

MINUTES

North Carolina Medical Board

September 22-24, 2004

**1203 Front Street
Raleigh, North Carolina**

Minutes of the Open Sessions of the North Carolina Medical Board Meeting September 22-24, 2004.

The September 22-24, 2004, meeting of the North Carolina Medical Board was held at the Board's Office, 1203 Front Street, Raleigh, NC 27609. The meeting was called to order at 8:02 a.m., Wednesday, September 22, 2004, by Stephen M. Herring, MD, President. Board members in attendance were: Charles L. Garrett, MD, President Elect (September 22 and 23 only); Robert C. Moffatt, MD, Secretary; H. Arthur McCulloch, MD, Treasurer; E. K. Fretwell, PhD; Michael E. Norins, MD; Janelle A. Rhyne, MD; George L. Saunders, III, MD; Ms. Shikha Sinha; Edwin R. Swann, MD; and Mr. Aloysius P. Walsh. Absent was Robin N. Hunter Buskey, PA-C.

Staff members present were: R. David Henderson, JD, Executive Director; Thomas W. Mansfield, JD, Legal Department Director; Mary Wells, JD, Board Attorney; Brian Blankenship, JD, Board Attorney; Marcus Jimison, JD, Board Attorney; Amy Bason, JD, Board Attorney; Ms. Wanda Long, Legal Assistant; Ms. Lynne Edwards, Legal Assistant; Mr. Curtis Ellis, Investigative Department Director; Don R. Pittman, Investigator/Compliance Coordinator; Mr. Edmund Kirby-Smith, Investigator; Mrs. Therese Dembroski, Investigator; Mr. Loy C. Ingold, Investigator; Mr. Bruce B. Jarvis, Investigator; Mr. Robert Ayala, Investigator; Mr. Richard Sims, Investigator; Ms. Jenny Olmstead, Senior Investigative Coordinator; Ms. Myriam Hopson, Investigative Coordinator; Mr. Dale Breaden, Director of Communications and Public Affairs; Ms. Dena Marshall, Public Affairs Assistant; Mrs. Joy D. Cooke, Licensing Director; Ms. Lori King, PA/NP Coordinator; Ms. Michelle Allen, Licensing Assistant; Ms. Kelli Singleton, GME Coordinator; Carol Puryear, Licensing Assistant; Jesse Roberts, MD, Medical Director; Kevin Yow, MD, Assistant Medical Director; Ms. Judie Clark, Complaint Department Director; Mrs. Sharon Squibb-Denslow, Complaint Department Assistant; Ms. Sherry Hyder, Complaint Summary Coordinator; Ms. Patricia Paulson, Malpractice/Medical Examiner Coordinator; Mr. Hari Gupta, Operations Department Director; Mr. David Shere, Registration Coordinator; Ms. Rebecca L. Manning, Database Coordinator; Mrs. Janice Fowler, Operations Assistant; Mr. Peter Celentano, Comptroller; Mr. Donald Smelcer, Technology Department Director; and Mr. Jeffery Denton, Executive Assistant/Verification Coordinator.

MISCELLANEOUS

Presidential Remarks

Dr. Herring commenced the meeting by reading from Governor Easley's Executive Order No. 1, the "ethics awareness and conflict of interest reminder." Dr. Garrett recused himself from an item on the Policy Committee's agenda regarding mark-up of clinical laboratory services.

Mr. Henderson relayed that Ms. Hunter Buskey, as a member of the Public Health Service, had been sent to Florida to help with the aftermath of Ivan and was unable to attend this Board Meeting.

Pharmacist Vaccination – Temporary Rule

Mr. Jimison reported to the Board that on September 17, 2004, a meeting on the Pharmacist Vaccination temporary rule (21 NCAC 32U) was scheduled and convened. He presided as the designated Hearing Officer. No member of the public attended the scheduled Public Hearing in person or submitted any written comments. The time for the hearing was kept open for one hour, and having received no comment or participation during that time, the

hearing was concluded. This issue will be placed on the Board's agenda for a vote after the required comment period, October 1, has passed.

Staff/Personnel Announcements

New Hires (Barbara Rodrigues and Lori King)

Mr. Henderson announced several new hires. Mr. Gupta introduced Barbara Rodrigues as the new Receptionist, and Ms. Cooke introduced Lori King as the new PA/NP Coordinator.

Oral Pathology Training Program

Valerie A. Murrah, DMD, MS, Director, Oral & Maxillofacial Pathology, UNC Chapel Hill, wrote the Medical Board a letter. In summary, UNC Chapel Hill would like for a dentist who has completed one year of an oral pathology program but who has not graduated from medical school and who does not have a residency-training license to participate in the pathology residency-training program at UNC. At issue was whether the oral pathology training would involve medical acts that would require a license from the Medical Board.

Motion: A motion passed that based on the exception in G.S. 90-18(c) to the Medical Practice Act and the definition of dentistry in the Dental Practice Act, the oral pathology resident (OPR) could, in the Board's opinion, do the full range of pathology work in the oral and maxillofacial areas and adjacent structures. With regard to other areas of the body, it would be permissible for the OPR to do tissue and autopsy work so long as all of the diagnostic work performed by the OPR is cosigned by an attending pathologist who has personally evaluated the same specimens.

MINUTE APPROVAL

Motion: A motion passed that the August 18-19, 2004, Board Minutes and the August 30, 2004 Board Minutes are approved as presented.

ATTORNEY'S REPORT

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

A written report on 179 cases were presented for the Board's review. The specifics of this report are not included as these actions are not public information.

A motion passed to return to open session.

EXECUTED CASES (PUBLIC)

AMSELLEM, David MD

Findings of Fact, Conclusion of Law and Order executed 7/29/2004

ARTIS, Karlus Cornelius MD

Consent Order executed 8/5/2004

BARBER, Robert Anthony DO

Consent Order executed 8/25/2004

BRADLEY, Russell Loyd MD
Consent Order executed 7/23/2004

BUZZANELL, Charles Anton MD
Consent Order executed 8/3/2004

CAMPBELL, Jeffrey Paul MD
Consent Order executed 8/19/2004

CEDERQUIST, Clarence Hugh PA
Consent Order executed 8/19/2004

CHRISTENSEN, Tracy Lee PA
Accept proposed Consent Order

CLARK, Carl Victor MD
Findings of Fact, Conclusions of Law and Order executed 9/7/2004

COLLINS, Natalear Rolline MD
Consent Order executed 8/19/2004

DEONARINE, Denis T. MD
Accept proposed Consent Order

GAY, Robert Milton MD
Consent Order executed 8/19/2004

GOODWIN, William Pierce MD
Consent Order executed 7/27/2004

HAYES, Joseph Steven MD
Findings of Fact, Conclusions of Law and Order executed 9/10/2004

HEINER, Daniel Edward MD
Order Terminating Consent Order executed 8/3/2004

JOHNSON, Willie Lee Jr. MD
Entry of Revocation executed 8/29/2004

KLING, Timothy George MD
Order Terminating Consent Order executed 9/9/2004

KNIGHT, Robert M. MD
Findings of Fact, Conclusions of Law and Order executed 9/10/2004

LUCAS, Charles Clement Jr. MD
Consent Order executed 9/3/2004

MCCLELLAND, Scott Richard DO

Amend Consent Order executed 9/23/2004

MCCONATHA, Buford Dotridge PA

Findings of Fact, Conclusions of Law and Order executed 9/2/2004

MEREDITH, George Minor II MD

Findings of Fact, Conclusions of Law and Order executed 9/10/2004

RAMMING, Kenneth Paul MD

Dismiss charges with prejudice

RENDALL, David Strong PA

Consent Order executed 9/17/2004

ROSNER, Michael John MD

Findings of Fact, Conclusions of Law and Order executed 7/23/2004

SEBHAT, Berhan MD

Consent Order executed 9/3/2004

SELLERS, Marc T. PA

Accept surrender dated 9/10/2004

THOMPSON, Robert Bruce MD

Order Terminating Consent Order executed 8/16/2004

URBAN, Edward John DO

Entry of Revocation 9/2/2004

WARREN, Michael Forrester MD

Consent Order executed 8/19/2004

ZHANG, Howard Hao MD

Order Terminating Consent Order executed 9/14/2004

EXECUTIVE COMMITTEE REPORT

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

The Executive Committee of the North Carolina Medical Board was called to order at 10:40 am, Wednesday September 22, 2004 at the offices of the Board. Members present were: Stephen M. Herring, MD, Chair; Charles L. Garrett, MD; Robert C. Moffatt, MD; Harlan A. McCulloch, MD; Janelle A. Rhyne, MD; and Aloysius P. Walsh. Also present were R. David Henderson (Executive Director), Hari Gupta (Director of Operations), and Peter T. Celentano, CPA (Comptroller).

Financials

Mr. Celentano, CPA, presented to the committee the July 2004 compiled financial statements. July is the ninth month of fiscal year 2004.

The Board's deficit continues to decrease for fiscal year 2004 and should approach breakeven by the end of this fiscal year. The Board had a small surplus for the month of June

September 22-24, 2004

and a small deficit for the month of July 2004. Mr. Celentano explained to the Committee about several income items that are seasonal and which historically peak in the spring and early summer months, including Temporary License, License by Endorsement, Resident Training Licenses and Datalink Income.

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

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

New Business

NC Physicians Health Program: The Committee reviewed the compiled statement of financial position of NC Physicians Health Programs, Inc. as of June 30, 2004 and the related statement of activities for the six months then ended. Dr. Garrett made a motion to accept the compiled financial statements of the NC Physicians Health Programs, Inc. as presented. Dr. Moffatt seconded the motion and the motion was approved unanimously.

Code of Conduct: Dr. Herring previously asked Mr. Henderson whether we were doing enough to regularly remind Board members about recusals and other important matters.

Mr. Henderson had discussed this general issue with other licensing boards and proposed to the Executive Committee a draft of a "Code of Conduct" that each Board member would sign each year. Dr. Garrett and Dr. McCulloch made several recommendations to revise the document to make it clear what is required when a Board member recuses himself or herself. Dr. Garrett made a motion that the Executive Committee recommend the full Board adopt the Code of Conduct as amended. The motion was seconded and approved unanimously.

Update: This item is extracted for further study and will be brought back to the November Executive Committee Meeting.

Board Meeting – December 16, 2004: Dr. Garrett made a motion to recommend to the full Board that the Board schedule a telephone conference on Thursday, December 16, 2004. The motion was seconded and approved unanimously.

2005 Budget: Mr. Henderson summarized the proposed budget for fiscal year 2005. Mr. Henderson also reviewed various options for the Committee in order to possibly reduce the projected deficit. A draft copy of the 2005 Budget will be distributed to each Board member for their review before the Board adjourns from this meeting. Dr. Garrett made a motion that the Executive Committee recommend the full Board consideration of the proposed Budget for 2005 as set forth and that said Budget be discussed and voted on at the October 2004 Board Meeting. The motion was seconded and approved unanimously.

The meeting was adjourned at 12:00pm.

POLICY COMMITTEE REPORT

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

The Policy Committee of the North Carolina Medical Board was called to order at 3:43 p.m., Wednesday, September 22, 2004, at the office of the Board. Present were: Robert Moffatt, MD, Chair; Aloysius P. Walsh; Arthur McCulloch, MD; George L. Saunders, MD; and Janelle A. Rhyne, MD. Also attending were: Thomas Mansfield, JD, Director, Legal Department, NCMB (PC Staff); Amy Bason, JD (PC Staff); Melanie Phelps, JD, North Carolina Medical Society;

Dale G Breden, Public Affairs Director, NCMB; and Mr. Jeffery T. Denton, Board Recorder (PC Staff).

Notes:

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

Position Statement Review - The Use of Anorectics in Treatment of Obesity (Saunders)

[At the July committee meeting Dr. Saunders presented a proposed rough draft of a revised position statement. He stated that the current statement was good but may be too specific with regards to medications. He indicated that this was appropriate at the time this position statement was last updated but it has changed over time. There was a general consensus supporting approval of Dr. Saunders' draft.]

Dr. Saunders reported he had recently sent out the revised draft position statement for comment. Action on this position statement will be deferred until the November committee meeting after comments have been received and reviewed.

Management of Chronic Non-Malignant Pain (McCulloch)

[At the July committee meeting Dr. Moffatt stated that this is still a good pain statement but certain aspects may need reworking and it may be helpful to get comments from certain individuals and/or groups around the State. Dr. Rhyne stated that our statement was good but the Federation of State Medical Boards' (FSMB) guidelines were very thorough, and should be consulted

Mr. Breden provided some background on this position statement. The Board's statement was developed before the FSMB took any type of position. North Carolina was trail blazing at the time and certain definitions were necessary then that might not be necessary now. To pattern ours after the FSMB's would be a logical progression.

Dr. Moffatt introduced Matt Gainey, PhD, and Pharmacologist who is associated with a pain management task force. Dr. Gainey stated the group was not active at the present time but could be revived. He initially put the group together to address pain management and is sure the group would be happy to be a resource for the Board

Dr. McCulloch stated that he had asked some of his partners who are specialists in this area for their opinions. He offered several comments for revising the current position statement and would like to bring a draft to the next meeting after reviewing the FSMB guidelines.]

Dr. McCulloch stated he had thoroughly reviewed the FSMB Model Guidelines for the Use of Controlled Substances for the Treatment of Pain. He also consulted with several medical experts who deal with chronic pain management. In his opinion this model is complete and adequate, and the Board would do well to adopt it as the Board's position statement on this subject. He said it is quite long but believes the treatment of chronic pain and prescription of narcotics creates a tremendous amount of anxiety with our practitioners. He believes this position statement is appropriate.

Motion: A motion passed that the below position be tabled in order to allow the Full Board to review it in detail and brought back for consideration at the November 2004 Board Meeting.

GUIDELINES FOR THE USE OF CONTROLLED SUBSTANCES FOR THE TREATMENT OF PAIN

- Appropriate treatment of chronic pain may include both pharmacologic and non-pharmacologic modalities. The Board realizes that controlled substances, including opioid analgesics, may be an essential part of the treatment regimen.
- All prescribing of controlled substances must comply with applicable state and federal law.
- Guidelines for treatment include: (a) complete patient evaluation, (b) establishment of a treatment plan (contract), (c) informed consent, (d) periodic review, and (e) consultation with specialists in various treatment modalities as appropriate.
- Deviation from these guidelines will be considered on an individual basis for appropriateness.

Section I: Preamble

The North Carolina Medical Board recognizes that principles of quality medical practice dictate that the people of the State of North Carolina have access to appropriate and effective pain relief. The appropriate application of up-to-date knowledge and treatment modalities can serve to improve the quality of life for those patients who suffer from pain as well as to reduce the morbidity and costs associated with untreated or inappropriately treated pain. The Board encourages physicians to view effective pain management as a part of quality medical practice for all patients with pain, acute or chronic, and it is especially important for patients who experience pain as a result of terminal illness. All physicians should become knowledgeable about effective methods of pain treatment as well as statutory requirements for prescribing controlled substances.

Inadequate pain control may result from physicians' lack of knowledge about pain management or an inadequate understanding of addiction. Fears of investigation or sanction by federal, state, and local regulatory agencies may also result in inappropriate or inadequate treatment of chronic pain patients. Accordingly, these guidelines have been developed to clarify the Board's position on pain control, specifically as related to the use of controlled substances, to alleviate physician uncertainty and to encourage better pain management.

The Board recognizes that controlled substances, including opioid analgesics, may be essential in the treatment of acute pain due to trauma or surgery and chronic pain, whether due to cancer or non-cancer origins. Physicians are referred to the U.S. Agency for Health Care and Research Clinical Practice Guidelines for a sound approach to the management of acute¹ and cancer-related pain.²

The medical management of pain should be based upon current knowledge and research and includes the use of both pharmacologic and non-pharmacologic modalities. Pain should be assessed and treated promptly and the quantity and frequency of doses should be adjusted according to the intensity and duration of the pain. Physicians should recognize that tolerance and physical dependence are normal consequences of sustained use of opioid analgesics and are not synonymous with addiction.

The North Carolina Medical Board is obligated under the laws of the State of North Carolina to protect the public health and safety. The Board recognizes that inappropriate prescribing of controlled substances, including opioid analgesics, may lead to drug diversion and abuse by individuals who seek them for other

than legitimate medical use. Physicians should be diligent in preventing the diversion of drugs for illegitimate purposes.

Physicians should not fear disciplinary action from the Board or other state regulatory or enforcement agency for prescribing, dispensing, or administering controlled substances, including opioid analgesics, for a legitimate medical purpose and in the usual course of professional practice. The Board will consider prescribing, ordering, administering, or dispensing controlled substances for pain to be for a legitimate medical purpose if based on accepted scientific knowledge of the treatment of pain or if based on sound clinical grounds. All such prescribing must be based on clear documentation of unrelieved pain and in compliance with applicable state or federal law.

Each case of prescribing for pain will be evaluated on an individual basis. The board will not take disciplinary action against a physician for failing to adhere strictly to the provisions of these guidelines, if good cause is shown for such deviation. The physician's conduct will be evaluated to a great extent by the treatment outcome, taking into account whether the drug used is medically and/or pharmacologically recognized to be appropriate for the diagnosis, the patient's individual needs including any improvement in functioning, and recognizing that some types of pain cannot be completely relieved.

The Board will judge the validity of prescribing based on the physician's treatment of the patient and on available documentation, rather than on the quantity and chronicity of prescribing. The goal is to control the patient's pain for its duration while effectively addressing other aspects of the patient's functioning, including physical, psychological, social and work-related factors. The following guidelines are not intended to define complete or best practice, but rather to communicate what the Board considers to be within the boundaries of professional practice.

Section II: Guidelines

The Board has adopted the following guidelines when evaluating the use of controlled substances for pain control:

1. Evaluation of the Patient

A complete medical history and physical examination must be conducted and documented in the medical record. The medical record should document the nature and intensity of the pain, current and past treatments for pain, underlying or coexisting diseases or conditions, the effect of the pain on physical and psychological function, and history of substance abuse. The medical record should also document the presence of one or more recognized medical indications for the use of a controlled substance.

2. Treatment Plan

The written treatment plan should state objectives that will be used to determine treatment success, such as pain relief and improved physical and psychosocial function, and should indicate if any further diagnostic evaluations or other treatments are planned. After treatment begins, the physician should adjust drug therapy to the individual medical needs of each patient. Other treatment modalities or a rehabilitation program may be necessary depending on the etiology of the pain and the extent to which the pain is associated with physical and psychosocial impairment.

Note: Random drug screening of patients should be considered an adjunct to a comprehensive treatment plan.

3. Informed Consent and Agreement for Treatment

The physician should discuss the risks and benefits of the use of controlled substances with the patient, persons designated by the patient, or with the patient's surrogate or guardian if the patient is incompetent. The patient should receive prescriptions from one physician and one pharmacy where possible. If the patient is determined to be at high risk for medication abuse or have a history of substance abuse, the physician may employ the use of a written agreement between physician and patient outlining patient responsibilities including (1) urine/serum medication levels screening when requested (2) number and frequency of all prescription refills and (3) reasons for which drug therapy may be discontinued (i.e. violation of agreement).

4. Periodic Review

At reasonable intervals based upon the individual circumstance of the patient, the physician should review the course of treatment and any new information about the etiology of the pain. Continuation or modification of therapy should depend on the physician's evaluation of progress toward stated treatment objectives such as improvement in patient's pain intensity and improved physical and/or psychosocial function, such as ability to work, need of health care resources, activities of daily living, and quality of social life. If treatment goals are not being achieved, despite medication adjustments, the physician should re-evaluate the appropriateness of continued treatment. The physician should monitor patient compliance in medication usage and related treatment plans.

5. Consultation

The physician should be willing to refer the patient as necessary for additional evaluation and treatment in order to achieve treatment objectives. Special attention should be given to those pain patients who are at risk for misusing their medications and those whose living arrangement pose a risk for medication misuse or diversion. The management of pain in patients with a history of substance abuse or with a comorbid psychiatric disorder may require extra care, monitoring, documentation, and consultation with or referral to an expert in the management of such patients.

6. Medical Records

The physician should keep accurate and complete records to include (1) the medical history and physical examination (2) diagnostic, therapeutic and laboratory results (3) evaluations and consultations (4) treatment objectives (5) discussion of risks and benefits (6) treatments (7) medications [including date, type, dosage, and quantity prescribed] (8) instructions and agreements and (9) periodic reviews. Records should remain current and be maintained in an accessible manner and readily available for review.

7. Compliance with Controlled Substances Laws and Regulations

To prescribe, dispense, or administer controlled substances, the physician must be licensed in the state, and comply with applicable federal and state regulations. Physicians are referred to the Physicians Manual of the U.S. Drug Enforcement Administration and (*any relevant documents issued by the state medical board*) for specific rules governing controlled substances as well as applicable state regulations.

Section III: Definitions

For the purposes of these guidelines, the following terms are defined as follows:

Acute pain: Acute pain is the normal, predicted physiological response to an adverse chemical, thermal, or mechanical stimulus and is associated with surgery, trauma and acute illness. It is generally time limited and is responsive to opioid therapy, among other therapies.

Addiction: Addiction is a neurobehavioral syndrome with genetic and environmental influences that results in psychological dependence on the use of substances for their psychic effects and is characterized by compulsive use despite harm. Addiction may also be referred to by terms such as "drug dependence" and "psychological dependence." Physical dependence and tolerance are normal physiological consequences of extended opioid therapy for pain and should not be considered addiction.

Analgesic Tolerance: Analgesic tolerance is the need to increase the dose of opioid to achieve the same level of analgesia. Analgesic tolerance may or may not be evident during opioid treatment and does not equate with addiction.

Chronic Pain: A pain state which is persistent and in which the cause of the pain cannot be removed or otherwise treated. Chronic pain may be associated with a long-term incurable or intractable medical condition or disease.

Pain: an unpleasant sensory and emotional experience associated with actual or potential tissue damage or described in terms of such damage.

Physical Dependence: Physical dependence on a controlled substance is a physiologic state of neuroadaptation which is characterized by the emergence of a withdrawal syndrome if drug use is stopped or decreased abruptly, or if an antagonist is administered. Physical dependence is an expected result of opioid use. Physical dependence, by itself, does not equate with addiction.

Pseudoaddiction: Pattern of drug-seeking behavior of pain patients who are receiving inadequate pain management that can be mistaken for addiction.

Substance Abuse: Substance abuse is the use of any substance(s) for non-therapeutic purposes; or use of medication for purposes other than those for which it is prescribed.

Tolerance: Tolerance is a physiologic state resulting from regular use of a drug in which an increased dosage is needed to produce the same effect or a reduced effect is observed with a constant dose.

¹Acute Pain Management Guideline Panel. Acute Pain Management: Operative or Medical Procedures and Trauma. Clinical Practice Guideline. AHCPR Publication No. 92-0032. Rockville, Md. Agency for Health Care Policy and Research. U.S. Department of Health and Human Resources, Public Health Service. February 1992.

²Jacox A, Carr DB, Payne R, et al. Management of Cancer Pain. Clinical Practice Guideline No. 9. AHCPR Publication No. 94-0592. Rockville, Md. Agency for Health Care Policy and Research, U.S. Department of Health and Human Resources, Public Health Service. March 1994.

Position Statement Numbering System (Saunders, Rhyne)

[At the July committee meeting Dr. Rhyne suggested either numbering the Board's Position Statements as listed in the *Forum* or categorizing them much like the Texas Board does. Dr.

Saunders thinks it would be useful to categorize and number as well. Ms. Phelps suggested that the Board look at the way the American Medical Association's Council on Ethical and Judicial Affairs (CEJA) handles their positions as a possible alternative.]

Dr. Saunders and Dr. Rhyne concur that during this position statement review process the committee should use a straight numbering system. Once the review process for the major position statements is completed they can be categorized or grouped by similar topic.

Petition for CME Rule Change (from R. T. VanHook, MD)

The Board received a letter from Dr. VanHook petitioning the Board for a rule change to rule 21 NCAC 32R .0103 regarding exceptions to Continuing Medical Education (CME) requirements regarding Graduate Medical Education (GME).

As currently written the rule allows for a licensee enrolled in an accredited GME program to be exempt from the CME requirements. However, there are no provisions to calculate when the CME three-year period starts (or continues) for those that complete or leave the GME program.

Dr. VanHook requested the rule be changed to: "The three year period described in Paragraph (b) of this Rule shall run from the latest of: the physician's birthday beginning in the year 2001, the first birthday following initial licensure, or the first birthday after successful completion of an AOA or Graduate Medical Education (ACGME) accredited graduate medical education program."

The committee considered this change to be helpful but felt it still left some loopholes. For instance, those licensees who drop out of a program, those who enter a residency program after being in active practice, or those who only do a Board-approved 3-6 month mini-residency.

There was much discussion regarding what the rule actually says and the "intent" of the rule. In an attempt to cover all of these issues Dr. McCulloch recommended to do away with the exception entirely and allow five hours per month of CME be credited as Category 1 CME while in GME programs. The intent of this revision is not an attempt to put a realistic value on the GME received from these programs but to merely satisfy the North Carolina 150 hour three-year requirement. This way there would be no CME start/stop clock and licensees would accumulate CME hours (for the Board's reporting purposes) throughout participation in GME programs. The CME requirement would be consistent for all licensees and start upon receipt of their medical license.

Motion: A motion passed to (1) deny the petition of Dr. VanHook, and (2) commence the rulemaking process to change the CME rule to repeal the "exception" and to add to the Educational Provider-Initiated CME list an allowance for five hours per month of CME for AOA/ACGME or Board-approved training programs.

Action: Mr. Henderson is to send this proposed rule change to the Residency Program Directors for information and to solicit any initial comments they may have.

Additional Items for the November 2004 Committee Agenda

- (1) The Board has received a request from Gregory Henderson, MD for an opinion regarding the issue of physician fee splitting and physician mark-up of clinical laboratory services. (Dr. Garrett has recused himself from this issue or any discussion thereof.)
- (2) The Board has received a request from the American Association of Electrodiagnostic Medicine to review rules regarding operation of mobile diagnostic centers. Especially, those that are doing nerve conduction studies without the supervision of a physician trained in electrodiagnostic medicine.
- (3) Review of the position statement entitled Laser Surgery (laser hair removal).
- (4) Dr. Moffatt and Ms. Bason will review and collaboratively decide on what other position statements will be reviewed at the November committee meeting.

There being no further business, the meeting adjourned at 4:30 p.m. The next meeting of the Policy Committee is tentatively set for 3:00 p.m. Wednesday, November 17, 2004.

Motion: A motion passed to accept the Policy Committee report as presented.

ALLIED HEALTH COMMITTEE REPORT

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

The Allied Health Committee of the North Carolina Medical Board met on Thursday, September 23, 2004, at the office of the Board. Present were: Arthur McCulloch, MD, Chair; and E. K. Fretwell, PhD. Also attending were: Marcus Jimison, JD, (PC Staff); Joy Cooke, Director Licensing Department (PC Staff); Lori King, PA/NP/PPP Coordinator (PC Staff); Melanie Phelps, JD, North Carolina Medical Society; Justine Strand, PA-C; Lisa shock, PA-C; Jennifer Hedgepeth, PA-C; Scott Best, PA-C; and Roger Page, PA-C. Absent was Robin Hunter Buskey, PA-C.

Public Agenda Items for Committee Discussion

Item: CME - Staff needs guidance on how to handle review of CME.

Recommendation: The Allied Health Committee will review Applications with CME issues.

Board Action: The Allied Health Committee will review Applications with CME issues.

PA Rules Review Task Force

Issues discussed:

1. Interim Status
2. DEA Registration
3. Re-entry

Justine Strand, PA-C will contact NCCP to see if there are any re-entry programs currently available. Dr. McCulloch suggested a future telephone conference to discuss any updates of information, findings, etc. Dr. McCulloch motioned to defer on any PA rule changes until further information is received.

Board Action: Accept as information

Rule 32S .0102 (8)

The committee requests clarification on the meaning of the Rule. "If two years or more have past since graduation from an approved program, the applicant must submit documentation of the completion of at least 100 hours of continuing medical education (CME) during the preceding two years."

Board Action: If PA is licensed in another state and has been actively working, CME documentation does not have to be submitted. If NC is the first license they have applied for and it has been more than 2 years since they graduated from an approved program, CME documentation has to be submitted as part of the application.

Rule 32S .0103

Recommended that this rule be repealed in the process of updating the PA Rules. This rule refers to temporary licenses for physician assistants. The Board no longer has statutory authority to issue temporary licenses to physician assistants.

Board Action: Repeal Rule 32S.0103 when the PA rules are next updated.

Non - Public Agenda Items for Committee Discussion

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

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

A motion passed to return to open session.

EMS Compliance Committee Report

Accept as information.

APPLICANTS LICENSED

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

<u>PHYSICIAN ASSISTANT</u>	<u>PRIMARY SUPERVISOR</u>	<u>PRACTICE CITY</u>
CATHCART, Joanna M.	Humble, Ted	Asheville
DOLAN, Margaret Anne	Hollar, Carlin Bullard	Morehead City
FRANCIS, Carolyn Anne	***	
LEWIS, Bryan David	Tuttle-Newhall, Janet	Durham
NAVARRETE, Robert A.	Tuttle-Newhall, Janet	Durham
RIDER, Kristin Elizabeth	***	
SCHLEINKOFER, Rebecca	***	
SHANNON, Lynwood Page	***	
TRIMARCHE, Robert John	Moyle, Henry	Pinehurst

PA Applicants to be licensed after receipt of acceptable SBI and/or PANCE results

<u>PHYSICIAN ASSISTANT</u>	<u>PRIMARY SUPERVISOR</u>	<u>PRACTICE CITY</u>
BARKSDALE, Rebecca Ann	***	
BERNHARDT, Vernon D.	(working at VA Medical Ctr)	Salisbury
BIDDIX, Kristen Morris	***	
BUICE, Paula Annette	Tuttle-Newhall, Janet	Durham
COMFORT, Christopher J.	Stephen J. Sladicka	Hickory
COOPER, Janine L.	Tuttle-Newhall, Janet	Durham
GOLDFIELD, John Prada	***	
HENSLER, Robert Sean	***	
HORN, Nicole Yvonne	***	
KLEINSCHMIDT, Mary K.	***	
LEWIS, Yvonne W.	Phillips, Ted	Sanford
LY, KaoNu	***	
MITRAVICH, Casey Ann	***	
ORNDORFF, Ginger E.	***	
PIERCE, Brigette N.	***	
PINEIRO, Miguel Angel	***	
PITRE, Christopher Paul	***	
PRICE, Meredith Ann	***	
RILEY, Elizabeth Ruth	***	
SULLIVAN, Colleen Marie	***	
TAYLOR, Jennifer S.	***	
THEODORE, Donna A.	***	
VAUGHAN, Lindsay N.	Kelling, Douglas F. Jr.	Concord
VU, Han Khanh	***	
WALKER, Eureka A.	***	

PA - Intent to Practice Forms Acknowledged

<u>PHYSICIAN ASSISTANT</u>	<u>PRIMARY SUPERVISOR</u>	<u>PRACTICE CITY</u>
Murphy, Michael Joseph	Azzato, John Anthony	Southport
Feldman, Rhonda Glen	Cook, David Cleo	Wilmington
Pettit, Jerome Lyle	Pikus, Harold Jason	Asheville
Thompson, William David	Lucas, Michael John	High Point
Crabtree, Ami Seitz	Fruth, Joanne Marie	Oxford
Baker, David Charles	Page, Stephen Willis	Collettsville
Maultsby, Sue Hughes	Herman, Christopher Michael	Winston-Salem
Sharpe, Sarah Jane	Gumber, Subhash C.	Cary
Sellers, Daniel Philip	Reyes, Rodolfo Constantino	Dunn
McGinnis, James Patrick	Nederostek, Douglas Frank	Laurinburg
Hooper, Arthur Ross	Reed, John Joseph Jr.	Fayetteville
Cottrell, Deanna Lyn	Miller, Antonius Arthur	Winston-Salem
Kowaleski, Jennie Lynn	Weaver, Susan Tucker	Raleigh
Pierce, Sandra Fisher	Kieffer, Robert Wilson	Asheville
Panos, Constantina Helen	McLeod, William John	Eden
Pope, April Gilliam	Maynard, Eugene Harold Jr.	Benson
Zagon, Laura Joan	Garuba, Abdul Karim	Matthews
Barrow, Kern Lee	Linett, Lawrence Max	Wilmington

Wilson, Thomas Henley III	LeCroy, Charles Michael	Asheville
Hennig, Therese Marie	Waugh, Robert Andrew	Durham
Thomas, Kimberly Jean	Husain, Ali Khalid	Fayetteville
Clabough, Phyllis Smith	Kelly, Samuel Steven	High Point
Gocke, Thomas Vincent III	Harris, Timothy Edward	Raleigh
Romblad, Jason Scott	De Santis, Donald	Lexington
Zagon, Laura Joan	Garuba, Abdul Karim	Matthews
Feldman, Rhonda Glen	Padula, Joseph Peter	Wilmington
McElmurry, Teresa Lynn	Wooden, William Arthur	Greenville
Sterling, Anthony Keith Jr.	Gerard, Jody	Clinton
Layfield, Heather Jane	Jackson, Anita Louise	Rockingham
Martin, Jeffrey Scott	Pridgen, James Henry	Wilmington
Knauber-McInturf, Katherine	Reyes, Rodolfo Constantino	Benson
Achard, Malinda Lou	Vickery, David Augustus	Asheville
Beaman, Carlton Reid Jr	Sunderman, Michael Robert	Stantonsburg
Riser, John David	Acree, Jeffrey Siemens	Marion
Mahiquez, Jose Felipe	Seroska, Phillip John	Whiteville
Lewis, Michael Tyrone	Gerard, Jody	Clinton
Kern, Elizabeth Marie	Anthony, Meredith Reginald Jr.	Ft. Bragg
Weaver, Arlondra Rochelle	Uwensuyi-Edosomwan, Fidelis	Charlotte
Kazda, John Joseph	Foulks, Carl Alvin	Fayetteville
Davis, Stephanie Turnage	Cook, Russel Clifford	Greenville
Baker, Bridget Denise	Yu, Lu	Monroe
Peterson, Jayme Michelle	Hall, Myra Deese	Fayetteville
Underwood, Ashley	Pasi, Sonia	Durham
Rowland, Jacqueline Lee	Clancy, Thomas Vincent	Wilmington
Johnson, Curtis Henry	Kelsch, John Martin Jr.	Fayetteville
Hedrick, Christina D.	Bosken, Donald William	Thomasville
Pingley, Deana Renee	O'Keeffe, Richard Michael Jr.	Winston-Salem
Peceovich, Louise Ann	Satterwhite, William Madison III	Winston-Salem
Nelson, Dwayne Alan	Rosado, Marcos Gilberto	Carolina Beach
Daignault, Thomas Harold	Jessup, Pamela Kay Hendrick	Fayetteville
Skakun, William Charles	Stets, Joan Marie	Durham
Schwartz, Kimberly	Robinson, Lindwood Allen	Raleigh
Poland-Torres, Denise	Coward, Karen Denise	Macclesfield
Van Dyck, Ursula Lynell	Reeg, Scot Eric	Greenville
Martin, Maida Helen	Weaver, John Wayne	High Point
Kreitz, Michael Jr.	Weaver, John Wayne	High Point
Ricard, Denis Philip	Nederostek, Douglas Frank	Laurinburg
White, Allison Caroline	Hayes, Paul Gregory	Greensboro
Spalding, Thomas Hugh	Moul, Judd Wendell	Durham
Berry, Gerard Flood	Fiery, Hubert Leroy	Winston Salem
Waronsky, Roy George	Myers, Brian Gerard	Charlotte
Hineline, Jennifer Ann	Everhart, Robert George	Wilmington
Benfield, Elizabeth Ward	Everhart, Robert George	Wilmington
Whitehead, Marjorie	Tokunboh, Julius I. Kehinde	Charlotte
Perkins, Cameron Luther	Guha, Subrata	Rocky Mount
Graham, Barry Gerard	Locklear, Kenneth Edward	Lumberton
Enand, Chanda Sahni	Mehta, Anita	Charlotte
Walsh, Charlene Mariam	Lapp, Charles Warren	Charlotte
Battle, Lydia Ann	Tokunboh, Julius I. Kehinde	Charlotte

Steyskal, Christopher	Brown, Adam Pullan	Wilmington
Parkhurst, Julia Walpole	Jemsek, Joseph Gregory	Huntersville
Taxman, Steven Mark	Waugh, Robert Andrew	Durham
Sprange, Brent Copeland	Tolhurst, John Thomas	Rutherfordton
Hall, April Leigh	Chavis, Herman	Red Springs
Ervin, Andrew Ephraim	Rich, Jonathan David	Lumberton
Kerns, Amy Marie	Cassiano, Coley James	Greensboro
Currin, Ann Teass	Daeihagh, Pirouz	Winston-Salem
Schaffer, Valerie Jane	Warburton, Samuel Woodward Jr.	Durham
Velaz-Faircloth, Maria E.	Soberano, Arlene Sena	Durham
Edwards, John Sawyer III	Seward, Daniel Peter	Mooresville
Massey-McMahan, Jenny	Liu, Debra Chih-Fen	Winston-Salem
Hage, Suzanne Michele	Forsyth, Richard James	Raleigh
Dion, Gregory Wayne	Rudyk, Mary Kathryn	Wilmington
Deeley, Beth Ann	Forrester, James Summers Jr.	Wilmington
Rosado, Eddie Alberto	Forstner, James Robert	Southport
Hitter, Scott Robert	Maultsby, James Alexander	Wallace
Martinelli, Kathleen	Jones, Robert Glen	Raleigh
McDowell, Edward Leon	Nichols, Michelle Rogers	Pilot Mountain
Clarke, Theresa Sharon	Daud, Shahnaz Kausar	Cary
McBride, Nancy Kay	Forstner, James Robert	Southport
Murphy, Stacy Leigh	McClelland, Scott Richard	Wilmington
Sterling, Anthony Keith Jr.	Talerico, Paul J.	Wilson
Copeland, Chanel Leaa	Batish, Sanjay	Leland
Ensign, Todd Daniel	McClelland, Scott Richard	Wilmington
Morris, Delton Nobe	Horowitz, Joel I.	Fayetteville
Hudak, Priscilla Teixeira	Appel, Barbara Lynn	Fayetteville
Figura, Thomas	Boatright, Karl Craig	Asheville
Patton, Colleen Hill	Devasthali, Shirish Dhondu	Fayetteville
Sheehan, James Michael	Runyon, Michael Scott	Charlotte
Austin, Holly Davenport	Kalish, Michael John	High Point
Mazzone, Guy Anthony	Martin, Robert Charles	Tarboro
Blankenship, Kelly Dawn	Holleman, Jeremiah Henry Jr.	Charlotte
Smith, Janet Lee	Leitner, Thomas Courtenay	Monroe
Taylor, Stephanie Lee	Snider, Alison Townsend	Kernersville

NP – Initial Applications Recommended for Approval after Staff Review-

NURSE PRACTITIONER

Alsgaard, Patricia
Barber, Diane
Barnette-Smith, Patricia
Barnhardt, Cynthia
Binarao, Gil P. Jr.
Caldwell, Erin Hackett
Cerny, Jennifer Luzia
Clark, Vicki Edwards
Cromer, Amanda Leigh
Demarest, Patricia
DiRamio, Melodie Anne
English, Frank Stefan

PRIMARY SUPERVISOR

Rathburn, Mary Anne
Williams, Barry Neil
Meehan, David
Katibah, William G. III
Taghizadeh, Behzad
Finch, Sudhir Eugene
Parker, Robert L.
Hearne, Larry Adam
Steffens, Thomas Albert
Ziglar, Susan Kimberly
Finch, Sudhir Eugene
Johnson, Earlie Thomas, Jr.

PRACTICE CITY

Charlotte
Winston-Salem
Clayton
Charlotte
Winston-Salem
Charlotte
Winston-Salem
Lumberton
Concord
Rural Hall
Charlotte
Jacksonville

Hall, Shepeara Kayonne
 Holsonback, Jamie Nicole
 Hroback, Mandy Lynn
 Inman, Edith Pearsall
 Jackson, Rhonda Mode
 Liem, Grace Lee
 Link, Tamara L.
 Marks, Mary Maikranz
 Matzke, Teresa Marie
 McClelland, Michelle D.
 Morphis, Linda Orders
 Owen, Cheryl Nicholson
 Paden, Mary Elizabeth
 Peck, June Cranford
 Pierce, Patricia Ann
 Piercy, Dawn Lenore
 Rowland, Audrey Rose
 Ruhl, Kathleen B.
 Steele, Anthony Tunelle
 Steele, James Robert
 Stewart, Kristi Gayle
 Thompson, Ann T.
 Toombs, S. Celeste
 Wheatley, Sandra M.
 Wilson, Amy Faircloth
 Wright, Lanika L.
 Yarborough, Kelly E.

Monroe, Yvonne Lee
 Pham, Hiep Thanh
 Rathburn, Mary Anne
 Rallis, Michael G.
 Mayfield, Kelli Burgin
 Nickerson, Lloyd E.
 McConville, Robert
 Kimball, Robert R.
 Bullard, Tracy
 Vaughan, Elizabeth
 Echterling, Susan
 Wheeler, Patti B.
 Kurtzberg, Joanne
 McConville, Robert, Jr.
 Mead, Robert J. Jr.
 Diehl, Anna Mae
 Valeri, Frank Scott
 Hazlett, Donald
 Allen, Harvey H. Sr.
 White, Craig Justice
 Herman, Christopher M.
 Turner, Roberta
 Bright, Cedric Marc
 Rosen, Ronald M.
 Sims, William Louis
 Simpson<Marshall Craig
 Runyon, Michael S.

Raleigh
 Charlotte
 Charlotte
 Burgaw
 Shelby
 Salisbury
 Sanford
 Statesville
 Pembroke
 Greensboro
 Charlotte
 Highlands
 Durham
 Sanford
 Burlington
 Durham
 Charlotte
 Hendersonville
 Winston-Salem
 Davidson
 Winston-Salem
 Greensboro
 Durham
 Whiteville
 Sylva
 Greenville
 Charlotte

NP - Subsequent Applications administratively approved-

NURSE PRACTITIONER

Alderson, Joy Ann
 Anderson, Becky Carriker
 Anderson, Becky Carriker
 Bean, Alice Diann
 Beasley, Sara Young
 Behil, Theresa Delores
 Bell, Raegan Lewis
 Bertolette, Barry Lee
 Brooks, Helen Elizabeth
 Brown-Prestia, Patricia
 Carstarphen, Tracy Andrea
 Catchings, Susan Howard
 Cryer, Victoria J.M.
 Cryer, Victoria J.M.
 Cummings, Phillip Howard
 Dziwanowski, Jennifer J.S.
 Ellis, Allison Ingold
 Felts, Eva Jane
 Ford, Belinda Marie
 Fuller, Susan Apple

PRIMARY SUPERVISOR

Soliman, Safi Sobhy
 Brady Jr., Joseph Lawrence
 Ezzo, Stephen James
 Moore, Jeffrey Alan
 Sanchez, John Alberto
 Bowman, Michael Higgins
 Padula, Joseph Peter
 Smith, Douglas Graham
 Smith III, Henry W.B.
 Ford, Anne Cunanan
 Padula, Joseph Peter
 Schmidt, Jennifer Jean
 Kamaraju, Sreemahalakshmi
 Tharwani, Haresh Mohan Das
 Miles, David Ralph
 Pierce, Hubert Gaines
 Edmunds, John Howard
 Tomberlin, Kenneth Guy
 Tyler, Douglas Scott
 Moore, Donald Wilson

PRACTICE CITY

Fayetteville
 Charlotte
 Matthews
 Laurinburg
 Nags Head
 Raleigh
 Wilmington
 Wilmington
 Greensboro
 Durham
 Wilmington
 Cary
 Durham
 Durham
 Wilmington
 Trenton
 Greensboro
 Winston Salem
 Durham
 Summit

Fulwood, Karen Jackson	Padula, Joseph Peter	Wilmington
George, Jane W.	Thomas, Ricky Allan	Jacksonville
Giemza, Kristi Barrett	Padha, Vivek Pratap	Durham
Goodwin, Cynthia Marie	Warner, Craig	Raleigh
Goodwin, Cynthia Marie	Darkes, Leroy Scott	Raleigh
Goodwin, Cynthia Marie	Klinker, Michael Wayne	Cary
Harris, Jean Anne Harris	Lutman, Christopher Vaughan	Durham
Haynes, Christopher Paul	Bosken, Donald William	Thomasville
Hessenflow, Louise Harlow	Batish, Sanjay	Leland
Hildebran, Tracy Lowie	Agner, Roy Christopher	Salisbury
Jenkins, Kay Baker	Ghassemian, Jafar Nosrat	Fayetteville
Jernigan, Jolene Crouch	Moore, John William	Ocracoke
Jordan, Stephanie Gould	Green III, Arthur Gerrish	Greensboro
Keith, Ernestine Mann	Rushing, Dykes Taylor	Raleigh
Kelsey, Dwan Thompson	Hedrick, William Weston	Knightdale
Kelsey, Dwan Thompson	Bahadori, Reza	Cary
Kelsey, Dwan Thompson	Hussain, Mariyam Afrouz	Cary
Knotts, Sharon Maxine	Jackson, Anita Louise	Lumberton
Land, Stephanie Gretchen	Kicklighter, Stephen Downer	Raleigh
Largent, Lisa Inell	Taormina, Velma Villalon	Gastonia
Lefaive, Michael Francis	Smith, Douglas Graham	Wilmington
Loyack, Nancy Lawson	Hoening, Helen Marie	Durham
Lundrigan, Carol Jean	McKenzie, William Marshall	Lexington
MacLaren, Deanna E.	Albritton, Mark	Marion
Macon, Teresa Ann	Kindle, Kesi Tabia	Winston Salem
Masters, Tricia Kinsey	Corley, Charles Austin	Lenoir
McCoy, Adrian Jay	Shah, Devendra Chandulal	Albemarle
Moore, Tracy Lynn	Georgiev, Boyan Augelov	Wilmington
Osborne, Lori Cannon	Fath, Kenneth Alan	Burlington
Parris, Christopher Keith	Dawson, John Charles Stuart	Kings Mountain
Pennell, Todd Cougla	Davant, Charles, III	Blowing Rock
Pharr, Amy Kersh	McIlwain, Thomas Pinckney	Fayetteville
Porter, Lee Ward	Milam, Thomas	Wilmington
Pressley, Patricia Ann	Sweeney, Charlotte A.	Raleigh
Puglisi, Janis P.	Mook, Carolyn Ives	Morgantown
Rinkacs, Thomas J.	Watson, Linwood	Pembroke
Robinson, Caroline Bush	Lewis, Marvin	Spring Lake
Ruch, Julie Timmons	Chao, Nelson Jen An	Durham
Saunders, Rosalyn	Padula, Joseph Peter	Wilmington
Scott, Linda Dale	Horn, Christopher	Fayetteville
Skakey, Josette Marie	Neel, Jill Lynn	Charlotte
Small, Adrienne Yolanda	Mullen, Matthew Paul	Chapel Hill
Smith, Deborah Jean	Chrostowski, Dariusz	Murphy
Spinks, Carroll Conner	Osborne, James Charles	Greensboro
Starr, Tamara Louise	Padula, Joseph Peter	Wilmington
Stemen-Gallagher Mary Jane	Padula, Joseph Peter	Wilmington
Strickland, Irene Powell	Desai, Nitinchandra	Fayetteville
Thompson, Julie Ann	Powers, Mark Anthony	Durham
Trapp-Moen, Barbara Lee	Williams, Robert Ernest	Durham
Vaughan, Anita Jean	Taormina, Velma Villalon	Gastonia
Wekony, Melinda Carol	Gehris, John Martin	High Point

Wood, Kristine Lea
Young, Laura May

Kanelos, Dino Peter
Boehm, Marilyn Jean

Weddington
Jacksonville

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

LICENSING COMMITTEE REPORT

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

USMLE vs. LMCC (Licenciate of the Medical Council of Canada).

Catchline: Regulatory rule 32B .0305 states "To be eligible for license by endorsement of credentials, a physician shall possess a valid and unrestricted license to practice medicine in another state based on an examination testing general medical knowledge or passed an examination for license testing general medical knowledge (examination determined by the Board to be equivalent to the Board's examination). Original certification of passing scores shall be provided to the Board from the examination source. This means an applicant applying for license by endorsement based on the LMCC exam has to have a license in another state because the LMCC has not been deemed equivalent to USMLE which this Board adopted as its written examination at its inception in 1993. Inquiry to the FSMB reveals that no research has been conducted to determine if the exams used as the basis for the LMCC qualification are equivalent to USMLE, FLEX or National Boards. Efforts to research other licensing boards are in process to see whom, if any, endorse with the LMCC without requiring license elsewhere.

Committee Recommendation: The Committee recommends the Board accept LMCC as an adequate and equivalent examination to NCMB's examination – reference G.S. 90-10.

BOARD ACTION: Accept LMCC as an adequate and equivalent examination to NCMB's examination – reference G.S. 90-10.

USMLE – limit on number of attempts for each Step

Catchline: NCMB currently does not have a limit on the number of attempts an applicant takes to pass a Step of USMLE. We are starting to see applicants with numerous attempts, as high as 13 attempts on one Step. The FSMB recommends no more than 6 attempts on each step for psychometric validity reasons. See the "Classification Accuracy for Tests That Allow Re-takes" document put out by the National Board of Medical Examiners. 35 of 54 licensing boards have a set limit on the number of re-takes, ranging from 2 attempts to 6 attempts; 16 have no limit.

Committee Recommendation: The Committee recommends that the Board adopt a rule that would require passing USMLE at any sitting, within 6 attempts. After that applicants would be required to complete some form of remediation acceptable to the Board.

BOARD ACTION: Adopt a rule that will require passing USMLE at any sitting, within 6 attempts. After that applicants will be required to complete some form of remediation acceptable to the Board.

American Association of Physician Specialties

Catchline: The American Association of Physician Specialties (AAPS) has made a petition for a rule change to include their organization's certification be included in Rule 32B .0315. They have requested to appear before the Board to provide information and answer any questions. AAPS will provide background information prior to the presentation to be sent out on the Board CD.

Committee Recommendation: Allot 45 minutes (30 for presentation, 15 for Q&A) at the November meeting for an AAPS presentation.

BOARD ACTION: Allot 45 minutes (30 for presentation, 15 for Q&A) at the November meeting for an AAPS presentation.

Reimbursement for review of license by endorsement/exam applicants

Catchline: The Board previously decided that reimbursement for this task would be \$25.00 an hour.

Committee Recommendation: The Committee recommends reimbursement be set at \$25.00 per application.

BOARD ACTION: Notify Mr. Celentano that reimbursement will be set at \$25.00 per application reviewed, retroactive to September 1, 2004.

Question # 7 on the oral interview questions

Catchline: Question 7 on the interview sheet (oral questions asked at the personal interview) asks about "traffic violations."

Committee Recommendation: Change Question 7 to read: " Have you ever been convicted of any crime?" removing the words "including traffic violations."

BOARD ACTION: Change Question 7 to read: " Have you ever been convicted of any crime?" removing the words "including traffic violations." Add the question "Have you ever been charged with driving under the influence or while impaired?"

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

The Board reviewed 15 license applications. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

SPLIT BOARD LICENSURE INTERVIEWS

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

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

A motion passed to return to open session.

APPLICANTS PRESENTED TO THE BOARD

James Kevin Adgent	Jad Lee Davis	Justin Rodney Johnsen
Shahzad Ahmed	Tanika Lasien Day	JeRay James Johnson
Aletha Yvette Akers	Janet Kidd Dear	Victoria Gwynn Johnson
Muhammad Shah Alam	David Defeo	Richard Hughes Jones
Natalie Laura Albala	Holley Manbeck Dey	James Leslie Jordan
Todd Steven Albala	Richard DiNardo	Pongkiat Kankirawatana
Ansha Rhea Earle Alexander	Venkata Lakshmi Doniparthi	Vladimir Alexander Karpov
Curtis Jeffrey Alitz	Christopher Kent Dyke	Raghu Ramaiah Katuru
Warwick Aubrey Ames	Drew Aric Dylewski	Walter Keckich
Ketan Bipinchandra Amin	Sari George Eapen	James Richard Kerrigan
Soe Myint Aung	Shana Fay Egge	Rameshwarnaik Kethavath
Vijay Bhasker Reddy Baimeedi	Maria Teresa Evangelista-Dean	Kalsoom Kauser Khan
Poopak Ghassemi Bakhtiari	Michael Raymond Fox	Erik Lee Kinzie
Daniel Ray Barnes	Amanda Marie Froment	William R. Knaack
Jason Christopher Beland	Paul Joseph Furigay	Daniel Gregory Koch
Anat Bergner	Ramprasad Gadi	Lai Chow Kok
Stephanie Adriane Bernard	Michael Anthony Galletti	William Carl Koller
Manu Madhava Bhattatiry	Alison Rachel Gardner	Erin Elizabeth Krebs
Adolphus Solomon Bonar	Anne Elizabeth Gartner	Mercy Sara Kurapaty
Terri May Byrd	Todd Michael Getzen	Heston Channing LaMar
Jose Antonio Calvo Broce	Alfred Carl Gorman Sr.	Lance King Lassiter
John David Cameron	David Maxwell Gray	Lana Law
Osvaldo Arturo Camilo	James David Gregoire	Clara Nan-hi Lee
Leopold George Campbell	Catherine Ann Gruchacz	Timothy Cornelius Lee
Leander Cannick III	Prag Gupta	Kelly Harris Leggett
Victor Wei Turk Chen	Manoj Kumar Gupta	Manoj Suresh Lekhwani
Phyllis Ming Chen	Lori Annette Haigler	Yizhi Liang
Shabbir Ahmed Chowdhury	Clark Beryl Hanmer	Joel Tyrone Littles
David Ronald Clark	Nancy Richardson Hardie	Margaret Amanda Loda
Adrienne Charles Classen	Robin Lynette Hardie-Hood	Laura Lake Lupton
Alissa Marie Clough	Charles Scott Harris	Kenneth Parsons Lynch III
Michele Ann Cofield	Stephen James Hartsock	Kenneth Michael MacKinnon
Tracy Lynn Colchamiro	Ruthann Alethia Heron-Davis	Patricia Tatum Major
Christopher Charles Costa	Philip Edward Higgs	Farag Amin Farag Mankarios
Jonathan David Cowen	Jeffrey Curtis Hooper	Anthony Peter Manzon
Christopher Robin Cromwell	Alan Wade Horn	John Jeffrey Marshall
Christopher Lee Curzon	Ikechukwu Eric Ibegbu	Melanie Kristen Marshall
Nikki Daskalakis	Mark William Jalkut	Cedric Bienvenida Masa

William Kenneth Mask
Stephen Paul McClure
Matthew Scott McGlothlin
Eric Wayne McGraw
Gisele McKinney
Charles Allan McLaughlin III
David Barkley McQuade
Ara Dickran Metjian
Gregory Anthony Michaels
Scott Alan Miller
James Heath Miller
Nancy Colette Montz
Linda Howes Moran
Timothy Scott Mouser
Stephen Joseph Muehlenbein
Indira Marie Murr
Mark Bradley Murray
Herbert Louis Myles Jr.
Tariq Nazir
Paul Jorgen Nordness
Alfred Ejike Okeke
Chiedu Okocha
Akaninyene Sunday Okon
Makanjuola Iyiola Oladigbo
Joel Adedoyin Onafowokan
Adediji Oludayisi Osinloye
Pierce McIntyre Overman
Huw Owen-Reece
Juan Manuel Palma-Vargas
Rohit Prabhudas Panchal
Suvinay Bhalachandra
Paranjape
Leena Dilip Parikh
Prashant Pramod Parikh

Kumash Rajnikant Patel
Vikram Pramukhlal Patel
Divya Jatinkumar Patel
Chirag Harikrishna Patel
Milan Manu Patel
Suzanne Jennifer Pesce
Dean James Phillips DO
Tara Nichole Piech
Clark Edward Pritts
Sunita Sarin Przybylo
Hemalkumar Chandulal Ramani
Haroon Ilyas Rasheed
Scott Carter Richardson
Muhammad Zahid Rizwan
Marilyn Anne Roderick
Kathleen Marie Roeder
Joseph Gordon Rogers
Brian Todd Rose
Jennifer Leigh Roux
Michael Vaughan Rynne
David Scott Sachar
James Raymond Sancrant Jr.
Alexander Taro Schneider
William Geoffrey Starr Scott
Timothy Anthony Scully
Frank Sharp
James Hall Sheerin
Ritchie Carr Shoemaker
Gary Wardner Sims
Jay Allen Singleton
Kaycee Michelle Sink
Daniel Chadwick Sizemore
David Lewis Smith
Ralph Joseph Smith

Darley Jelgin Solomon Jr.
Matthew Thomas Spragg
Robert Edward Stambaugh
John Hubert Stewart IV
David Edward Stickler
Muruganathan Pudunagar
Subbiah
Jonathan Rudi Swinger
Melissa Lynn Taylor
Nilima Pareshkumar Thakkar
Ashley Maner Tonidandel
Melanie Eileen Kirk Trost
William Edward Turton
Chukwudi Boyce Uchendu
Miller John van Vliet
Rupashree Varadarajan
Michael Ian Vengrow
Joseph Edward Wagstaff
Scott Christopher Wallace
Stanley Suchy Wang
Eloise Bolyn Watson
Charles Marshall Webb
Brandon Christopher Whiteside
Kirk Child Wilhelmsen
Kia Jeanell Williams
Michael Glenn Wolford
Wayne Francis Yakes
Esther Yaniv
David Allan York
Catherine Sou-Mei Young
Steven Alexander Yukl

LICENSES APPROVED BY ENDORSEMENT AND EXAM

James Kevin Adgent
Shahzad Ahmed
Aletha Yvette Akers
Muhammad Shah Alam
Natalie Laura Albala
Todd Steven Albala
Ansha Rhea Earle Alexander
Curtis Jeffrey Alitz
Ketan Bipinchandra Amin
Soe Myint Aung
Vijay Bhasker Reddy Baimeedi
Poopak Ghassemi Bakhtiari
Daniel Ray Barnes
Jason Christopher Beland

Anat Bergner
Stephanie Adriane Bernard
Manu Madhava Bhattatiry
Adolphus Solomon Bonar
Terri May Byrd
Jose Antonio Calvo Broce
John David Cameron
Osvaldo Arturo Camilo
Leopold George Campbell
Leander Cannick III
Victor Wei Turk Chen
Phyllis Ming Chen
Shabbir Ahmed Chowdhury
David Ronald Clark

Adrienne Charles Classen
Alissa Marie Clough
Michele Ann Cofield
Tracy Lynn Colchamiro
Jonathan David Cowen
Christopher Lee Curzon
Nikki Daskalakis
Jad Lee Davis
Tanika Lasien Day
Janet Kidd Dear
David Defeo
Holley Manbeck Dey
Richard DiNardo
Christopher Kent Dyke
Drew Aric Dylewski
Shana Fay Egge
Maria Teresa Evangelista-Dean
Michael Raymond Fox
Amanda Marie Froment
Paul Joseph Furigay
Michael Anthony Galletti
Alison Rachel Gardner
Anne Elizabeth Gartner
Todd Michael Getzen
Alfred Carl Gorman Sr.
James David Gregoire
Catherine Ann Gruchacz
Prag Gupta
Manoj Kumar Gupta
Lori Annette Haigler
Robin Lynette Hardie-Hood
Charles Scott Harris
Stephen James Hartsock
Ruthann Alethia Heron-Davis
Philip Edward Higgs
Alan Wade Horn
Ikechukwu Eric Ibegbu
Mark William Jalkut
Justin Rodney Johnsen
JeRay James Johnson
Victoria Gwynn Johnson
Richard Hughes Jones
Pongkiat Kankirawatana
Walter Keckich
James Richard Kerrigan
Rameshwarnaik Kethavath
Kalsoom Kauser Khan
Erik Lee Kinzie
William R. Knaack
Daniel Gregory Koch
Lai Chow Kok

William Carl Koller
Erin Elizabeth Krebs
Mercy Sara Kurapaty
Heston Channing LaMar
Lance King Lassiter
Lana Law
Clara Nan-hi Lee
Timothy Cornelius Lee
Kelly Harris Leggett
Manoj Suresh Lekhwani
Yizhi Liang
Joel Tyrone Littles
Margaret Amanda Loda
Laura Lake Lupton
Kenneth Parsons Lynch III
Kenneth Michael MacKinnon
Farang Amin Farag Mankarios
Anthony Peter Manzon
John Jeffrey Marshall
Cedric Bienvenida Masa
Stephen Paul McClure
Matthew Scott McGlothlin
Eric Wayne McGraw
Gisele McKinney
Charles Allan McLaughlin III
Ara Dickran Metjian
Gregory Anthony Michaels
Scott Alan Miller
James Heath Miller
Nancy Colette Montz
Linda Howes Moran
Timothy Scott Mouser
Stephen Joseph Muehlenbein
Indira Marie Murr
Mark Bradley Murray
Herbert Louis Myles Jr.
Tariq Nazir
Alfred Ejike Okeke
Chiedu Okocha
Akaninyene Sunday Okon
Makanjuola Iyiola Oladigbo
Joel Adedoyin Onafowokan
Adediji Oludayisi Osinloye
Rohit Prabhudas Panchal
Suvinay Bhalachandra Paranjape
Leena Dilip Parikh
Kumash Rajnikant Patel
Vikram Pramukhlal Patel
Divya Jatinkumar Patel
Chirag Harikrishna Patel
Milan Manu Patel

Suzanne Jennifer Pesce
Dean James Phillips DO
Tara Nichole Piech
Clark Edward Pritts
Sunita Sarin Przybylo
Hemalkumar Chandulal Ramani
Scott Carter Richardson
Muhammad Zahid Rizwan
Marilyn Anne Roderick
Joseph Gordon Rogers
Brian Todd Rose
Jennifer Leigh Roux
Michael Vaughan Rynne
David Scott Sachar
James Raymond Sancrant Jr.
Alexander Taro Schneider
William Geoffrey Starr Scott
Timothy Anthony Scully
Frank Sharp
James Hall Sheerin
Ritchie Carr Shoemaker
Gary Wardner Sims
Jay Allen Singleton
Kaycee Michelle Sink
Daniel Chadwick Sizemore
Darley Jelgin Solomon Jr.
Robert Edward Stambaugh
John Hubert Stewart IV
David Edward Stickler
Murugananthan Pudunagar Subbiah
Melissa Lynn Taylor
Nilima Pareshkumar Thakkar

Ashley Maner Tonidandel
Melanie Eileen Kirk Trost
Miller John van Vliet
Rupashree Varadarajan
Michael Ian Vengrow
Joseph Edward Wagstaff
Scott Christopher Wallace
Stanley Suchy Wang
Eloise Bolyn Watson
Brandon Christopher Whiteside
Kirk Child Wilhelmsen
Kia Jeanell Williams
Michael Glenn Wolford
Esther Yaniv
David Allan York
Catherine Sou-Mei Young
Steven Alexander Yukl

Reactivation

James Leslie Jordan

Reinstatement

Sari George Eapen
Clark Beryl Hanmer
William Kenneth Mask

Faculty Limited License

Warwick Aubrey Ames
Huw Owen-Reece

Retired Volunteer License

Kathleen Marie Roeder

RE-ENTRY SUBCOMMITTEE REPORT

EK Fretwell, PhD, Chair; Robert Moffatt, MD; Michael Norins, MD

The Re-entry SubCommittee of the North Carolina Medical Board was called to order at 5:20 p.m., Wednesday, September 22, 2004, at the office of the Board. Members present were: EK Fretwell, PhD, Chair; Robert Moffatt, MD; and Michael Norins, MD. Also attending were: Walter Pories, MD, Medical Board Past President/Consultant; Jesse Roberts, MD, Medical Director (Staff); Joy Cooke, Licensing Director (Staff); Thomas Mansfield, JD, Director, Legal Department (Staff); and Mr. Jeffery T. Denton, Board Recorder (Staff).

The July 22, 2004 committee minutes were reviewed and accepted.

At the July 2004 meeting it was decided that the next steps would be to prepare two separate "messages" to be sent out over the President's signature. One would be to other boards, associations, organizations and the Federation of State Medical Boards, and the other would be to a select list of foundations (such as Duke, Reynolds, Robert Wood Johnson, etc.) informing

them of what we are doing but not seeking funds at this time.

AIM ExecNet Survey Results

An ExecNet was sent out to other states asking the following: "The North Carolina Medical Board is soliciting information regarding what your board is doing to evaluate preparedness to return to practice of physicians and physician assistants who have been out of active practice for a significant period of time for legitimate reasons (parenting, health, etc.) not related to disciplinary action. Please let us know what you are doing or considering in this area (laws, rules, regulations, task force, etc.). Thank you in advance for your time and input."

Twenty-one states responded. The results were graphed and reviewed. The following was noted: (1) Only six states have "specific" statutory authority on this issue, (2) the majority of states use the SPEX/COMVEX as a re-entry evaluation tool, and (3) most states felt that two years out of active practice was "dated." It was also duly noted that more data is needed.

Action: Dr. Fretwell will get in touch with James N. Thompson, MD, President/CEO, Federation of State Medical Boards as follow-up to information that was requested during his visit to the Board in July 2004.

Foundation Letter

The proposed final draft of the "foundation letter" was distributed and reviewed. Dr. Fretwell suggested that we might want to add a sentence near the end of the letter to the effect of "if you would be so kind to identify the appropriate person in your organization with whom we could correspond to regarding this issue." This was generally agreed to.

Dr. Pories suggested we add back the statement "There are many good reasons why a licensee may be temporarily out of practice, including, among others, parenting, marital issues, health problems, and personal concerns." He believes that even the foundations that are familiar with this issue may not realize that these absences can be due to family problems. It was generally agreed to add this sentence back in.

Action: Mail the letters after the above changes are made.

Other Organizations

Dr. Pories stated he believes we will get some good responses from other organizations. He will bring up this issue at the next meeting of the American College of Surgeons. Dr. Pories also suggested writing the American Dental Association. Dr. Norins interjected that we should be careful with any information we get from voluntary professional associations because their interest may be to get their people back into the work force as quickly as possible vs. a regulatory agenda.

Dr. Roberts stated that Dr. Cindy Johnson will soon be the President of the American Board of Medical Specialties (ABMS) and that he had a recent conversation with her regarding the relationship between licensure and certification. He relayed to her that the American Board of Orthopedic Surgery indicated to him that they had no interest or enthusiasm for linking certification/recertification and licensure in any way. He continued that Dr. Johnson was surprised and said she knew the Executive Director of the American Board of Orthopedic Surgery and she would speak with him about this. It was surmised by the committee that Dr. Johnson might provide a connection to every specialty board via the ABMS umbrella.

Approach

Mr. Mansfield stated the committee needs to make a threshold decision on what approach to take. One choice is to work within the current system in a makeshift fashion to force re-entry evaluation and remediation, which will leave a gap where there is no basis for denial other than a lapse in practice and the applicant is uncooperative. The other choice is to pursue legislative change and, if necessary, rule-making in order to specifically authorize the Board to require re-entry evaluation and remediation from applicants with a lapse in practice.

Dr. Norins stated that we should move along with the aim of shooting for statutory authority to give grounds for denial of these type applications. He stated that as we gather information we may learn there is support for this concept and get the fuel to go to the legislature for the change.

Dr. Pories interjected that this may or may not happen for three or four years with the current process. We need to figure out what we want to do and see if a law is needed to accomplish our objectives.

The Road to Active Practice

Dr. Pories stated that the ideal of mini-residency programs is a terrific idea but can't realistically be done due to insurance issues, etc. He believes there needs to be a three-step process for licensure in the case of re-entry candidates.

Cognitive – ABMS certification/recertification tests

Technical – Ethicon and U.S. Surgical providing laboratory for practicing technical skills

Training – Shadow practitioners in training programs for several weeks and the chair writes a letter to the Board

It was noted by committee members that this process would not be an easy road. ABMS would have to allow use of their certification tests and what type of license would an applicant use to shadow a specialty group or different departments at training programs like Duke? Mr. Mansfield believes that the best way for the Board to issue a license that would permit the remediation is to use a public consent order issuing a license but limiting that license as necessary for public protection. This is better than using private, non-public agreements.

The consensus was that there will be many issues to work out.

Actions: (1) Dr. Pories will be speaking with the American College of Surgeons, (2) Dr. Roberts is to get back in touch with Dr. Johnson and relay the Board's endeavor to use the ABMS certification/recertification tests as part of the re-entry criteria process, (3) Dr. Fretwell is to write a letter to Dr. Thompson, and (4) Dr. Pories will be in contact with Ethicon and U.S. Surgical.

There being no further business, the meeting adjourned at 6:10 p.m. The next meeting of the Re-Entry SubCommittee is tentatively set for 5:00 p.m., Wednesday, November 17, 2004.

COMPLAINT COMMITTEE REPORT

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

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

The Complaint Committee reported on 181 complaint cases. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

MALPRACTICE COMMITTEE REPORT

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

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

The Malpractice Committee reported on 33 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

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

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

The Board reviewed 50 cases involving participants in the NC Physicians Health Program. The Board adopted the committee's recommendation to approve the written report. The specifics of this report are not included as these actions are not public information.

A motion passed to return to open session.

INVESTIGATIVE COMMITTEE REPORT

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

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

The Investigative Committee reported on 76 investigative cases. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

INFORMAL INTERVIEW REPORT

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

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

A motion passed to return to open session.

ADJOURNMENT

This meeting was adjourned on September 24, 2004.

Robert C. Moffatt, MD
Secretary