antonio Gore, Mitchell Ray Gower, William Adam Griffin, Richard W. Gruneich, Jonathon Aaron Guba, Alexander Michael Gucilatar, Max Deypalubos Gupta, Sachin Kumar Haas, Susan Abigail Farmer Haines, Joe Douglas Hamid, Nauman Hamrahian, Seyed Mehrdad Handa, Geeta Hansen, Samantha Ford Hardy, Constance Alexis Hathaway, Catherine Kizer Haynie, Aisha Cecilia Hedelund, Norma Louise September 15-17, 2010

Hernandez Grau De Lama, Giselle Marie Hewitt, Jana Lander Hewitt, Stephan Justin Anthony Hipps, John Bates Hodge, Bryan Kenneth Hofmann, Alison Marie Holder, David Michael Holladay, Nathan Brent Holland, Thomas Lawrence Holloway, Robert John Hopkins, Michael Benjamin Hopmeier, Robin Rene Horne, Karen Johnson Hunt, Kori Lynn Huxford, Michelle Canipe Hwang, James Imperial, Eva Angelie Islam, Md. Monirul Jackson, Saundra Alicia Jacobson, Richard David Jadcherla, Sreedevi James, Olga Jani, Prashant Gunvantlal Jaquiss, Robert Douglas Jayawardena, Suriya Bandara Johns, Cynthia Ruth Johnson, Ian Todd Johnson, Lindsey Rich Jones, Jason Evan Kanaan, Matthew Gary Kaplan, Ivor Barry Karre, Premnath Reddy Karthikeyan, Omkar Kartush, Jack Michael Kealy, Ryan Matthew Kent, Eric Lance Kesman, Rebecca Lynn Khairallah, Christian George Khan, Shujaat Ali Khanna, Siddharth Khatri, Pooja Kim, Sunghye Kinsley, Kim Marie Kinsley, Tina Renee Kiser, Michelle McCrain Kiskaddon, Robert Todd Page 40

Klima, Lawrence David Knable, Mark Eric Kobayashi, Daisuke Kolangaden, Zubin Paulson Kolycheva, Galina N. Kombrinck, Jonathan Michael Komissarova, Yelena Ilinichna Kornegay, Jonathan Hargett Kotha, Kavitha Sravanthi Reddy Kotsko, Jude David Kuskowski, Anne Sinks Ladha, Alim Mirza Lafeber, Thomas Edward Laicer, Cleopatra Lam, Amanda See-Wei Lam, Hung Du Lamar, Zanetta Stewart Lareau, Stephanie Ann LaTorre, Louis Donald Leak, Byron Christopher Lechner, Sharon Lydia Jacobson Lee, Jonathan Chuang-Yien Levender, Michelle Marie Levitin, Gregory Michael Li, Zhicheng Lin, Helen Lindzen, Eric Crandall Waggoner Lineberry, Jeffrey Todd Linn, Heather Maude LoGuidice, Michael Anthony Lopez, Robert Ramon Lucchesi, Archana Chakravarthy Mabry, Myra Cummings Mahboob, Rashid Majka, Christopher Paul Makonnen, Eyob Mardis, Donald Curtis Marra, Kevin York Marsoni, Nicolo Martin, Stephanie Falk Martin, Steve Marshall McKillen, Julia Baskin McNeeley, Sean Michael Menon, Suma Messer, William Brogdon Metkus, Thomas Stephen September 15-17, 2010

Mhoon, Justin Thomas Michaels, David Adam Mirza, Wajahat-Ali Mohamed, Fazil Ayube Mohmand, Hashim Khan Moreno, Andrew Morgan, Christopher Joseph Morrison, Angela Sharnell Mousallem, Talal Imad Nasir, Ayesha Nawa, John Charles Neumann, Iliana Angelica Nix, David Sydney Nor, Eugene Basil Norbury, John William Nordin, John Robert Norman, Anne-Caroline Nwaokocha, Charles Ngozi Obisesan, Babajide Akanji O'Brien, Virginia Carroll Ofori-Amanfo, George Ogbata, Obiageli Uchenna Okasi, Chetanna Ijeoma Okoye, Sylvia Ifeyinwa Oldt, Robert James O'Leary, Emmeline Margaret Ollendorff, Arthur Tullin O'Neill, Lynn Bunch Osaguona, Stephen Efeosa Overstreet, Susan Lynn Padmanabhan, Ravindran Arcot Parti, Ashna Paruchuri, Vamsee Prasad Patel, Jitendra Keshavlal Patel, Pradeep Reddy Patole, Sonal Shirish Patterson, Ryan William Patterson, Sarah Ann Penumalli, Vikram Reddy Perrigo, Earl Stanley Petty, Christine Anderson Phelps, Tracy Lee Pickard, Robert Elliott Pierce, Richard Allan Pillinger, David Arthur Polidoro, Angelique Renae Page 41

Potu, Sangeetha Previti, Michael Charles Purdy, Julianne Kristin Rai, Ripudeep Ramsey, Jamie Lauren Rand, Joseph Raspanti, Anthony Edward Raspanti, Elizabeth Neale Raynor, Laura Lee Reddy, Avinash Gollakistagari Reddy, Srikar Renaud, Stefan Alain Rentas, Evelyn Ricks-Cord, Anila Rondell Riel, Michael Anthony Robinson, Ashlee Allen Roehrs, Philip Andrew Rondla, Chetana Rott, Danielle Elana Rousseau, James Harry Russell, Marsha Yolanda Russo-Rivera, Kristin Mahri Rutterer, Kristin Wilson Sams, Cassandra Marie Santz, Jos Rosario Savarino, Daniel Stephen Sbarro, Mark James Schobert, Carol Marie Seaman, Danielle Marie Shah, Ekta Ameesh Shah, Rajal Bipinbhai Shah, Ritesh Rajnikant Shah, Syed Hadi Raza Shahmehdi, Seyed Akhtar Shamleffer, Ibtehal Jaralla Sharma, Kamal Shattuck, Trisha Miller Sheth, Neil Perry Shivadas, Anita Sica, Roger Sebastian Sims, Suzanne Nicole Singaraju, Anupama Singh, Neeru Kaur Sklar, Robert Vincent Slubicki, Monica Nora Smith, Robert Stephen

Snow, Dan Gary Sohagia, Kinjal Bhikhalal Sola-Acevedo, Jessica Sonnenberg, Jill Marie Springs, Harold Leon Stiles, Jeffrey Douglas Stith, James Andrew Stump, Teresa Lynn Super, Elizabeth Anne Susac-Pavic, Stela Swann, Leah Joy Martineau Tafel, John Andrews Taft, William Carlisle Tamba, Ismael Taylor, Anna Greta Birch Taylor, Deborah Jo Termini, John Frank Terry, Kimberly Dawn Upshaw, Jana Kristina Van Amerongen, Alexander Willem Vara, Manjula Lalijibhai Vaughan, George Dennis Vega, Ana Carolina Venrick, Michael Glen

#### **REINSTATEMENT**

Adkins, Paula Clark Armitage, John Marshall Arrowood, Kyle Elaine Binning Averill, Katherine Ann Chapman, Donald Redding Garcia, Godofredo Igno Guffrey, Gregg J. Jarskog, Lars Fredrik Kavjian, David Alan Meadows, Robert Steven Music, William Leslie Nolan, Thomas Edward Scully, Sean Patrick Sulzer, Jana Leigh Swackhammer, Randy Lee Urban, Edward John Wolf, Elizabeth Anne

Veras, Emanuela Fernandes Tavora Vignola, Paul Alfred Vithala, Madhuri V Walden, Janica Evelyn Waller, Michael Lee Wang, Bo Wei, Xin Weiss, Mark Steven Weitzel, Scott Matthew Wilber, Monte Dean Wilson, Lindsay Ann Wisniewski, Mary Louise Wong, Jan Howe Wright, Debbie Ruth Wu, Jing Yadav, Manu Yancey, David Lindsay Yassa, Makram Anwar Yeater, Richard Elwood Young, Jeremy Nathan Zaffino, MaryShell Brosche Zeiler, David Zachary Zhu, Sha

REACTIVATION Grant, Hugh Judd Keogh, Michael James Redding, Rebecca Steddom

# FACULTY LIMITED LICENSE

Alwair, Hazaim Cakmakci Midia, Esin Enarson, Campbell Edwin Kertai, Miklos David Otaki, Yoshio

RETIRED VOLUNTEER LICENSE Carter, Philips John Dawson, Shelton Phelps Kirsch, Mark

Initial PA Applicants Licensed 07/01/10 - 08/31/10

PA-Cs

#### Name

Acevedo, Angela Patricia	08/30/2010
Alexander, Richard Briggs	07/15/2010
Altman, Meghan Joyce	08/26/2010
Austin, Michael	08/27/2010
Baldwin, Julia Lachicotte	08/04/2010
Baroody, Sarah Ann	08/19/2010
Beloff, Shea	07/21/2010
Bissell, Meghan Mary	08/10/2010
Brenner, David Lawrence	07/28/2010
Briggs, Georie Melissa F.	08/26/2010
Brown, Amber Harden	08/09/2010
Brown, Kyle Daniel	07/12/2010
Browne, Michael Drennen	08/25/2010
Buchkovich, Jennie Baird	07/13/2010
Call, Justin Michael	08/20/2010
Cardona, Danielle Elizabeth	08/18/2010
Cellura, Cindy Mae	08/03/2010
Crooks, Rachel Marie	07/09/2010
DeMino, Adam H.	08/04/2010
Desai, Tejal Jyotindra	08/05/2010
Dorce, Hanna Nicole Thompson	07/28/2010
Dunn, Ryan Michael	08/27/2010
Evola, Peter	08/16/2010
Ferritto, Frank Joseph	08/27/2010
Page 43	

Flood, Kristin Ilene	08/03/2010
Flood, Scott Thomas	08/30/2010
Gartman, Jennifer Lynn	08/18/2010
Graf, Nicole Marie	08/19/2010
Hagler, Jami Lee	08/09/2010
Hennessee, Benjamin Thomas	08/19/2010
Hensley, Crystal Jones	08/09/2010
Hill, Erica Dawn	08/17/2010
Hill, Hannah Sue	08/19/2010
Holt, Ericka Angel	08/10/2010
Hovis, Jacob Ross	08/03/2010
Jewell, Heather R	07/12/2010
	08/18/2010
Johnson, Holly Lynnette	
Koch, Julia Michelle	08/19/2010
Lewis, Tiffany Nicole	08/19/2010
Lynch, Kathryn Julia	08/12/2010
Macias, Loren Thomas-Chew	08/19/2010
Malone, Michael Parish	07/06/2010
Mannella, Erin Elizabeth	07/20/2010
Markell, Kristy Michelle	08/19/2010
-	
Martinez, Orlinda Anne	07/30/2010
Matuga, Lisa Michelle	08/26/2010
Meleen, Sarah Marie	08/03/2010
Mevs, Simone Renee	07/08/2010
Murphy, Joanne Caroline	08/25/2010
Newlin, Christopher Brown	08/26/2010
Orlowsky, Katelyn Elyse	08/25/2010
Oxendine, Suzette Renee	07/02/2010
Reitz, Dawn Marie	07/16/2010
Rieder, Susan	07/15/2010
	08/03/2010
Rodriguez, Ronald Armando	
Sampson, Dawn Marie	08/05/2010
Schinlever, Catherine Elizabeth	08/06/2010
Shaarda, Rachel Ann	08/18/2010
Short, Holly Marie	08/12/2010
Shrier, Lindsey Renee	07/19/2010
Simmons-Vann, Teresa Necole	08/26/2010
Speight, Molly Elizabeth	08/05/2010
Stafford, Kelly Leigh	07/29/2010
Stoutamire, Shervon Le'Nay	08/27/2010
Sudyk, Erica Booth	08/27/2010
Thai, Khoan Thanh	08/20/2010
Thomas, Anne Roberts	07/16/2010
Timothy, Tom Patrick	08/11/2010
Tolland, Loretta Ann	07/23/2010
Turnbull, Meghann Ashley	07/23/2010
Page 44	

Watson, Kelly A	08/26/2010
Welker, William Gerard	07/22/2010
Whitmire, Jennifer Christine	08/26/2010
Wiegand, Benjamin David	07/15/2010
Wurns, Brandon Vaughn	07/09/2010
Yerkes, Carrie E	08/23/2010

PA-Cs Reactivations/Reinstatements/Re-Entries

Criss, Denise Groh	07/15/2010
Garrison, Heather Michelle	08/31/2010
Haney, Robert Mack	08/23/2010
Martinez, Jessica Anne	07/01/2010

Additional Supervisor List – 07/01/10 – 07/31/10

# PA-Cs

Name	Primary Supervisor	Practice City
Allen, Leonard	Shah, Dhirenkumar	Raleigh
Astern, Laurie	Harper, Wayne	Raleigh
Atherton, Rozalyn	Snyder, Danal	Rocky Mount
Bagley, James	Lee, Melvin	Cary
Barrow, Kern	Frankos, Mary	Wallace
Beadles, Meredith	Hardaker, William	Durham
Begley, Stephen	Mahan, Dennis	Creedmoor
Bender, Jenna	Hayes, Daniel	Charlotte
Benjamin, Alexis	Okwara, Benedict	Monroe
Benjamin, Alexis	Sutherland, Carisa	Monroe
Bennett, Elizabeth	Kim, Ian	Kinston
Bergmark, Lisa	Jaffe, Michael	Hendersonville
Blaylock, Justin	Doner, Mark	High Point
Bogdanova, Galina	Dambeck, Allyn	Rose Hill
Bolt, Carol	Vaughan, John	Charlotte
Brock, Andrea	Appleton, Rebecca	Mooresville
Brothers, Shaun	Lee, Melvin	Cary
Brown, Jennifer	Rose, Gregory	Raleigh
Brown, Lynn	Grisso, Greg	Asheboro
Bruning, Kevin	Hoxworth, Benjamin	Greensboro
Bryant, Hobson	Zackowski, Scott	Greensboro
Buckland, David	Chodri, Tanvir	Asheboro
Butler, Eric	Friedman, Allan	Durham
Cain, Jessica	Conrad, Ryan	Hickory
Campbell, Megan	Matkins, Preeti	Charlotte
Casey, Kevin	Foster, James	Charlotte
Castelvecchi, Michelle	Agner, Roy	Salisbury
Castelvecchi, Michelle	Goss, Frederick	Salisbury
Page 45		September 15-17, 2010

Castelvecchi, Michelle Castelvecchi, Michelle Chandley, Eric Cheney, David Clarke, Jeffrey Collins, Riki Courtemanche, David Courtney, Amy Criss, Denise Crooks, Rachel Curry, Brooke Dapo, Evan D'Avilar, Philip Davis, Demetria Davis, TraVonda Davis, TraVonda DeMio, Brian Despaigne, Policarpo Donald, Karen Durbin, Michael Durbin, Michael Eldridge, Mark Emler, Sherlynn English, Thaddeus Franklin, Dennis Gehrman, David Gibbons, Jacqueline Gould, Laura Griffin, Brian Hall, Blaine Hanley, Brian Harvey, Gloria Heath, Jerry Hedrick, Jessica Helfrich, Elizabeth Hennig, Therese Hicks, Charlotte Hlavacek, Sarah Hlavacek, Sarah Hoffman, Karen Holly, Aaron Holmes, Trisha Holmes, Trisha Horton, Ann Horton, Ann Huber, Tracey Page 46

Malone, Sean Seifert, Brent Galaska, Piotr Vesa, Allin Fleming, Richard Hawks, Aldene Hooper, Jeffrey Reyes, Rodolfo Bloomfield, Robert Udekwu, Pascal McCaleb, Jane Mask, Allen Aluko, Gbenga Brown, Howard Hughes, Ronald McCaleb, Jane Sloan, Randy Sloan, Randy Wynn, Richard Thompson, Donovan Vesa, Allin Buck, John Cabral, Gonzalo Ramsamooj, Ravi Kastner, Robert Broyles, William Barnes, Daniel Bunn, Barry Hurd, David Verma, Lalit Flanders, Paul Ezeigbo, Walter Barker, James Harper, Wayne Broyles, William Broyles, William Steward, Emmett Caldwell, Chad Collins, Roger Curran, Diana Nederostek, Douglas Powell, Eddie Skalak, Anthony Freund, Victor Neave, Victoria Hooper, Jeffrey

Salisbury Salisbury Mooresville Statesville Whiteville High Point **High Point** Holly Springs Winston Salem Raleigh **Roanoke Rapids** Raleigh Charlotte Raleigh Henderson Hollister Surf City Hampstead Charlotte Charlotte Statesville Wilson Wilson Elizabeth City Jacksonville Durham Pinehurst Tarboro Winston Salem Durham Marion Winston Salem Hickory Raleigh Durham Durham Charlotte Louisburg Cary Asheville Laurinburg Greenville Greenville **High Point High Point** Winston Salem September 15-17, 2010

Hughes, Jo Ide, Christina Idol, Julie Imboden, Lauren Jackson, Brittany Jackson, Brittany Jarvis, David Jewell, Heather Johnson, Betty Johnson, Betty Johnson, Sarah Johnson, Theresa Jolly, Raymond Jones, Lauren Justus-Jones, Misty Keith, Katherine King, Harold Kline, Britney Konigsberg, Audrey Kureczka, MaryBeth Lamberson, Faith Lee, Amanda LeSuer, Hayley LeSuer, Hayley LeSuer, Hayley LeSuer, Hayley Levine, Felicia Lott, Charles Mangin, Ross Marion, Gail Martin, Maida Martin, Maida Martinez, Jessica McHatton, Timothy McKay, Veronica McKeever, Carinne McLaren, Christopher McNaught, Noelle Methvin, Sarah Mevs, Simone Milam, Robert Miller, Christina Miriovsky, Amy Modrow, Michael Morelli, Scott Murphy, Laura Page 47

Cooper, Debra Stewart, John Zackowski, Scott Yacoub, George Pratt, Tanya Robinson, Edward Jennette, Albert Kendall, Jayne Robinson, Linda Stewart, Christopher Grainger, Wade Fann, Benjamin Moore, Richard Zouzoulas, Stephen Okons, Toby Beaver, Walter Kelley, Steven Wadley, Robert Flanders, Paul Steinl, Kevin Elston, Scott Miekley, Scott Beatty, Michael Hall, Timothy Thompson, Donovan Watling, Bradley Sampson, Johanna Stringfield, John Wentz, Elliott Lord, Richard Kahai, Jugta Solanki, Rajesh Cader, Cas Fann, Benjamin Anyanwu, Benjamin Gupta, Manoj Gootman, Aaron Thomason, Michael Adams, George Jones, Monica McPherson, Scott Shull, Kenneth Daubert, James Hunter, Robert Winter, De Weeke, Paul

**High Point** Jacksonville Greensboro Winston Salem Greensboro Greensboro Durham Gastonia Coats Coats Asheville Boone Wilmington Gastonia Hope Mills Charlotte Clinton Raleigh Marion Greensboro Garner Fayetteville Charlotte Charlotte Lincolnton Charlotte Durham Waynesville Greensboro Winston Salem Southport Southport Morehead City Boone Winston Salem Smithfield Fayetteville Charlotte Raleigh Raleigh Nags Head **High Point** Durham Raleigh Roanoke Rapids **High Point** September 15-17, 2010

Murray, Joanna Nordbladh, Louise Ogilvie, Nathan O'Grady, Holly O'Grady, Holly O'Grady, Holly O'Grady, Holly Ostroff, Erin Oxendine, Suzette Peterson, John Pfaff, Charles Phillips, Emily Phillips, Kelly Pineiro, Miguel Presson, J. Prouty, Mary Quintero, Tammi Rainwater, Marvin Randolph, Mark Reed, Courtnay Reese, Niki Repnikova, Lilia Rigsbee, William Riser, John Rojas, Brian Rose, Walter Russell, Douglas Schoonmaker, John Schuster, Rikki Seaman, Regina Seatvet, Mark Sherrill, Jonathan Skulavik, Patricia Skulavik, Patricia Skulavik, Patricia Skulavik, Patricia Slagle, Jennifer Smith, Delisa Smith, Kimberly Smith, Kimberly Sofia, Karen Spicer, Blai Talbert, Karen Taxman, Steven Tennant, Sara Thomas, Anne Page 48

Rosen, Robert Wolicki, Karol Levine, Edward Agner, Roy Goss, Frederick Malone, Sean Seifert, Brent Richards, Michael Peace, Robin Hines, Marcono Anderson, Jeffery Faulkenberry, Bradford Guerrini, James Rayala, Christopher Steinl, Kevin Bregier, Charles Spillmann, Celia Wentz, Elliott Matacale, Vaughn Chamovitz, Allen Wilson, Robert Reece, Amanda Moulton, Michael Flanders, Paul Udekwu, Pascal Lawrence, Mark Elmahdy, Wagdy Brown, Howard Polsky, Saul Stansberry, Howard Alson, Roy Klein, Jeffrey Chow, Arthur Hook, Matthew Sachar, Ravish Wesley, Robert Lonas, John Gottfried, Oren Clayton, Robert Stover, Phillip Wentz, Elliott Loughridge, Carole Latz, John Trost, Melanie Batish, Sanjay Hill, Edward

Winston Salem Greensboro Winston Salem Salisbury Salisbury Salisbury Salisbury Huntersvile Lumberton Alliance Morehead City Laurinburg Greensboro Carv Greensboro Charlotte Winston Salem Greensboro Wilson Winston Salem Durham Lexington Wilmington Marion Raleigh Waynesville Winston Salem Oak Island Elizabeth City Raeford Winston Salem Charlotte Dunn Dunn Dunn Dunn Boone Durham Wendell Louisburg Greensboro Charlotte Denver Durham Bolivia Winston Salem September 15-17, 2010

Thomas, Whitney	Iglehart, James	Concord
Thomas, Whitney	Moore, Brian	Concord
Thomas, Whitney	North, James	Concord
Thomas, Whitney	Ozment, Richard	Concord
Thomas, Whitney	Schmidt, Brian	Concord
Thomas, Whitney	Schmidt, Jeffrey	Concord
Thomas, Whitney	Smith, Anthony	Concord
Trzcienski, Michael	Stock, Andrew	Oxford
Vicario, Elisa	Harrison, Myleme	Raleigh
Vigliano, Megan	Bentsen, Birger	Wilmington
Villareal, Andrea	Benjamin, Ronald	Wilmington
Villareal, Andrea	Crane, Jonathan	Wilmington
Ward, Tod	Largen, Kevin	High Point
Waronsky, Roy	Callaway, Clifford	Salisbury
Webber, Sarah	Kadiev, Steven	Charlotte
Weiland, Daniel	Burton, Harry	Asheville
Weiss, Stanley	Kastner, Robert	Jacksonville
White, Steven	McAllister, John	Lumberton
Whiteheart, Debra	Copeland, Joyce	Durham
Wiegand, Benjamin	Goldman, Meidad	Clyde
Wiegand, Benjamin	McCorry, James	Oxford
Wolpert, Kenneth	Nnolim, Bede	Dunn
Yefremov, Vladimir	Flanders, Paul	Marion
Zachman, Melissa	Grant, Terry	Goldsboro
Zelenak, Allison	Brabham, Vance	Greensboro

# Additional Supervisor List - 08/01/10 - 08/31/10

PA-Cs		
Name	Primary Supervisor	Practice City
Adams, Jason	Whitman, Bruce	Lumberton
Agresta, Dominic	Rich, Robert	Elizabethtown
Ajello, Scott	Burns, Martin	Charlotte
Alcala, Jose	Borges-Neto, Salvador	Durham
Ambroise, Marie-Jacques	Dunham, Charles	Goldsboro
Ardelean, Rhonda	Lee, Melvin	Ashville
Argenta, Joseph	Sharma, Navneet	Elkin
Arnold, Alison	Burnett, Tara	Raleigh
Arnold, Alison	Colson, Lacy	Raleigh
Arnold, Alison	Feinson, Theodore	Raleigh
Asher Prince, Heather	Godard, Michael	Garner
Astern, Laurie	Guleria, Sher	Nashville
Babb, Richard	Baule, Raymond	Rocky Mount
Babb, Richard	Collins, Roger	Cary
Bain, Julie	Nifong, Ted	Winston Salem

September 15-17, 2010

Baker, English Baker, English Baker, English Balsly, Josh Bardon, Wilbur Barnett, Taneisha Bartlett, Whitney Bartolozzi, John Beall, David Bednar, Robert Bednar, Robert Berendt, Lawrence Berendt, Lawrence Bernier, Lisa Bethea, Angela Blaylock, Justin Blohm, Nicole Boettger, Peter Bowman, Angela Bowman, Jessica Bowman, Jessica Bowman, Jessica Boyd, William Boyte, Sabrina Bradshaw, Shanna Branstetter, Annie Branstetter, Annie Bremer, Ronald Brooks, Chauna Brown, Amber Brown, Jessica Brown, Loyce Brown, Loyce Brown, Loyce Browning, Amber Brownlee, Kaye Brusa, Jennifer Brys-Wilson, Jessica Buchkovich, Jennie Buck, Philip Buckland, David Call, Justin Campbell, Kimberly Caputo, Shawne Carr, Jude Carter, John Page 50

DeVries, David McGeary, Scott McKinney, Leslie Charles, Kirk Holt, Elizabeth Jubane, Alan Nelson, John Gardner, Todd Hunter, Robert Haimes, David Mahaffey, Danielle Asimos, Andrew Runyon, Michael Bunio, Richard Umesi, Obinnaya Sorathia, Divyang Okwara, Benedict Drake, Almond Robinson, LaSean Luo-Tseng, Ingrid Watson, Derek Yenni, Lawrence Comstock, Lloyd Lawrence, Mary Sloan, Randy Ng, Wing O'Brien, Patrick Minior, Daniel Guha, Subrata Thiemkey, William Sy, Alexander Beittel, Timothy Boyle, Joseph Clark, Michael Okwara, Benedict Boulkina, Lioubov Harden, William Feasel, Michael Morayati, Shamil Aul, Christopher Chodri, Tanvir Lin, Shu Schwarz, Christopher Pratt, Broc Stevens, James Burkart, Thomas

Chapel Hill Cary Cary Raleigh Raleigh Shelby Hickory Statesville Raleigh **High Point High Point** Charlotte Charlotte Cherokee Raleigh **High Point** Monroe Greenville Mt. Airy Chapel Hill Wake Forest Wake Forest Yanceyville Morehead City Surf City Raleigh Raleigh **Rocky Mount** Wilson Hendersonville Winston Salem Wilmington Wilmington Greensboro Monroe Raleigh **Rocky Mount Rocky Mount** Burlington Fayetteville Asheboro Durham Raleigh Charlotte Cary Winston Salem September 15-17, 2010

Casati, Alden Chappell, Marilyn Chavis, Robert Chavis, Robert Chazan, Jennifer Cheney, David Christ-Clement, Tracy Clark, Adam Clark, Jessica Clark, Kenneth Clarke, Theresa Clarke, Theresa Clarke, Theresa Clarke, Theresa Collins, Ann Collins, Billy Collins, Steven Combs, Glen Coniglio, David Cook, Ashly Copper, Joseph Cotter, Erica Craig, Christopher Craig, Christopher Craig, Christopher Craig, Christopher Craig, Dinah Craver, Amelia Crawford, Kelly Cronkhite, Heather Currin, Ann Currin, Ann Day, Jerry Dedmond, Melissa DelBene, Laura Dellinger, Jennie DeMio, Brian DeMio, Brian DeMio, Brian DeMio, Brian Despaigne, Policarpo Dick, Ian Donald, Karen Dorce, Hanna Dore, Mary Dowdall, Michelle Page 51

Udekwu, Pascal Henry, Christy Chavis, Herman Pistone, Daniel Yang, Charlie Thompson, Donovan Nacouzi, Vincent Howell, David Khan, Neelam Dagenhart, Timothy Fajardo, Agapito Haq, Muhammad Lewis, Marvin Tran-Phu, Lan Clark, Sandra Epling, Carol Lingler, Kimberley Marshall, William Stewart, Christopher Evans, Michael Miller, David Choi, Jiho Alson, Roy Bozeman, William Holmes, James Winslow, James Ejeh, Sylvester Patterson, Robert Hess, Suzanne Heck, Gary Hussieno, Muhammad Sorathia, Divyang Hensley, Terry El-Gamal, Hazem Nahouraii, Robert Allgood, Sara Frankos, Mary Meyer, Mitchell Pridgen, James Zinicola, Daniel Phillips, David Charlton, Glenn Sharma, Anuj Seitz, Kent Zeng, Guangbin Galland, Mark

Raleigh Raleigh **Red Springs** Wilmington Durham Lincolnton Raleigh Laurinburg Burlington Salisbury Dunn Fayetteville Springlake Fayetteville Chapel Hill Durham Rockingham Kernersville **Buies Creek** Smithfield Winston Salem Dunn Winston Salem Winston Salem Winston Salem Winston Salem Fayetteville Sanford Advance **Kinston** High Point **High Point** New Bern Charlotte Charlotte Charlotte Wallace Wallace Clinton Rocky Point Whiteville Henderson Weddington Winston Salem Charlotte Wake Forest September 15-17, 2010

Dowdall, Michelle Dowdall, Michelle Dowdall, Michelle Dowdall, Michelle Dowdall, Michelle Downing, Karol Downing, Karol Downs, Marc Drago, David Drago, David Drinkwater, Don Drinkwater, Don Driscoll, Laurie Dropkin, Evan Dunn, Ryan Edelstein, Christopher Edwards, Felicia Edwards, R. Eisenberg, Eric Ellis, Leland Elmore, Melanie Elmore, Melanie Embry, Brandy Embry, Brandy Emler, Sherlynn Emler, Sherlynn Emler, Sherlynn England, Michael Ensign, Todd Evans, Molly Faircloth, Marisa Farmer, Kimberly Fenstermacher, William Fletcher, Chelsea Fletcher, Chelsea Franklin, Michael Freas, Luther Freeman, Thomas Freeman, Wayne Freuler, Aaron Galban, Carlos Ganley, Oswald Gartman, Jennifer Germain, Jennifer Gingrich, Krista Giordano, Michelle Page 52

Idler, Cary Luo-Tseng, Ingrid Watson, Derek Wheeless, Clifford Yenni, Lawrence Blackmore, Jonathan Jones, Michelle Reyes, Rodolfo Ferris, Andrew Ward, Marc Bruce, Jon Haglund, Michael Rodeberg, David Morse, Michael Guest, Chris Moulton, Michael Edwards, Christopher Dawkins, Rosamuel Homesley, Howard Simpson, Marshall High, Rhett Welch, Gerald Robinson, Linda Stewart, Christopher Hines, Marcono Osta, Elie Snyder, Danal Phillips, David Anderson, Jeffery Flowe, Kenneth McCants, Deidra Murray, Gina Kastner, Robert Beckham, Michelle Feasel, Michael Forrest, Brian Gottschalk, Bernard Torti, Frank Lorelli, Lisa Verma, Lalit Olivito, Francesco Greenberg, Gary Kastner, Robert Gavankar, Sandeep Fitch, Robert Asher, Anthony

Wake Forest Chapel Hill Wake Forest Wake Forest Wake Forest Leland Leland Holly Springs Concord Concord Carv Durham Greenville Durham Greensboro Wilmington Asheville Taylorsville Charlotte Winterville Raleigh Cary Coats Coats Smithfield Snow Hill **Rocky Mount** Whiteville Morehead City Roxboro Thomasville Favetteville Wilmington Spring Hope Rocky Mount Concord Wilmington Winston Salem Morganton Durham Fayetteville Raleigh Jacksonville Cary Durham Charlotte September 15-17, 2010 Giordano, Michelle Glasgow, Cheryl Gocke, Thomas Godwin, Anita Gonzalez, Eugenio Gonzalez, Eugenio Gould, Laura Gould, Laura Gould, Laura Gould, Laura Graf, Nicole Grant, Jill Gray, Lee Greene, Wesley Green-Odlum, Anya Griffin, Beth Griffith, John Griffith, John Guilbault, Martha Guy, Thomas Gvalani, Bhavna Haddox, Stacey Hagler, Jami Halpin, John Harper, Jill Harris, Michael Harris, Michael Harris, Tasha Hartley, Kelly Hartmann, Marsha Haskin, Madelon Hawkins, Melissa Hazelton, Renee Heath, Frank Hekman, Aliza Hekman, Aliza Henderson, Alveta Hensler, Robert Hepler, James Hershberger, Shannon Hettich, Thomas Hill, Hannah Hill, Lisa Hodgkiss, Rebecca Hoffman, Karen

Kim, Paul Edwards, Angela Rubino, John Smith, Jeffrey Kahai, Jugta Russell, Anthony Lazio, Barbara Lee, Kenneth Snyder, Danal Tucci, Keith Gottfried, Oren Edwards, Angela Andy, Camille Barnes, Daniel Seitz, Kent Traylor, Henry Ricci, Daniel Zinicola, Daniel Boggs, Jane Sharma, Navneet Runyon, Michael Sunderland, Brent McGrath, Timothy Broyles, William Lee, Michael Irion, James Marlette, Marnie Nelms, Wallace Kreisman, Steven Traylor, Henry Pathan, Ayaz Johnson, Michael Wolfe, Steven Lin, Shu Keller, Mark Pedley, Carolyn Mahaffey, Danielle Butler, John Hines, Marcono Ugah, Nwannadiya Kane, Shawn Slechta, Ryan Azzi, Anthony Kastner, Robert Perino, Lisa

Charlotte Winston Salem Raleigh **Kings Mountain** Southport Wilmington Greenville Greenville Rocky Mount Greenville Durham Winston Salem Kernersville Pinehurst Greensboro Wilmington Wallace Rocky Point Winston Salem Elkin Charlotte Charlotte Mebane Durham Chapel Hill Clemmons Clemmons Wilson Charlotte Wilmington Sanford Charlotte Mooresville Durham Mocksville Winston Salem **High Point** Wilmington Smithfield Pembroke Ft Bragg Sylva Raleigh Wilmington Asheville

Holmes, Alisha Houle, Katherine Howard, Kimberly Howell, Erin Howell, Erin Howell, Erin Hughes, Robin Hull, William Hunnings, Blakely Hurst, Kathleen Hurst, Kathleen Irvin, Stephen Isenhower, Dennis Jackson, Heather Jackson, Heather Jackson, Laurena Jackson, Laurena Jansen, Ingram Jezsik, Janet Johnson, Amanda Johnson, Curtis Johnson, Holly Johnson, Sarah Jones, Autumn Karr, Christina Karr, Christina Karr, Christina Kassab, Troy Keller, David Keller, David Kerchner, Aimee Kestler, Brianne Kiehle, Adrienne Kissel, Stacy Kissel, Stacy Klahn, Vern Kolstad, Cassie Kuhl, Lauren Kulcsar, Adina Kurtz, Harry Page 54

McCorry, James Mueller, John D'Amico, Thomas Casey, Virginia Clark, Christian Wattenbarger, John Weller, Edward Johnson, Amy Cannon, Brett Idler, Carv Luo-Tseng, Ingrid Suh, Paul Watson, Derek Wheeless, Clifford Yenni, Lawrence Dellon, Evan Madanick, Ryan Doyle, Natalie Grant, Terry Crosby, Kim Weston, Steven Guleria, Sher Lightsey, Joseph Dorvil, Deborah Muir, Andrew Walsh, Patrick Riser, Mark Brown, Edward Grainger, Wade Smith, Roger Charles, Kirk Chaudhry, Abdul Moran, Joseph Roberts, Joseph Folstad, Steven Gardner, Todd Luvis, L. Woody, Jonathan Clark, Alan Cohen, Max Tooke, Sydney Russ, Donald Bell, Joseph Chow, Arthur Scheibner, Stephen Brown, Howard

Oxford Winston Salem Durham Charlotte Charlotte Charlotte **High Point** Mills River Smithfield Wake Forest Carv Wake Forest Wake Forest Wake Forest Wake Forest Chapel Hill Chapel Hill Wilson Goldsboro Charlotte Charlotte Rocky Mount Smithfield Elizabethtown Durham New Bern Smithfield Greenville Hendersonville **High Point** Raleigh Raleigh Raleigh Whiteville Charlotte Statesville Gastonia **High Point** Gastonia Greensboro Greensboro Hickory Pembroke Raleigh Statesville **Fuguay Varina** September 15-17, 2010

Kurtz, Harry Labs, John Landrigan, Lawrence Langley, Dawn Langston, Melanie Layman, Paul Leaman, Jason Lee, Saeri Leep, Daniel Lehman, Michael Lehman, Michael Leiken, Shuli Lentz, Jennifer Lewis, Bryan Lewis, Melissa Lewis, Melissa Lewis, Michael Lewis, Tiffany Locklear, Leverne Logan, Jenalyn Luscher, Lenny Lynch, Kathryn Lyons, Jennings Mabout, Sonia MacKinnon, Meaghan MacKinnon, Meaghan MacKinnon, Meaghan Maddux, Joseph Mahar, Colleen Mahiquez, Jose Malanka, Phyllis Maldonado, Manuel Page 55

Bruce, Jon Hage, William Haglund, Michael Lyle, William Mikles, Mark Pleasant, Henry Silver, William Maitra, Ranjan Eskew, Thomas Whitman, Bruce Bonner, Mack Harmaty, Myron Cockrell, Wiley Antolovic-Stanfel, Nives Lytle, Richard Godfrey, Wanda Lee, Melvin Brown, Howard Bruce, Jon Chiavetta, John Collins, Roger Collins, Roger Grana, Lisa Haglund, Michael Inge, Jack Vulgaropulos, Spyro Gaston, Kris Cabral, Gonzalo Feasel, Michael Warren, Mark Rodriguez, Luis West, James Maultsby, James Camnitz, Paul Meyer, Mitchell Flanders, Paul Greenspan, Linda Hart, Darlington O'Connor, Christopher Ohman, Erik Winchester, Mark Chaudhry, Abdul Tooke, Sydney Krull, Ronald Kastner, Robert Zeng, Guangbin

Cary Raleigh Durham Raleigh Raleigh Raleigh Raleigh Gastonia Wilmington Lumberton Durham Gastonia Knightdale **Butner** Asheville Clayton Clayton **Fuguay Varina** Cary Raleigh Cary Raleigh Cary Durham Raleigh Cary Charlotte Wilson Roanoke Rapids Greenville Kenansville Pembroke Wilmington Greenville Wallace Asheville Holly Ridge Charlotte Durham Durham Durham Raleigh Greensboro Clinton Wilmington Charlotte September 15-17, 2010

Malivuk, William Malivuk, William Malley, Paul Malone, Michael Mangum, Brianna Mann, Karen Manno, Salvatore Martin, April Martin, Jennifer Martin, Kristie Martinez, Maria Martinez, Orlinda Maslow, Jason Massenburg, O'Laf Mattera, Paul Mattingly, Daniel McAlister, Andrea McAllister, Amy McCaskill, Lisa McGurk, Elizabeth McKay, Bruce Mckoy, Kirsten McLamb, Michael Meador, Anthony Meleen, Sarah Melgar, Tammy Methvin, Sarah Metius, Susan Meyring, Daniel Miriovsky, Amy Moore, Helen Morgan, Londyn Morrow, Melinda Mortimer, Marty Mullins, Diane Munn, William Murphy, Joanne Murphy, Michael Nakos, Eleftheria Newcomb, Christopher Nicol, Kristi Norris, Brandy O'Brien, Bridget O'Connor, Brian Omonde, Peter Omonde, Peter Page 56

Blackmore, Jonathan Jones, Michelle Toth, Alison McPherson, Scott VanNess, William Perkins, Phillip Williams, Jonathan Roberts, Joseph Godfrey, Wanda Hendricks, Andrew Smith, Anthony Guevara, Jason Boone, David Day, Robert Lawal, Adeyemi Morse, Eric Khan, Shehla Wright, David Atkins, James Spence, Frank Clayton, Robert Anderson, James Robaczewski, David Johnson, Scott Rogers, Garrett Osta, Elie Killinger, William McDonald, John Vyas, Pankaj Law, Michael Plyler, William Stein, Marshall Venable, Robert Mahaffey, Danielle Tayloe, David Feasel, Michael Fernz, Miriam Girmay, Aregai Partridge, James Ladd, Lisa Harmaty, Myron Jimenez-Medina, Evelyn Esclamado, Ramon Brezicki, Paul Song, Qilin Swarner, David

Leland Leland Durham Nags Head Mooresville Washington Kinston Lumberton Garner Lumberton Greenville Pinehurst Raleigh Walnut Cove Raleigh Raleigh Spruce Pine Durham Goldsboro Dobson Wendell **High Point** Raleigh Fort Bragg Goldsboro Snow Hill Raleigh Charlotte Benson Raleigh Flat Rock Marion Plymouth **High Point** Goldsboro Rocky Mount Whiteville Gastonia Burlington Asheville Charlotte Fayetteville Durham Concord Washington Washington September 15-17, 2010

Orlowsky, Katelyn Orlowsky, Katelyn Osterer, Raymond Ostroff, Erin Otey, James Owens, Claire Owens, Leanne Pace, S. Pace, S. Pait, Heather Pait, Heather Paitsel, Lisa Palmer, Deborah Pardue, Emily Patterson, Mary Patterson, Miriam Paul, Robert Pecevich, Louise Phillips, Cynthia Pilkington, Cynthia Pixton, Jan Plate, Anne Plate, Anne Plate, Anne Plate, Anne Plate, Anne Plate, Anne Poland-Torres, Denise Poston, Gary Poythress, Christina Prabhakar, Josie Prabhu, Pilar Propst, David Prouty, Mary Prouty, Mary Prouty, Mary Putnam, Marshall Putnam, Marshall Pyles-Sweet, Kris Queen, Julie Quillen, Rocky Quintero, Tammi Ramsauer, Kenneth Ramsauer, Kenneth Ramsauer, Kenneth Ramsauer, Kenneth Page 57

Pratt, Tanya Robinson, Edward London, Deborah Kelley, Michael Dunham, Charles Fitch, Duane Godwin, Patrick Hussain, Khwaja Landolf, Michael Prasad, Venkat Rich, Robert Templeton, David Covitz, Wesley Frizzell, Eric Smith, Patricia High, Kevin Davis, Jerome Vybiral, Tomas Richter, Holly Pittman, William Davis, Jerome Jinnah, Riyaz Lang, Jason Martin, David Poehling, Gary Ward, William Wilson, Scott Peterson, Noel Kessel, John Andersen, Susan Kobs, Jeffrey Khan, Basalat Heron, Kerrie-Anne Beatty, Michael Hall, Timothy Watling, Bradley Pacos, Andrew Riser, Mark Moss, David Heron, Kerrie-Anne Langston, Bernard Jones, Enrico Idler, Cary Luo-Tseng, Ingrid Suh, Paul Watson, Derek

Greensboro Greensboro Newton Charlotte Goldsboro Wilson Roxboro Goldsboro Raleigh Newton Grove Elizabethtown Salisbury Winston Salem Fort Bragg Dallas Winston Salem Greensboro Elkin Fayetteville Cary Greensboro Winston Salem Winston Salem Winston Salem Winston Salem Winston Salem Winston Salem Tarboro Hickory Wilson Raleigh Morganton Wilson Charlotte Charlotte Charlotte Smithfield Smithfield Charlotte Wilson Supply Greensboro Wake Forest Chapel Hill Wake Forest Wake Forest September 15-17, 2010

Ramsauer, Kenneth Ramsey, Pamela Rapalje, James Rappaport, Richard Rappaport, Richard Reid, Aubrey Reiner Massey, Theresa Rich, Marva Richardson, Carolyn Riser, John Roberts, Mark Robinson, Amanda Robinson, Anthony Robinson, Peggy Rogers, Samantha Rojas, Brian Rojas, Brian Rojas, Brian Rouchard, John Ruliffson, Kathryn Ruliffson, Kathryn Ruliffson, Kathryn Ruliffson, Kathryn Russell, Karen Rys, Jill Sandridge, Brenda Sardella, John Satterfield, Thomas Satterfield, Thomas Sawyer, Lindsay Sawyer, Lindsay Scalzitti, Selena Schade, Jana Schade, Jana Scheer, Elizabeth Schmidt, Hilary Schuette, Nora Schuette, Nora Schumacker, Clifford Sears, Mary Frances Sherlock, Randy Short, Holly Sicilia, Jasmine Smith Martin, Tracy Smith, Gregory Smith, Gregory Page 58

Yenni, Lawrence Perry, Joseph Clayton, Robert Anderson, Jeffery Lashley, Joseph Cannon, Brett Wood, Lisa Lewis, Marvin Furr, Sara Bryan, Angela Garmestani, Adrian Takla, Medhat Cairns, Bruce Withrow, Glenn Williamson, Jeff Bruce, Jon Bullard, Dennis Rosenblum, Shepherd Barker, Robert Charlton, Glenn Hughes, Sarah McDaniels, Christopher Mollin, Daniel DeVaul, Chanson Lawal, Adeyemi Cheesborough, John Moore, Barry Boyette, Deanna Reeg, Scot Cockrell, Wiley Guha, Subrata Hensley, Terry Kiger, Tara Quinn, Marshall Hughes, George Adams, Lydia Ferrell, William Freedman, Steven Hocker, Michael Kessel, John Asbill, Brian Brooks, Kelli Tamberella, Michael Weatherford, David Elston, Scott McAllister, John

Wake Forest Winston Salem Wendell Morehead City Winston Salem Smithfield Charlotte Spring Lake High Point Marion Charlotte Concord, NC Chapel Hill Chapel Hill Winston Salem Cary Raleigh Raleigh Asheville Henderson Raleigh Raleigh Raleigh Elizabethtown Raleigh Sanford Wilmington Greenville Greenville Knightdale Raleigh New Bern New Bern Trenton Durham Concord Raleigh Raleigh Durham Hickory Asheville Durham Gastonia Wilmington Garner Lumberton September 15-17, 2010

Smith, Kimberly Sours, Allen Spain, Debra Speight, Jamie Speight, Molly Stamper, Elmer Stegall, David Stein, William Stein, William Stevens, Laura Stindt, Diana Stone, Emily Stone, Hoyt Stotler, Lindsey Stout, Paul Stovall, Kathryn Streby, Penny Streby, Penny Struve, Adona Sudyk, Erica Sullivan, Ursula Surber, Veronika Surber, Veronika Svedberg, Kelly Tallmer, Enid Tannehill, Sondra Taylor, Lloyd Taylor, Lloyd Taylor, Lloyd Tennant, Sara Thomas, Robert Todd, Tanya Townsend, Shannon Trzcienski, Michael Trzcienski, Michael Trzcienski, Michael Tshuma, Lisa Turnbull, Meghann Tysinger, David Valente, Louis Valente, Louis Valente, Louis Van Wallendael, Shawn Vang, Mai Vidas, Denise Waldron, Lauren Page 59

Chaudhry, Abdul Movahed, Assadollah Rogers, Todd Roberts, Joseph Cheesborough, John Gardner, Todd Davis, Ryan Chodri, Tanvir Furr, Sara Dellinger, Robert Akman, Steven Gardner, Todd Jones, Enrico Obeng, Francis Brown, Howard Crissman, Mark Maier, George Molle, Jeffrey Hernandez, Lynn Yoo, Jin Boyette, Deanna Mittal, Madhur Prenatt, William Covington, Valencia Surgers, Sherri Melton, Kenneth Comadoll, James Entwistle, Celia Hansen, Todd Pence, James Eller, Chrystal Conway, Ada Gallup, Kenneth Bovard, Scott Bruce, Jon Hage, William Meehan-De La Cruz, Kathleen Burishkin, Daniel Spear, Tammy Collins, David Furr, Sara Kelly, Samuel Lavis, Timothy Cox, James Bunio, Richard Henegar, Martin

Raleigh Greenville Durham Whiteville Sanford Statesville Waynesville Asheboro High Point Thomasville Winston Salem Statesville Greensboro Charlotte Atlantic Beach Graham Gastonia Gastonia monroe Raleigh Greenville Jacksonville Jacksonville Charlotte Raleigh Fayetteville salisbury Salisbury Salisbury **Castle Hayne** Troy Clinton Winston Salem Raleigh Cary Raleigh Hendersonville Asheville Summerfield Winston Salem **High Point High Point** Charlotte Rutherford College Cherokee Charlotte September 15-17, 2010

Walker, Michael	Hill, Donald	Asheboro
Wallace, Stacy	Sharma, Navneet	Elkin
Ward, Blythe	Helton, Todd	Raleigh
Warden, Stephen	Ward, Nina	Washington
Waters, Carrie	Blackmore, Jonathan	Leland
Waters, Carrie	Jones, Michelle	Leland
Watson, Kelly	Brooks, Kelli	Durham
Weaver, Arlondra	Sewanyana, Steven	Charlotte
Weber, Kathryn	Turner, Steven	Garner
Weegar, James	Harrington, Robert	Hickory
Wheeler, Julia	Iuliano, Philip	Monroe
Whitmer, Kristin	Smith, Patricia	Dallas
Wild, Ronald	Souza, Joseph	Asheville
Wilkinson, Lauren	Wagner, Kristin	Charlotte
Willard, Jennifer	Koehler, Robert	Greensboro
Woods, Jacquetta	Monteith, Charles	Chapel Hill
Wright, Lauren	Elston, Scott	Raleigh
Zurich, Kathleen	Castillo, Elizabeth	Asheville

# ALLIED HEALTH COMMITTEE REPORT

Committee Members: Thomas Hill, MD, Chairperson, Peggy Robinson PA-C, George Saunders, MD Staff: Lori King, CPCS, Quanta Williams, Jane Paige, Marcus Jimison, Katharine Kovacs, Wanda Long, Nancy Hemphill Guests: Ryan Vann, Mike Borden, Elmira Powell, Ian Shearer, Gretta Evans

**Open Session - Physician Assistants** 

1. PA Rules for Adoption and Amendments: 21 NCAC 32S.0216 Continuing Medical Education, 21 NCAC 32S.0219 Limited Physician Assistant License for Disasters and Emergencies, 21 NCAC 32S.0220 Expedited Application for Physician Assistant Licensure.

Issue: The proposed rules adoption and amendments are to establish an expedited application process for physician assistants, to provide guidelines for issuing a limited physician assistant license in the event of a disaster or emergency and to allow for current certification with the National Commission on Certification of Physician Assistants to be acceptable for CME requirements. A Public Hearing was held on August 2, 2010 and there were no statements or written comments. Proposed effective date is October 1, 2010.

The Committee discussed the revision that was made to 21 NCAC 32S.0219 Limited Physician Assistant License for Disasters and Emergencies. The current revision reads: (e) A physician assistant holding a Limited Physician Assistant License for Disasters and Emergencies shall not receive any compensation, either direct or indirect, monetary, in-kind, or otherwise for the provision of medical services. The Committee voted to change the revision to read: (e) A physician assistant holding a Limited Physician Assistant License for Disasters and Emergencies shall not receive any other additional compensation outside of his or her usual compensation, either direct or indirect, monetary, in-kind, or otherwise for the provision of medical services during a disaster or emergency.

Board Action: Adopt proposed changes.

**Open Session - NC Emergency Medical Services** 

No items for discussion.

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 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 and/or to preserve attorney/client privilege.

One licensee application was reviewed. 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.

NP Board Certification

Summary:At the July NPJS meeting there was discussion regarding board certification for NPs. Since there were various opinions on the issue of what could actually be considered board certified the NPJS deferred the topic for further discussion at the November meeting so that each Board could give its opinion on the issue.

Committee Recommendation: Defer to full Board.

BOARD ACTION: Have staff (Christina Apperson) research this topic and send the information out to the AHC members (current & new) prior to the November NPJS meeting.

Perfusionist Report

Summary: Open session portion of PAC meeting minutes (May & August)

Committee Recommendation: Accept as information

BOARD ACTION: Accept as information.

Candidates for the perfusionist vacancy on the Perfusionist Advisory Committee (PAC)

Summary: We have received letters of interest and references from two perfusionists. Since the Medical Board is the appointee for this position, the AHC will need to interview the candidates.

AHC Recommendation: Only one of the candidates appeared for the interview. The AHC interviewed Ms. Greta Evans and will wait to hear from Ms. McGill before giving the Board a recommendation. Ms. Williams left a message for Ms. McGill to find out if she still wants to be considered for the position or if she would like to withdraw her application.

Board ACTION: Appoint Greta Evans to the Perfusionist Advisory Committee.

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 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 and/or to preserve attorney/client privilege.

Three licensee applications were reviewed. 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.

### NURSE PRACTITIONER APPROVALS ANESTHESIOLOGIST ASSISTANT, PERFUSIONIST & PROVISIONAL PERFUSIONIST LICENSES ISSUED

#### JULY 07 - SEPT 01, 2010

#### List of Initial Applicants

Name

NP

Primary Supervisor

Practice City

Bailey, Sarah	Spear, Tammy	Summerfield
Cheney, Margaret	Bottom, Krystal	Asheville
Durkin, Laura	Flanders, Paul	Asheville
Edwards, Michelle	Moreira, Roy	Greensboro
Flowers, Deborah	Berkoff, Molly	Chapel Hill
Glenn, Ladeana	Clark, Alan	Gastonia
Green, Angela	Dirschl, Douglas	Chapel Hill
Hall, Christy	Margraf, Russell	Raleigh
Hoey, Torie	Shukla, Nilima	Gastonia
Hopkins, Cassandra	Mayo, Philip	Goldsboro
Howell, Kimberly	Clark, Alan	Gastonia
Howell-Stewart, Linda	Kaczmarek, Ellen	Asheville
Kerik, Jill	Cargile, Leslie	Black Mountain
King, Crystal	Bronstein, David	Elon
Mertens, Hollis	Smith-Banks, Albertina	Raleigh
Mitas, Allison	Wenzlik, Adam	Durham
Ohman, Cecilia	Guirgues, Ashraf	Morehead City
Rogers, Latoya	Alejandro, Luis	Greensboro
Rudolph, Nancy	Ennever, Peter	High Point
Running, Maureen	Hafiz, Razia	Fayetteville
Ryans, Abree	Mikhail, Ashraf	Jacksonville

September 15-17, 2010

Setzer, Timothy Sprinkle, Whitney Stepp, Amber Thomas, Ladonna Thrower, Shawna Underwood, Andrea Willett, Annette Blackmon, Katherine Dill, Emily Gonzales, Maureen Hale, Dawn Hiles, Heather Lafrancois, Tamara Lenfest, Callie Mcgaha, Karla Moche, Tabitha Peacock, Lauren Rayner, Lakeisha Settlemyre, Robin Sherman, Courtney Stacy, Cheryl Wan, Cecilia Zook, Kathryn Zychowicz, Tara Bland, Annie Burks, Tomika Casselberry, Jessica Dodson, Carol Gordon, Diana Hargrave, Kendra Holton, Suzanne Irons, Dana James, Deborah Killen, Julia Kulenic, Katherine Lesnevich, Marielle Mcginnis, Ellen Parker, Ellen Penn, Lindsay Scott, Stephanie Wriggelsworth, Kathryn Anderson, Pamela Boyd, Kelly Brinkley, Danette Campbell, Tami Giles, Reba Page 63

Kadiev, Steven Case, Ashley Schmitz, Todd Rakley, Susan Short, James Mcilveen, Peter Hodges, Beth Nederostek, Douglas Bradley, Deborah Milowic, Kristi Chen, Douglas Wiggins, David Patel, Divyang Ungerleider, Ross Carreras, Jorge Gerald, Melvin Ruth, Wayne Surgers, Sherri Kessel, John Hall, John Hansen, Hans Monical, Cheryl Rader, Dale Overby, David Cornwall, Thomas Cromartie, Henry Kritz, Alan Sanchez, John Gold, Stuart Tyler, Douglas Montero, Manuel Moore, Frederick Lederer, James Beaty, Orren Marum, Tiffany Jones, Colin Jelesoff, Nicole Greganti, Mac Graham, Ernesto Cohen, Dean Taavoni, Shohreh Bastek, Tara Restino, Elizabeth Benton, George Amoako, Patricia Tyler, Douglas

Charlotte Asheville Charlotte Durham Roxboro Elkin Asheboro Laurinburg Durham Raleigh Indian Tail Thomasville Favetteville Winston-Salem Sylva Cerro Gordo Asheville Raleigh Hickory Fayetteville Conover Oxford Statesville Chapel Hill Raleigh Dunn Raleigh Nags Head Chapel Hill Durham New Bern Yanceyville Winston-Salem Asheville Durham Ahoskie Durham Chapel Hill Fayetteville Elizabeth City Chapel Hill Raleigh Denver Brevard Hickory Durham September 15-17, 2010 Gurney, Ingrid Hatch, Judith Jordan, Stephania Kim, Dana Long, Terresa May, Karen Mcgowan, Karen Plemmons, Paul Ricci, Lindsey Su, Kristy Vitch, Michael Whitener, Antha Williams, Shana Young, Steven

Abramowitz, Lynne Barber, Syna Bean, Christopher Bostic, Susan Brantley, Cynthia Campbell, Padonda Chaney, Wanda Clinkscales, Tomeka Coes, Toni Crossen, Patricia Dupuis, Monica Edwards, Kelly Evans, Iris Jean Farmer, Kenneth Frautschy, Dawn Husmann, Kari Kanady, Jarrod Kilby, Miranda Kilby, Miranda Labriola, Bernadette Largent, Lisa Loveall, Christy Mickevich, Rachel Mikulaninec, Claudia Monroe, Pamela New, Paula Parker, Laura Parker, Gemekia Parker, Laura

Ross, Deborah Acosta, Daniel Grover, Arun Starnes, Sheryl Wiggins, David Russ, Donald Hill, James Golightly, Michael Seward, Daniel Stevens, Craig Garrett, James Mcewen, Luther Tharwani, Haresh Sharma, Navneet

NP Additional Supervisor List

Kerr, Jeffrey Dean, Eric Brigman, Brian Payne, Thomas Vargas, Carlos Hsieh, Stephen Burkett, Donna Tran-Phu, Lan Mintzer, Melanie Condrey, Staci Davis, Cara Canale, Sean Ragsdale, Kimberly Long, Ronald Byerley, Julie Mcconville, Robert Cheek, Vincent Agunobi, Charles Okoli, Alphonsus Olson, John Lovin, Vickie O'donovan, Cormac Hutchins, Charles Andy, Camille Singh, Roshnara Johnson, Earlie Duany, Virginia Tolbert, Franklin Moffet, Cynthia

Whiteville Greenville Winston Salem Durham Durham Hickory Chapel Hill Franklin Charlotte Cary Jacksonville Largo Durham Advance

Greensboro Greensboro Durham Charlotte Asheville Lexington Greensboro Fayetteville Cary Concord Raleigh Raleigh Tabor City Goldsboro Chapel Hill Sanford Greensboro Charlotte Charlotte Durham Hickory Winston-Salem Gastonia Winston-Salem Statesville Holly Ridge Newton Advance Newton

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September 15-17, 2010

Phelps, Jenifer Pickett, Jan Presson, Susan Reyer, Eric Sealey, Maria Sellers, Charlotte Sheeler, Cory Sheffield, Juqetta Shelton, Penny Shumate, Wendy Thomas, Sarah Thomas, April Trotter, Kathryn Vickers, Helen Vinzani, Catherine West, M Elisabeth Wilson, Angela Wolf, Vicky Woodruff, Sarah Aguilar, Lynette Allen, Kelly Britton, Tonya Callahan, Thomas Chapman, Tracy Conlin, Jean De Meyer, Teresa Dodge, Charlene Ellington, Heather Ellis, Allison Ellis, Marlene Estrera, Cleoanne Frechman, Erica Golden-Myers, Sharon Gray, Amie Hall, Michelle Hepp, Rachel Jacobs, Susanne Keith, Ernestine Kilby, Miranda King, Paula Knotts, Sharon Maglione, Mindy Marino, Laurie Martin, Mary Massey, Monica May, Jennifer Page 65

Myers, Christopher Depietro, Perry Yancey, Cynthia Russell, Michael Russell, Michael Bradner, Richard D'amico, Paul Mccaleb, Jane Brooks, Clyde Ellison, Robert Ellison, Robert Morris, Kimberly Olson, John Kuers, Peter Ziko, Barbara Chiodo, Mary Hansen, Hans Minior, Daniel Bonner, Mack Harrison, Myleme Ugah, Nwannadiya Snyder, Danal French, James Flanders, Paul Moreno, Carmen Moffet, Cynthia Brailey, Ellores Adomonis, Henry Mcclung, Jeffrey Durham, William Trost, Melanie Hopper, Kelly Crutcher, Kenneth Carboni, Michael Comstock, Lloyd Crook, Janet Marsh, Stephen Garrett-Piggott, Carolyn Eziri, Emeka Abraham, Daniel Rosen, Robert Gebrail, Ayman Vo, Nam Mcadams, Lou Feasel, Michael Peacock, Brenda

Wilmington Charlotte Asheville Raleigh Raleigh Charlotte Albemarle Henderson Greenville Boone Boone Asheville Durham Atlanic Beach Raleigh Dunn Conover **Rocky Mount** Durham Raleigh Pembroke **Roanoke Rapids** Greensboro Marion Snow Hill Newton Charlotte Durham Greensboro Asheville Durham Concord Pattersonn Durham Yancevville Charlotte Zebulon Raleigh Gastonia, Jacksonville Winston Salem Wilmington Asheville Matthews Wilson Washington September 15-17, 2010

Mcdonald, Elizabeth Monroe, Montricia Moussa, Mahaman O'grady, Clare Parham, Teresa Penn, Lashanda Price, Renea Reason, Sara Scott, William Shepanski, Laura Smith, Donna Stewart, Kristi Venable, Carole Winslow, Teresa Ziegler, Karen Bednar, Tamatha Benton, Jennifer Brkic, Vicki Brock, Anne Conlin, Jean Cook, Ladonna Cryer, Victoria Deese, Geovanna Desai, Shakti Durning, April Durning, April Everett, Shauna Falls, Ashley Ferguson, Cynthia Gonzalez, Leanne Greer, Janet Harney, Kellie Hayes, Cecilia Hobbs, Amber Ingold, Laura Johnson, Almaz Jolly, Melissa Jones, Penny Kitchen, Constance Lavoie-Vaughan, Nanette Lewis, Tamera Long, Debra Marks, Lisa Mays, Betty Padgett, Amanda Paparazo, Susan Page 66

Nechyba, Christian Batts-Murray, Doris Herman, Christopher Patel, Sarah Olson, Ronald Scarff, John Johns, Ann Byerley, Julie Mathias, Matthew Bronstein, David Gibson, David Moore, Barry Darwish, Amir Oak, Chang Stein, Jeannette Gosrani, Nimish Fann, Benjamin Woodall, Hal Flanders, Paul Jones, Gary Maramraj, Kishan Clark, Sandra Kaldy, Patricia Mcdaniels, Christopher Kiger, Tara Brown, Howard Coward, Karen Hall, George Smith, Henry Parsons, Stephen Grant, Evan Matkins, Preeti Conner, Dana Curran, Diana Little, Alfred Gibbs, Carol Jorge, Carlos Martin, Melanie Turlington, Wade Moreira, Roy Alejandro, Luis Andy, Camille Wright, David Suda, Russell Lawrence, Mary Lawrence, Mary

Raleigh Louisburg Winston Salem Burlington Durham Lexington Plymouth Chapel Hill Durham **Burlington** Siler City Wilmington Rockingham Plymouth Durham Greensboro Boone Kenly Marion Winterville Charlotte Carrboro Concord Raleigh New Bern Jacksonville Macclesfield Charlotte Greensboro Raleigh Lenoir Chalrotte Havesville Asheville Greensboro Charlotte Cornelious **High Point** Jacksonville Greensboro Greensboro Kernersville Durham Concord Morehead City Morehead City September 15-17, 2010

Pickering, Vrinda Pittillo, Deborah Pritchett, Pamela Quilty, Eileen Quilty, Eileen Robinson, Melissa Robinson, Gail Sargsyan, Arshak Smith, Mechell Smith, Mechell Smith, Jennifer Spencer, Vickie Tackitt, Helen Tharrington, Laticia Todd, Elizabeth Walson, Stella Wheeler, Arnetter Williford, Elizabeth Wood, Sandra Young, Kelly Alberssen, Jayme Amos, Kathleen Babel, Edward Babel, Edward Black, Lauri Boggs, Wanda Brady, Veronica Broom, Kristen Brown-Taft, Janelle Buchanan, Dale Bunch, Amanda Clark, Cheryl Clark, Mary Culmer, Dawn Curtis, Carol Day, Teresa Deal, Annie Deal, Annie Diggs, Teresa Goar, Sherry Holley, Julie Hopson, Lela Houser, Paige Huffman, Courtney Knuckles, Debra Leitch, Beatrice Page 67

Jacubowitz, Sam Smith, Robert Bechtel, Mark Ford, Albert Grover, Arun Adams, Lydia Bono, Erika Trimble, Stewart Fuller-Hines, Jessica Gorr, Jessica Cuento, Oblendo Spencer, James Webster, George Allison, Sheila Burnett, Brent Stephens, Wayland Spells, Lori Rogers, Garrett Patel, Amrish Diehl, Louis Levy, Jay Gray, Erin Bridger, Dewey Wood, Karen Bartley, Claude Gibson, David Cavros, Nick Thananopavarn, Paul Little, Tonya Madduri, Murthy Swarner, David Barnes, Elizabeth Little, Tonya Buse, John Neal, William Lacey, David Schmidt, Jay Hannibal, Matthew Williams, John Lucke, John Ocloo, Shirley Rosso, Bianca Joseph, David Bartlett, Kathleen Kwiatkowski, Timothy Hunter, Joseph

Greensboro Mills River Lake Wylie Naples Charlotte Concord Charlotte Brevard Elizabeth City Elizabeth City Asheville Winston-Salem Durham Durham Summerfield Winston-Salem Greensboro Goldsboro Troutman Durham Charlotte Salisbury Wilmington Boiling Springs La Newton Siler City Winston Salem Apex Stantonsburg Morganton Washington Greensboro Stantonsburg Chapel-Hill Greensboro Winston-Salem Granite Falls Lenoir Yadkinville Asheville Cherryville Cedar Point Shallotte Durham Huntersville Albemarle September 15-17, 2010 Lorencz, Susan Loucks, Kathleen Loucks, Kathleen Mcdowell, Peggy Mcgaha, Karla Mcleod, Mary Mixon, Carol Morgan, Eileen Mullinax Herman, Heather Murphy, Crystal Parker, Valerie Poindexter, Janet Queen, Courtney Richards, Betsy Rodriguez-Lennon, Luz Russell, Akimyo Shatley, Rebecca Smith, Sherry Spencer, Elsie Stanfield, Judy Stewart, Angela Sullivan, Sarah Vernon-Platt, Tracy Weeks, Leah Wilson, Brad Wilson, Brad Wood, Sandra Wood, Lawrence

Johnson, Robert Shumate, Janelle Braithwaite, Mary Earl, John Caserio, James Lowry, David Walters, William Miekley, Scott Darter, Danielle Blackstone, Thomas Pitts, Venus Mahan, Dennis Hamad, Mazen Bilbro, Robert Tripp, Henry Hillman, Vincent Curl, Kenneth Agbede, Betty Loynes, James Alejandro, Luis Okoroafor, Kingsley Bartlett, Kathleen Katz, Jason Poole, James Trani, Paul Dowler, Shannon Gold, Steven Bradner, Richard

Wilmington Raleigh Raleigh Newton Hendersonville Lenoir Havesville Fayetteville Jefferson Wilmington Durham Creedmoor Carv Raleigh Kernersville Charlotte North Wilkesboro Kinston Morehead City Greensboro Favetteville Durham Chapel Hill Clayton Hendersonville Hendersonville Conover Charlotte

#### PERFUSIONISTS

Brewer, Wade Marion, LP Gall, Chandra Janelle, PLP Westrick, David Alton, PLP

ANESTHESIOLOGIST ASSISTANTS

NONE

### NURSE PRACTITIONER JOINT SUBCOMMITTEE

Committee Members: Peggy Robinson, PA-C (NCMB); Mary Ann Fuchs, RN (NCBON); Nancy Bruton-Maree, RN (NCBON); Thomas Hill, MD (NCMB); Dan Hudgins (NCOBN); and George Saunders, MD (NCMB).

The minutes (open & closed sessions) from the May meeting were approved.

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September 15-17, 2010

Disciplinary Actions taken since November 2009

- There were 13 actions reported by the Board of Nursing since the last meeting.
- There were 2 actions reported by the Medical Board since the last meeting.

#### New Business

• Proposed change to NP prescribing rule to match that of PAs. The Medical Board received a request from three physicians to change the NP rule regarding the prescribing of controlled substances to allow nurse practitioners to prescribe schedule III controlled substances in a manner consistent with Federal regulations. The proposed change would mirror the present prescribing rule for physician assistants.

#### 21 NCAC 32M .0109 PRESCRIBING AUTHORITY

(a) The prescribing stipulations contained in this Rule apply to writing prescriptions and ordering the administration of medications.

(b) Prescribing and dispensing stipulations are as follows:

- (1) Drugs and devices that may be prescribed by the nurse practitioner in each practice site shall be included in the collaborative practice agreement as outlined in Rule .0110(b) of this Section.
- (2) Controlled Substances (Schedules II, IIN, III, IIIN, IV, V) defined by the State and Federal Controlled Substances Acts may be procured, prescribed or ordered as established in the collaborative practice agreement, providing all of the following requirements are met:
  - (A) the nurse practitioner has an assigned DEA number which is entered on each prescription for a controlled substance;
  - (B) dosage units for schedules II, IIN, III and IIIN are limited to a 30 day supply; and
  - (C) the prescription or order for schedules II, IIN, III and IIIN may not be refilled. the supervising physician(s) must possess the same schedule(s) of controlled substances as the nurse practitioner's DEA registration
- (3) The nurse practitioner may prescribe a drug or device not included in the collaborative practice agreement only as follows:
  - (A) upon a specific written or verbal order obtained from a primary or backup supervising physician before the prescription or order is issued by the nurse practitioner; and
  - (B) the written or verbal order as described in Part (b)(3)(A) of this Rule shall be entered into the patient record with a notation that it is issued on the specific order of a primary or back-up supervising physician and signed by the nurse practitioner and the physician.
- (4) Refills may be issued for a period not to exceed one year. except for schedules II, IIN, III and IIIN which may not be refilled.

Motion: Adopt rule change. Passed.

### Next Meeting

November 17, 2010
 Midwifery Joint Committee
 NP Joint Subcommittee

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 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 and/or to preserve attorney/client privilege.

Five investigative matters were reviewed. 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.

# **REVIEW (COMPLAINT) COMMITTEE REPORT**

Peggy Robinson, Chair; Thelma Lennon; George L. Saunders, III, MD

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 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 and/or to preserve attorney/client privilege.

The Review (Complaint) Committee reported on thirty eight 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.

A motion passed to return to open session.

# DISCIPLINARY (COMPLAINTS) COMMITTEE REPORT

William Walker, MD, Chair; Dr. Thomas R. Hill, MD; Pamela Blizzard; Paul Camnitz, MD; Karen R. Gerancher, MD; Ralph C. Loomis, MD.

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 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 and/or to preserve attorney/client privilege.

The Disciplinary (Complaints) Committee reported on six 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.

A motion passed to return to open session.

### DISCIPLINARY (MALPRACTICE) COMMITTEE REPORT

William Walker, MD, Chair; Dr. Thomas R. Hill, MD; Pamela Blizzard; Paul Camnitz, MD; Karen R. Gerancher, MD; Ralph C. Loomis, MD.

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 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 and/or to preserve attorney/client privilege.

The Disciplinary (Malpractice) Committee reported on 29 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 pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 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 and/or to preserve attorney/client privilege.

Seventeen informal interviews were conducted. A written report was presented for the Board's review. The Board adopted the recommendations and approved 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.

# DISCIPLINARY (INVESTIGATIVE) COMMITTEE REPORT

William Walker, MD, Chair; Dr. Thomas R. Hill, MD; Pamela Blizzard; Paul Camnitz, MD; Karen R. Gerancher, MD; Ralph C. Loomis, MD.

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 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 and/or to preserve attorney/client privilege.

The Disciplinary (Investigative) Committee reported on 21 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.

### **REVIEW (INVESTIGATIVE) COMMITTEE REPORT**

Peggy Robinson, Chair; Thelma Lennon; George L. Saunders, III, MD

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 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 and/or to preserve attorney/client privilege.

The Review (Investigative) Committee reported on 33 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.

# NORTH CAROLINA PHYSICIANS HEALTH PROGRAM (NCPHP) COMMITTEE REPORT

Thelma Lennon, Chair; Janice Huff, MD; Karen R. Gerancher, MD

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 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 and/or to preserve attorney/client privilege.

The Board reviewed 42 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.

# ADJOURNMENT

This meeting was adjourned at 12:30p.m., September 17, 2010.

William A. Walker, MD Secretary/Treasurer