

Adverse Actions Report May 2023 – June 2023

The digital edition of the *Forum* presents a two-month report of recent adverse actions. This report does not include non-adverse action such as reentry agreements or relief of consent order obligations. To view all public actions, visit www.ncmedboard.org/BoardActions.

Name/license #/location	Date of action	Cause of action	Board action
ANNULMENTS			
NONE			
SUMMARY SUSPENSIONS			
NONE			
REVOCATIONS			
NONE			
SUSPENSIONS			
KELLY, Margaret, MD (200700808) Morrisville, NC	06/22/2023	MD has a history of alcohol use disorder, resulting in indefinite suspension of her license in 2019. MD participated and had been fully compliant with her North Carolina Professionals Health Program (NCPHP) contract and, in 2021, her license was reinstated. MD was required to maintain and abide by her NCPHP contract including refraining from the use or possession of alcohol and all other mind or mood-altering substances. Following a negative patient interaction in January 2023, MD admitted her return to alcohol use and has since sought and completed treatment. MD requested that her	Indefinite Suspension; MD may not apply for reinstatement for a minimum of twelve months
RANDALL, Wendell Lewis, MD	06/09/2023	license be made inactive. Following a complaint	Suspension; stayed with
(000036016) Millers Creek, NC	00/03/2023	from a physician in 2019	conditions
(33333337) Willers Creek, IVe		regarding MD's	Conditions
		controlled substance	
		prescribing and	
		notification from the	



	T	December 1 CH 101	
		Department of Health	
		and Human Services	
		(DHHS) that MD was a	
		top opioid prescriber in	
		the state, the Board	
		obtained and reviewed	
		five of MD's patient	
		records. Those records	
		reveal that MD's care of	
		the patients, all of whom	
		received narcotics for	
		chronic pain, failed to	
		meet the standards of	
		acceptable and	
		prevailing medical	
		practice in NC.	
		Specifically, MD's	
		records fail to discuss or	
		attempt alternatives to	
		opioid therapy for	
		chronic pain, including	
		attempting non-narcotic	
		therapies and nerve	
		blocks. Nor do the	
		records reflect any effort	
		to decrease the amount	
		of controlled substances	
		patients were taking In	
		addition, MD failed to	
		address abnormal urine	
		drug screens indicating	
		possible patient misuse	
		or diversion. In	
		September 2021, the	
		Virginia Board of	
		Medicine reprimanded	
		MD for poor supervision	
		of two nurse	
		practitioners who	
		practiced at pain clinics	
		in Southwestern VA.	
MANNA Michael Jahra DA C	06/27/2022		Indofinito Cuanciaria
WINN, Michael John, PA-C	06/27/2023	In a July 2019 Consent	Indefinite Suspension
(001000472) Roseboro, NC		Order, the suspension of	
		PA's license was stayed,	
		except for a period of	
		sixty days. The terms and	
		conditions of the Order	
		dictated that PA	



		maintain his contract	
		with NCPHP and	
		document that a	
		chaperone was present	
		any time he examined a	
		female patient. PA	
		closed his practice on	
		April 4, 2022, but	
		continued to treat	
		patients and write	
		prescriptions for both	
		controlled and non-	
		controlled substances.	
		PA admitted making	
		home visits to patients,	
		including unchaperoned	
		female patients, after he	
		no longer had access to	
		their medical records. A	
		Board review of five of	
		PA's medical records	
		revealed that PA failed at	
		times to record vital	
		signs, document a	
		physical examination,	
		document querying the	
		NCCRS, or attempt	
		alternative treatment	
		modalities before	
		initiating opioids, often	
		at high dosages. PA's	
		failure to have a	
		chaperone present	
		violated the 2019	
		Consent Order. An	
		outside review of PA's	
		charts found that his	
		prescribing failed to	
		conform to acceptable	
		standards of care.	
LIMITATIONS/CONDITIONS			
_	06/29/2023	In March 2022, MD was	Non-Disciplinary
(200601183) Charlotte, NC		arrested for Driving	Consent Order; MD
		While Impaired. As a	shall maintain his
		result, the Board ordered	current contract with
		him to submit to an	NCPHP and abide by its
		examination at the North	terms
ı		Carolina Professionals	



COLLINS, Roger Steward, MD (200500353) Raleigh, NC	05/22/2023	Health Program (NCPHP). In July 2022, MD signed a six-month monitoring contract with NCPHP in which he agreed to abstain from the use of alcohol. In October 2022, he tested positive for alcohol. The Board ordered MD to have a comprehensive examination. MD successfully completed residential treatment in February 2023. MD did not practice medicine from October 2022 to March 2023 in order to focus on his recovery. In March 2023 he signed a five-year monitoring contract with NCPHP. NCPHP supports MD's return to the practice of medicine. In 2019 and 2020 four patients (Patients A-D) complained about the care they received from MD. Patient A developed an infection and was	Non-disciplinary Consent Order; MD shall maintain his October 11, 2022, Agreement and abide by its terms
_	05/22/2023	In 2019 and 2020 four patients (Patients A-D) complained about the care they received from MD. Patient A developed an infection and was unhappy with her surgical results and post operative care following breast augmentation. Patient A also asserted that MD failed to timely provide her medical records. Following a "Body Tite" liposuction procedure, Patient B	Consent Order; MD shall maintain his October 11, 2022,
		developed an infection and was unable to get another appointment with MD. During Patients C and D's procedures MD left the operating room a number of times, which	



		was confirmed by an	
		employee. MD was	
		diagnosed with several	
		conditions, which	
		needed to be addressed.	
		In October 2022, MD	
		signed an agreement	
		wherein he agreed to	
		maintain a plan of	
		structured, collaborative,	
		and coordinated care	
		with his local psychiatrist	
		and psychotherapist. MD	
		must also have an	
		approved peer practice	
		monitor.	
HARMON, Patrick Hugh, MD	05/22/2023	In November 2021, MD	Consent Order: MD
(201301991) Winston-Salem, NC		was arrested and	shall maintain his
		charged with driving	current contract with
		while impaired. In	NCPHP and abide by all
		October 2022, MD	of its terms and
		consumed alcohol in	conditions
		violation of his January	
		2022 NCPHP contract.	
		Shortly thereafter, he	
		stopped practicing	
		medicine so he could	
		address the issues	
		surrounding his alcohol	
		consumption. MD	
		complied with	
		recommendations of a	
		recovery center and	
		signed a second NCPHP	
		contract which will last	
		until February 2028.	
QUINTANA, Oscar Francisco, MD	06/29/2023	MD has a history of	Amended Consent
(202202240) Chapel Hill, NC	00,25,2025	substance use disorder.	Order; MD shall
(202202270) Chaper rim, NC		After his relapse in	maintain his current
		January 2020, he	contract with
		recommitted to his	NCPHP and abide by all
		recovery. In February	of its terms
		2023, MD requested that	OF ILS LETTIS
		the Board relieve him of	
		paragraphs 1(a) and 1(b)	
		of the 2022 Consent	
		Order, which limited his	
		practice of medicine to	



		addiction modicing at lain	
		addiction medicine at his	
		UNC School of Medicine Addiction Medicine	
		fellowship or an	
		institutional healthcare	
		setting approved by the	
		Board. MD desires to	
		become board certified	
		in addiction medicine,	
		which requires that he	
		first regain his board	
		certification in	
		anesthesiology. MD	
		signed a five-year	
		monitoring contract and	
		NCPHP supports his	
		request to be relieved of	
		the specified sections of	
		the 2022 Consent Order.	
ROGATNICK, Lewis Andrew, MD	05/05/2023	MD has active medical	License issued with
(202301110) Clayton, NC		licenses in New York and	reentry agreement
		Virginia and has had	
		adverse actions taken	
		against him by health	
		care institutions and	
		regulatory agencies. MD	
		has not had any adverse	
		action taken against him	
		by any healthcare entity	
		since January 2012. MD	
		has not practiced	
		medicine since May 2021	
		and recognizes the	
		benefit of a reentry plan	
		to assist him back into	
		the practice of medicine.	
SINGH, Suniljit, MD (201100352)	05/30/2023	In June 2016, MD was	Non-disciplinary
Columbus, NC		arrested for Driving	Consent Order; MD
		While Impaired (DWI). As	shall maintain his
		a result, the Board	current contract with
		ordered MD to submit to	NCPHP and abide by its
		a comprehensive	terms
		examination at the North	
		Carolina Professionals	
		Health Program	
		(NCPHP). At that time,	
		NCPHP opined that MD	
		did not have an alcohol	
	L		



		use disorder and did not recommend any further assessment, treatment, or monitoring. The Board issued MD a private letter of concern in November 2016 based on the DWI arrest. In January 2023, MD was again charged with DWI. The Board ordered MD to submit to a comprehensive examination. He was found to have a moderate alcohol use disorder and was recommended for residential treatment. MD successfully completed residential treatment in May 2023 and signed a five-year monitoring contract. NCPHP supports MD's return to the practice of medicine.	
STEVENS, Scott Xavier, MD (202301637) Bend, OR	06/12/2023	MD is currently actively licensed in Oregon. In July 2022, MD entered into a non-disciplinary Corrective Action Agreement with the Oregon Medical Board, in which he agreed to complete courses in cataract surgery and charting. Additionally, MD agreed to enter into a practice mentorship for cataract surgeries with an approved ophthalmologist who would meet with him monthly, review his charts, and provide quarterly reports to the Oregon Board. The	License issued with terms, restrictions and conditions



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		courses have been	
		completed but MD has	
		not engaged in the	
		cataract surgery practice	
		mentorship by choice	
		and has not done	
		cataract surgeries since	
		March 2022.	
THOMPSON, Robert Bruce, MD	6/13/2023	MD has a history of	License reinstated with
(000040006) Charlotte, NC		alcohol use disorder and	conditions
		psychiatric health	
		problems. As a result,	
		MD has an extensive	
		history with the Board,	
		including multiple	
		suspensions and	
		conditions on his license.	
		Following a relapse in	
		June 2009, MD	
		voluntarily surrendered	
		his NC medical license	
		and has not practiced	
		medicine since that time.	
		MD is currently in	
		recovery and has	
		abstained from alcohol	
		use since 2017.	
TOBIN , Paul Christopher, MD (000036129) Burlington, NC	05 /12/2023	In July 2022, MD entered into a Consent Order with the Board in which his NC medical license was indefinitely	License reinstated; MD shall maintain his current contract with NCPHP and abide by its terms
		suspended. MD has complied with all terms and conditions of his	
		2022 Consent Order, including entering into	
		and maintaining a	
		monitoring contract with	
		the North Carolina	
		Professionals Health	
		Program (NCPHP). MD is	
		in compliance with his	
		monitoring contract and	
		NCPHP advocates for	
		MD's reinstatement.	
REPRIMANDS		o i cinstatementi	
AGHA, Maher Salah, MD	05/15/2023	The Board received	Reprimand; Within 30-
AGHA, IVIANCI SAIAN, IVID	02/12/2023	THE BOATU TECEIVEU	Reprimana, Within 50-



(20000062) Charlotte, NC		complaints from the	days MD shall schedule
(spouses of two of MD's	a comprehensive
		patients alleging that MD	competency
		inappropriately treated	examination
		their husbands. (Patients	CAGITITIO (1)
		A and B) Between	
		September 2019 and	
		November 2020 MD	
		prescribed at least thirty-	
		four medications to	
		Patient A. Prescriptions	
		were filled at pharmacies	
		in New York, Florida and	
		South Carolina. At least	
		twenty-four of these	
		prescriptions were controlled substance	
		medications. MD treated	
		Patient B from August	
		2020 to September 2021	
		for chronic pancreatitis	
		and anxiety disorder. Patient B was also noted	
		to have a substance use	
		disorder. The Board had	
		MD's care of both	
		patients reviewed by an	
		independent medical	
		expert who had concerns	
		and criticisms of the care	
		MD rendered to both	
		patients. Specifically, MD	
		did not appropriately	
		document a history,	
		physical examination,	
		laboratory tests or an	
		ongoing working	
		diagnosis. Further, this	
		expert felt that MD	
		should have been more	
		pharmacovigilant with	
		both patients while	
		prescribing controlled	
		substances and offer	
		alternate and	
		supplemental treatment	
		options for pain.	
BIVINS, Don Howard, MD	06/09/2023	In December 2016, the	License reinstated with



(009801256) Hillsville, VA Virginia Board of Reprimand Medicine reprimanded, fined and required that MD complete CME. The Virginia Board's Order was based on MD's aiding and abetting the unlicensed practice of medicine by allowing unlicensed individuals to assess patients and/or make patient decisions at the clinic; and inappropriately prescribing controlled substances, including, but not limited to, failing to perform adequate physical examinations, evaluations, or assessments, failing to obtain prior treatment records and patient history, failing to order diagnostic testing or studies, and failing to recognize or address signs of drug-seeking behavior. MD complied with all the terms and conditions of the 2016 Virginia Order, and in March 2018, the Virginia Board terminated the terms and conditions placed on MD's Virginia medical license. In December 2017, the Florida Board of Medicine reprimanded, fined, and required MD to complete a laws and rules course based on his failure to report the Virginia Board's action to the Florida Board within 30 days. MD complied

with all the terms and



		conditions of the Florida	
DIMANA December 11	06/20/2022	Board Order.	Danisha and MAD deall
RIMAWI, Bassam Husam, MD	06/20/2023	In September 2022, MD	Reprimand; MD shall
(201901840) Raleigh, NC		was driving home when	maintain his current
		he became involved in	contract with NCPHP
		an altercation involving	and abide by its terms
		another driver. MD	
		stopped his vehicle in a	
		construction zone, got	
		out of his vehicle, and	
		approached the vehicle	
		of a driver he claimed	
		had cut him off. MD had	
		a verbal exchange with	
		the other driver, and this	
		exchange escalated to	
		the point where MD	
		struck the other driver,	
		who was still seated in	
		his vehicle, multiple	
		times with his fist. MD	
		then got back into his car	
		and drove away without	
		calling 911. The Board	
		ordered MD to submit to	
		an examination at the	
		North Carolina	
		Professionals Health	
		Program (NCPHP). As a	
		result of a	
		comprehensive	
		examination, and	
		recommendations, MD	
		signed a one-year	
		behavioral monitoring	
		contract with NCPHP.	
SAGE, Nancy Nicola, MD	06/07/2023	In November 2022, MD	Reprimand
(201401740) Smithfield, NC		entered into a Consent	
		Agreement with the New	
		York State Board for	
		Professional Medical	
		Conduct regarding her	
		care of four patients.	
		MD's New York medical	
		license was suspended	
		for thirty-six months,	
		stayed in full and placed	
		on probation for thirty-	
	1	on probation for timey	l



		six months with	
		conditions including a	
		practice monitor	
		requirement and	
		successful completion of	
		Continuing Medical	
		Education. MD failed to	
		reference the New York	
		investigation on her NC	
		annual renewal	
		applications for the years	
		2020, 2021, and 2022.	
SLAERNO, Edward Leonard, MD	06/16/2023	In January 2022, MD was	Reprimand
(202004595)		terminated from	
		Northern Regional	
		Hospital of Surry County	
		(Northern Hospital). The	
		termination was later	
		deemed to be without	
		cause. Northern	
		Hospital's review of	
		Closed-Circuit Television	
		(CCTV) video footage of	
		MD's interactions with	
		patients was inconsistent	
		when compared to his	
		medical record and	
		billing documentation.	
		Additionally, MD's NC	
		medical license lapsed	
		after he decided not to	
		renew his license in	
		2022. MD states that he	
		allowed his NC medical	
		license to lapse because	
		he moved to another	
		state. However, per	
		federal law, any	
		inactivation of a medical	
		license when the	
		licensee is aware of an	
		ongoing licensing board	
		investigation is	
		reportable to the	
		National Practitioner	
		Data Bank. MD states	
		that he was not aware	
		that non-renewal was a	
	<u> </u>	tilat libii-lellewal was d	



		reportable event.	
STAICU , Irina, DO (202100641)	05/15/2023	Based on another	Reprimand
Philadelphia, PA		Board's action. DO	·
• •		received a Reprimand	
		from the Pennsylvania	
		State Board of Medicine	
		for providing inaccurate	
		physician address	
		information on her	
		application to become a	
		certifying practitioner for	
		Medical Cannabis.	
WILKINS, Ezra Brooks, MD	05/22/2023	Due to the worsening	Reprimand
(00020220) Raleigh, NC		condition of an abscess,	
		about which she had	
		been in contact with MD,	
		a patient presented to	
		MD's office in	
		September 2021, for an	
		examination. Patient was	
		not provided a medical	
		gown or drape. She	
		removed her pants and	
		exposed the abscess on	
		her buttocks to MD. MD	
		examined Patient	
		unchaperoned. Patient	
		contends that while	
		alone in the examination	
		room with her, MD made	
		inappropriate contact	
		with her in an attempt to	
		express affection. MD's	
		attempts at affection were unwelcomed by	
		Patient and made her	
		uncomfortable. MD	
		denies the allegations	
		made by Patient. Due to	
		health-related reasons,	
		MD inactivated his NC	
		medical license effective	
		June 1, 2023. MD has	
		practiced medicine for	
		approximately 48 years	
		in good standing with	
		the Board.	
WILLIS, Brenda Sue, MD	06/20/2023	In September 2021, the	Reprimand



(201002109) Lincolnton, NC Board received a complaint alleging that MD was prescribing controlled substances in an inappropriate manner. The Board obtained five patient records for review by an independent medical expert who found that MD treated one of the five appropriately. However, the expert opined that MD's treatment of the remaining four patients was below the accepted and prevailing standard of care. MD should have made better efforts to wean patients off benzodiazepines when they were receiving an opioid medication at the same time. MD treated these patients for conditions outside of her specialty in psychiatry, such as allergic rhinitis, urinary tract infection, ear infection and menopause, and did not keep adequate records regarding such treatment. MD conducted urine drug testing of her substance use disorder patients who received medication assisted treatment at a frequency that is more than appropriate. NCPHP offered MD a monitoring contract to assist her with issues surrounding her medical practice that generally relate to this investigation.



06/30/2023	The Board had the care of five patients who MD treated predominantly with testosterone replacement therapy reviewed by an independent medical expert. These five patients include MD and an immediate family member. The expert opined that MD's documentation of care for all five patients failed to conform to the standards of accepted and prevailing medical practice in NC. Specifically, MD should have documented in a more detailed way any history of hypogonadism related symptoms. He should have documented all testosterone levels, physical examinations, discussion of treatment options and follow-up laboratory work. Additionally, MD prescribed a single controlled substance medication to himself and prescribed eight controlled substance mediations to the patient who is an immediate family member. MD violated Board rules when he prescribed controlled.	Public Letter of Concern
	06/30/2023	of five patients who MD treated predominantly with testosterone replacement therapy reviewed by an independent medical expert. These five patients include MD and an immediate family member. The expert opined that MD's documentation of care for all five patients failed to conform to the standards of accepted and prevailing medical practice in NC. Specifically, MD should have documented in a more detailed way any history of hypogonadism related symptoms. He should have documented all testosterone levels, physical examinations, discussion of treatment options and follow-up laboratory work. Additionally, MD prescribed a single controlled substance medication to himself and prescribed eight controlled substance mediations to the patient who is an immediate family member. MD violated



		substances to himself	
		and a member of his	
		immediate family.	
CLICIAL Lloothor Lyn MD	06/00/2022	The Board is concerned	Lineman inquad with
CUGINI, Heather Lyn, MD	06/09/2023		License issued with
(202301591) Virginia Beach, VA		that MD was	Public Letter of Concern
		reprimanded by the	
		Missouri Medical Board	
		in September 2019. The	
		Missouri Board's action	
		was based on MD's	
		failure to properly	
		manage the labor and	
		birth of two different	
		mothers and their	
		infants. Specifically, the	
		Missouri Board found	
		that MD's care	
		constituted conduct or	
		practice that is or might	
		be harmful or dangerous	
		to a patient. In one case	
		MD failed to examine or	
		attend to a patient	
		during labor and to	
		appropriately treat the	
		risk of infection. In	
		another case, MD failed	
		to examine or attend to	
		a patient during a trial of	
		labor after cesarean	
		delivery and relied on	
		nursing staff to counsel	
		patient about fetal	
		monitoring and	
		amnioinfusion.	
DAVE, Nailesh Dilipkumar, MD	06/29/2023	The Board is concerned	Public Letter of
(009900027) Lillington, NC		that MD failed to	Concern; MD to
, , ,		document Quality	complete CME courses
		Improvement (QI)	in documentation, APP
		meetings for the APPs	Supervision, and
		that he employs and	prescribing totalling six
		supervises at his	hours.
		practice. MD reports	110013.
		that he routinely	
		•	
		provided training to and	
		ongoing supervision of	
		his APPs, including	
		discussing quality of care	



		I	
		issues. However, the	
		Board requires QI	
		meetings to be	
		documented and	
		maintained by supervisor	
		and APPs.	
ERRICO, William Ryan, DO	06/21/2023	The Board is concerned	Public Letter of Concern
(202301754) Tonasket, WA		that in April 2022 DO	
		was required by the	
		Washington Medical	
		Commission to attend a	
		Professional/Problem-	
		Based Ethics Course and	
		pay a fine. This action	
		was based on boundary	
		violation allegations	
		made to the Washington	
		Commission that from	
		October to November	
		2020 DO reached out to	
		a patient over social	
		media and then engaged	
		in a non-therapeutic	
		relationship with the	
		patient, including inviting	
		the patient to join him at	
		his office for the	
		weekend. The Board	
		notes that DO completed	
		the terms of the	
		Stipulation as of August	
		2022. Additionally, by	
		failing to disclose the	
		action described above,	
		he entered into an	
		Agreed Order with the	
		Kentucky Board of	
		Medical Licensure in	
		March 2023 in which he	
		was fined.	
FRENCH, Keisha Latoya, MD	05/05/2023	The Board is concerned	Public Letter of Concern
(201700857) Raleigh, NC	, -,	about MD's care of a 22-	
		year-old female patient	
		who presented in her	
		38th week of pregnancy	
		for a prenatal	
		appointment with	
		complaints of a	
		Complaints of a	



headache and toothache for the prior four days. Patient's elevated blood pressure was documented but not shared with MD. A phone call from Patient to the practice group's triage line the next day was not communicated to the doctor. When Patient presented in her 39th week of pregnancy to MD's office for a prenatal appointment her blood pressure was 161/111 and her urine now showed 1+ proteinuria. On this day, MD sent Patient to a hospital for a preeclampsia workup and induction of labor. Patient went to a hospital that day and her child was delivered. The Board's independent medical expert reviewer opined that MD's treatment of Patient was within the standard of care. However, MD's diagnosis, records, and overall care of Patient fell below that standard of care. Specifically, MD should have referred Patient for a preeclampsia workup in light of her elevated blood pressure during her 38th week visit. Also, MD's medical record documentation for Patient's visit was incomplete. The Board notes that, as a result of this case, MD has



		1 11 ::	
		changed her practice	
		routine and she reviews	
		all vital signs, pertinent	
		notes, and laboratory	
		testing results before	
		seeing patients.	
KILBY, Larry Shelton, MD	05/19/2023	The Board is concerned	Public Letter of Concern
(000015953) Winston Salem,		that MD's practice was	
NC		issuing written	
		prescriptions for	
		controlled	
		substances that,	
		pursuant to NC General	
		Statute § 90-106(a1) of	
		the NC STOP Act of 2017,	
		must be electronically	
		prescribed. The	
		electronic prescribing	
		requirement went into	
		effect on January 1,	
		2020. MD admitted to	
		the Board that his	
		practice is not equipped	
		to electronically	
		prescribe controlled	
		substances and that he	
		may not be able to bring	
		his practice into	
		compliance with the	
		electronic prescribing	
		provision of the STOP	
		Act. The Board notes	
		that MD has agreed to	
		cease prescribing all	
		controlled substances	
		and his DEA certificate of	
		registration has been	
		retired and is inactive.	
MARTINI, Douglas John, MD	05/22/2023	The Board is concerned	Public Letter of Concern
(009300532) Cary, NC		that MD's care of a 19-	
(0000000000000000000000000000000000000		year-old female may	
		have failed to conform to	
		the standards of	
		acceptable and	
		prevailing medical	
		practice in North	
		Carolina. The Patient,	
		who was diagnosed with	
		will was diagnosed with	



		left lines are all the	
		left knee meniscus	
		derangement and	
		patellofemoral disorder	
		resulting in left knee	
		pain, presented for left	
		knee arthroscopy	
		meniscocapsular repair	
		and lateral retinacular	
		release. Informed	
		consent was obtained	
		for the left knee, and the	
		left knee was properly	
		identified; however, the	
		right leg was prepped	
		and draped by other	
		providers prior to MD's	
		arrival in the operating	
		room and the right knee	
		was operated on. MD	
		reports that Patient had	
		pathology in her right	
		knee, her plan of care	
		included subsequently	
		operating on her right	
		knee, and she ultimately	
		had a good outcome.	
		The Board recognizes	
		that MD subsequently	
		undertook affirmative	
		measures to modify the	
		policies and procedures	
		at the surgical center to	
		prevent this from	
		•	
DAZAL Cables, DA C	06/20/2023	happening in the future. The Board is concerned	Public Letter of Concern
RAZAI, Sahley, PA-C	00/20/2023	that while PA was	rublic Lettel Of Colicelli
(001007859) Raleigh, NC			
		practicing in Virginia a	
		teenage female patient	
		who was being treated	
		for anxiety and	
		depression was	
		prescribed the drug	
		Hydrochlorothiazide	
		instead of Hydroxyzine in	
		error.	
		Hydrochlorothiazide is a	
		diuretic used to treat	
		edema (fluid retention)	
L	1		



		and Hydroxyzine is an	
		antihistamine, which can	
		be prescribed to relieve	
		anxiety. Although this	
		medication error first	
		occurred when PA's	
		Virginia supervising	
		physician entered the	
		wrong medication in the	
		electronic medical	
		record, PA continued to	
		prescribe the wrong	
		medication for months	
		after assuming the	
		patient's care before	
		noticing the error. When	
		PA noticed the error, she	
		reported it to the patient	
		and PA's supervising	
	0= 100 10000	physician.	5.11
ROSE, Richard Harlowe, MD	05/08/2023	MD treated an 81-year-	Public Letter of Concern
(201302460) Morganton, NC		old male patient for six	
		months for benign	
		prostatic hyperplasia and	
		lower urinary tract	
		symptoms. This care was	
		rendered during his	
		practice years in New	
		York. Patient developed	
		urinary retention and	
		MD performed a	
		transurethral microwave	
		thermotherapy (TUMT)	
		procedure. At that time,	
		MD did not explore the	
		possibility of prostate	
		cancer. Patient was later	
		diagnosed with	
		metastatic prostate	
		cancer by another	
		physician. The Board's	
		independent medical	
		expert reviewer felt that	
		MD's care of Patient may	
		have been altered by	
		performing a Prostate-	
		Specific Antigen (PSA)	
	i .	test prior to the TUMT	



procedure. While PSA prostate cancer screening in an 81-year- old man is not an American Urological Association guideline, an elevated PSA result may have led to a biopsy and an earlier prostate cancer diagnosis six months earlier. If Patient's cancer had been diagnosed, other treatment options	
screening in an 81-year- old man is not an American Urological Association guideline, an elevated PSA result may have led to a biopsy and an earlier prostate cancer diagnosis six months earlier. If Patient's cancer had been diagnosed, other	
old man is not an American Urological Association guideline, an elevated PSA result may have led to a biopsy and an earlier prostate cancer diagnosis six months earlier. If Patient's cancer had been diagnosed, other	
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cancer diagnosis six months earlier. If Patient's cancer had been diagnosed, other	
months earlier. If Patient's cancer had been diagnosed, other	
Patient's cancer had been diagnosed, other	
been diagnosed, other	
treatment options	
including androgen	
deprivation may have	
been considered.	
Additionally, Patient had	
an enlarged median lobe	
identified on a prior	
cystoscopy in 2009,	
which is a relative, but	
not absolute,	
contraindication for	
performing a TUMT	
procedure.	
SCOTT, Neil Townsend, PA-C 05/31/ 2023 The Board is concerned Public Letter of Conc	rn
(000102904) Mount Pleasant, SC that the care provided by	:111
PA to a 16-year-old male	
patient, presented with	
varying complaints,	
including abdominal	
pain, lower back pain,	
groin pain, vomiting, and	
muscle spasms may have	
been substandard. PA	
ordered a non-contrast	
CT scan of the lumbar	
spine and prescribed	
pain medication.	
Unfortunately, PA failed	
Unfortunately, PA failed	
Unfortunately, PA failed to properly investigate	
Unfortunately, PA failed to properly investigate Patient's complaint of	
Unfortunately, PA failed to properly investigate Patient's complaint of groin pain and	
Unfortunately, PA failed to properly investigate Patient's complaint of groin pain and subsequently failed to	



	1	1	
		required a genitourinary	
		examination since the	
		differential diagnosis for	
		this constellation of	
		symptoms would include	
		testicular torsion and	
		testicular mass. If PA had	
		performed a physical	
		exam of Patient's	
		testicles, he would have	
		discovered what was a	
		large testicular mass	
		which had been present,	
		per Patient's parent, for	
		several years.	
VOGELSANG , Glenn David, MD	05/16/2023	The Board is concerned	Public Letter of Concern
(200001324) Albuquerque, NM		that in October 2022,	
		MD entered into an	
		Agreed Order Imposing	
		Stipulations on License	
		with the New Mexico	
		Board. The Agreed Order	
		indicates that in	
		September 2021, MD's	
		employer took an	
		adverse action against	
		him because of	
		communication	
		concerns. MD did not	
		report this action to the	
		New Mexico Board in a	
		timely manner. The	
		Agreed Order required	
		MD to successfully	
		complete a CME course	
		on communication	
		within six months. The	
		Board notes that MD	
		successfully completed	
		the CME course in	
		February 2023. The	
		Board also notes that the	
		New Mexico Board has	
		issued an Order of	
		Release that relieved MD	
		from the terms and	
		conditions in the Order.	
WOLF , Harvey Hugh, MD	05/11/2023	The Board is concerned	Public Letter of Concern
TTOLI, Harvey Hugh, MID	03/11/2023	The Board is concerned	. abile letter of concern



(000030004) 01 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ale a MADI	
(000039901) Chapel Hill, NC		about MD's care of two	
		patients. (Patients A and	
		B) The Board's	
		independent medical	
		expert reviewer had	
		concerns that MD's	
		medical documentation	
		should have been more	
		detailed and specific and	
		he should have	
		conducted more	
		frequent laboratory	
		testing in light of Patient	
		A's medical conditions.	
		Furthermore, while	
		Patient A was receiving	
		care at MD's office, she	
		would on occasion	
		receive care from a	
		nurse practitioner	
		supervised by MD. This	
		nurse practitioner was	
		·	
		Patient A's sibling. The	
		type of care rendered to	
		Patient A by the nurse	
		practitioner, general	
		internal medicine care,	
		did not fall into one of	
		the limited situations	
		outlined in the Boards	
		Position Statement	
		titled, "Self-Treatment	
		and Treatment of Family	
		Members". Additionally,	
		the Board's independent	
		medical expert reviewer	
		had concerns about	
		MD's medical record	
		documentation in the	
		case of Patient B.	
MISCELLANEOUS ACTIONS			
THOHAN, Jeanne Louise, PA-C	05/22/2023	PA ceased clinical	Physician Assistant
(001013279) Mequon, WI		practice in 1999. In	license issued with
, , ,		January 2021, she	reentry agreement
		reactivated her physician	. , . 0 20
		assistant license through	
		emergency powers	
		enacted by the State of	
	<u> </u>	chacted by the state of	



CONSENT ORDERS AMENDED		Wisconsin in response to the pandemic. Upon reactivation of her license, PA worked as a Covid Clinic Team Member in Brown Deer, WI. PA has not practiced as a physician assistant in North Carolina and, as such, recognizes the need for a reentry plan.	
COLLINS, Paul Dwayne, MD (RTL010750) Lumberton, NC	06/30/2023	Prior to entering into an August 2022 Consent Order revoking his NC license, MD voluntarily surrendered his resident training license in June 2022. In March 2023, MD requested that the Board amend the language in paragraph 1 of his August 2022 Consent Order to state the revocation of his license be made retroactive to the date of the voluntary surrender of his resident training license, which is June 9, 2022. The Board agreed to amend the August 2022 Consent Order accordingly.	Amended Consent Order; license revoked retroactively to the voluntary surrender of his resident training license on June 9, 2022.
TEMPORARY/DATED LICENSES: ISSUED, EXTENDED, EXPIRED, OR REPLACED BY FULL LICENSES			
SIALA, Selima, MD (202301860) Ariana, NC	06/26/2023	MD may only use her NC Special Purpose License to practice medicine and surgery as a clinical fellow at the University of North Carolina, Division of Cardiothoracic Imaging, Department of Radiology, and shall not practice medicine or	Special Purpose License Agreement



	surgery with her Special Purpose License outside the limitations set forth in this Special Purpose License Agreement. The Special Purpose License shall come into effect at 12:01 a.m., August 1, 2023, and shall expire at midnight on July 31, 2024.
COURT APPEALS/STAYS	
NONE	
DISMISSALS	
NONE	