MINUTES

North Carolina Medical Board

November 19-21, 2008

1203 Front Street
Raleigh, North Carolina
Minutes of the Open sessions of the North Carolina Medical Board Meeting held November 19-21, 2008.

The November 19-21, 2008, meeting of the North Carolina Medical Board was held at the Board’s Office, 1203 Front Street, Raleigh, NC 27609. The meeting was called to order at 8:05 a.m., Wednesday, November 19, 2008, by George L. Saunders, III, MD, President. Board members in attendance were: Janelle A. Rhyne, MD, Past President; Donald E. Jablonski, DO, Treasurer; Ms. Pamela Blizzard; Thomas R. Hill, MD; Janice E. Huff, MD; Ms. Thelma Lennon; John B. Lewis, Jr., LLB; Peggy R. Robinson, PA-C; William A. Walker, MD; Paul S. Camnitz, MD and William W. Foster, MD. Also attending were R. David Henderson, Executive Director and Thom Mansfield, Board Attorney.

**Miscellaneous Announcements**

During the opening session Dr. Rhyne, Past President administered the oath of office to Dr. Saunders, President and passed on the gavel.

Dr. Saunders then administered the oath of office to Dr. Jablonski for the Secretary/Treasurer position.

Dr. Saunders then administered the oath of office to newly-appointed Board members Dr. Paul S. Camnitz and Dr. William W. Foster.

Dr. Saunders also then read a resolution in honor of Dr. Rhyne’s work as Board President.

The Board approved and recommended Dr. Walker for the appointment to the FSMB Editorial Committee, Dr. Jablonski for reappointment to the Program Committee and Dr. Loomis for reappointment to the Bylaws Committee.

**Presidential Remarks**

Dr. Saunders commenced the meeting by reading from Governor Easley’s Executive Order No. 1, the “ethics awareness and conflict of interest reminder.” No conflicts were reported.

**Minute Approval**

*Motion:* A motion passed that the September 17, 2008 Board Minutes are approved as presented.

**Executive Director’s Announcements**

Mr. Henderson had a few reminders for the board members:

1. Beginning in January use of the new hotel
2. Board retreat in February

November 19-21, 2008
ATTORNEY’S REPORT

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

Written reports on 165 cases were presented for the Board’s review. The specifics of the non-public matters in this report are not included.

A motion passed to return to open session.

EXECUTED CASES

Aarons, Mark Gold MD
Order Terminating Consent Order executed 10/22/08

Alruzzeh, Sharif Mohamed RTL
Non-Disciplinary Consent Order executed 10/02/2008

Augustus, Carl Trent MD
Findings of Fact, Conclusions of Law, and Order of Discipline executed 10/01/2008

Balentine, Kerry Layne MD
Denial Letter executed 11/3/08

Barro, Lee Dennis MD
Notice of Revocation executed 11/20/2008

Clayton, Christy Lou MD
Consent Order executed 09/19/2008

Coulson, Alan Stewart MD
Notice of Charges and Allegations; Notice of Hearing executed 09/25/2008

Durfey, John Quincy MD
Entry of Revocation executed 10/31/2008

Galyon, Steven Wayne MD
Consent and Waiver and Public Letter of Concern executed 10/2/08

Greenstone, Sidney Thomas MD
Public Letter of Concern executed 10/02/2008

November 19-21, 2008
Harris, Dennis Bret PA
Order Terminating Consent Order executed 10/17/08

Hull, James Franklin PA
Re-Entry Agreement executed 11/10/2008

Jonas, Dannie Burton PA
Findings of Fact, Conclusions of Law, and Order of Discipline executed 10/01/2008

Jones, Deborah Adee PA
Consent Order executed 09/19/2008

Kastrup, John Joseph MD
Non-Disciplinary Consent Order executed 10/17/2008

Land, Phillip Barton PA
Consent Order executed 09/19/2008

McGhee, James Ernest MD
Denial of Licensure executed 10/17/2008

McIntosh, John Clarke MD
Notice of Charges and Allegations; Notice of Hearing executed 11/12/2008

Mercier, Randall Robert MD
Amendment to Consent Order executed 11/13/08

Messner, Keith Harold MD
Consent Order executed 10/8/08

Miles, Martha Cope MD
Consent Order executed 09/29/2008

Radhakrishnan, Jay K. MD
Non-Disciplinary Consent Order executed 10/29/2008

Reddy, Rajashaker Pullagurram
Denial of Licensure executed 10/23/2008

Sessoms, Rodney Kevin MD
Denial of Licensure executed 10/15/2008

Sloand, Timothy Peter MD
Consent and Waiver and Public Letter of Concern executed 11/7/08

Smayda, Richard John
Denial of Licensure executed 10/14/2008

Smith, Yale Robert
Denial of Licensure executed 10/24/2008

Soriano, Clinton R. MD
Public Letter of Concern executed 10/21/2008

Stamp, Ian Patrick MD
Consent Order executed 09/19/2008

Starkey, Suzanne Renee MD
Public Letter of Concern executed 09/19/2008

Stevens, William Michael MD
Consent Order executed 09/19/2008

Story, Ellen Shannon MD
Re-Entry Agreement executed 11/14/2008

Taraszka, Steven Robert MD
Consent Order executed 10/7/08

Taylor, Dennis Absher
Order Terminating Consent Order executed 10/20/08

Thrift-Cottrell, Alesia Dawn MD
Notice of Charges and Allegations; Notice of Hearing executed 11/04/2008

Tompkins, Kenneth James MD
Denial of Licensure executed 10/21/2008

Torres, Rafael Guillermo MD
Consent Order executed 09/19/2008

Weintraub, Richard Alan MD
Consent Order executed 09/19/2008

Winfield, John Buckner MD
Consent and Waiver and Public Letter of Concern executed 10/23/08

Wrenn, Cynthia Helen PA
Consent Order executed 09/19/2008

Yongue, Judith Salle MD
Consent Order executed 09/19/2008

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

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A motion passed to return to open session

**FINAL ARGUMENTS – 11/21/2008**

**ROSNER, Michael, MD** - Hendersonville, NC
Disciplinary

Dr. Rosner was charged with unprofessional conduct for performing procedures that were not medically indicated.

Hearing: October 15, 2008
Final Arguments: November 21, 2008

Dr. Rosner was represented by Jim Wilson.
The Board was represented by Marcus Jimison

**PANEL RECOMMENDATION:** Reprimand, probation with stipulations

Final Arguments were heard on November 21, 2008. The Board will deliberate and render its final decision at the January 2009 Board meeting.

**TAM, Daniel Hoi Shuen, MD** – Syracuse, NY
Licensing

Dr. Tam’s application for licensure was denied based on Dr. Tam’s inability to provide verification of his medical education, receiving unsatisfactory evaluations during his fellowship in 2006-2007, and falsely answering questions on his application.

November 19-21, 2008
Hearing: August 20, 2008
Final Arguments were continued to a later date

Dr. Tam was represented by Mary Wells.
The Board was represented by Thomas Mansfield.

**PANEL RECOMMENDATION**: Deny

**MIRANDA, Conrado, MD** – Glendale, CA
Disciplinary

Dr. Miranda was charged with unprofessional conduct for prescribing medications to former patients while not actively practicing in North Carolina.

Hearing: August 20, 2008
Final Arguments were continued to a later date

Dr. Miranda was not represented by counsel.
The Board was represented by Christina Apperson.

**PANEL RECOMMENDATION**: Indefinite Suspension

**HEARINGS – 11/21/2008**

**BROWN, Douglas Allen, MD** – Williamsburg, VA
Out of State

Dr. Brown was charged based on action taken by the Virginia Medical Board regarding his admission that he submitted a fraudulent academic transcript when applying for a medical license.

Hearing: November 21, 2008

Dr. Brown was not represented by counsel.
The Board was represented by Todd Brosius.

**11/2008 BOARD ACTION**: Annul license

**CAMP, Gregory, MD** – Wilmington, NC
Out of State

Dr. Camp was charged based on action taken by the Ohio State Board which suspended his medical license regarding alcohol abuse.

Hearing scheduled for November 21, 2008 was continued

Dr. Camp was not represented by counsel.
The Board was represented by Todd Brosius.

**DONALDSON, Brian, MD** – Healdsburg, CA
Out of State

November 19-21, 2008
Dr. Donaldson was charged based on action taken by the Colorado Board which summarily suspended medical license.

Hearing scheduled for November 21, 2008 was continued

Dr. Donaldson was not represented by counsel.
The Board was represented by Todd Brosius.

LOWRY, Roswell, MD – Cornelius, NC
Out of State

Dr. Lowry was charged based on the acceptance of MD’s voluntary surrender of his Virginia medical license as the result of performance issues while being employed as an emergency room physician.

Hearing scheduled for November 21, 2008 was continued

Dr. Lowry was not represented by counsel.
The Board was represented by Todd Brosius.

11/2008 BOARD ACTION: Accept proposed Consent Order with a reprimand

McGEHEE, Bruce, MD – Purvis, MS
Out of State

Dr. McGehee was charged based on action taken by the Kansas Board in which MD entered in a Consent Order regarding mental health problems and sexual misconduct.

Hearing scheduled for November 21, 2008 was continued

Dr. McGehee was not represented by counsel.
The Board was represented by Marcus Jimison.

Executive Committee Report

The Executive Committee of the North Carolina Medical Board met Wednesday November 19, 2008 at the offices of the Board. Members present were: George L. Saunders, MD; Donald E. Jablonski, DO; Janelle A. Rhyne, MD; and John B. Lewis, Jr. Also present were R. David Henderson (Executive Director), Hari Gupta (Director of Operations), and Peter T. Celentano, CPA (Comptroller).

Financial Statements

Mr. Celentano, CPA, presented the September 2008 compiled financial statements. September is the eleventh month of fiscal year 2008. Mr. Celentano also reviewed the Board’s current cash position and the Balance Sheet as of September 30, 2008. Dr. Rhyne made a motion to accept the financial statements as reported. Dr. Saunders seconded the motion and the motion was approved unanimously.

Mr. Eugene Raymond, Senior VP and Portfolio Manager at BB&T, gave a presentation to the Committee on our Investment Portfolio as of October 31, 2008. The Committee reviewed with Mr. Raymond our current portfolio and investment performance over the past year. The
Committee asked Mr. Raymond to return in May and November 2009 to review the Board’s investments for 2009. Dr. Rhyne made a motion to accept the recommendations of Eugene Raymond for our investment account. Dr. Saunders seconded the motion and the motion was approved unanimously.

**Old Business**

There were no items under Old Business.

**New Business**

**Split Board Licensing / Informal Interview proposal**: The Committee discussed the possibility of changing the standard protocol with regards to split Board licensing and split Board informal interviews. Staff has proposed that the Board eliminate the step where we invite the licensee back into the room to convey the recommendation. By eliminating this step, the Board will save time as well as eliminate confusion if the Board’s decision is different than the original recommendation. Dr. Rhyne made a motion to accept this recommendation. Dr. Jablonski seconded the motion and the motion was approved unanimously.

**Nomination of New Officers**: Dr. Loomis was elected President-Elect in July. However, the Governor did not re-appoint him so that position is now vacant. Pursuant to the Bylaws, the Executive Committee must nominate to the Board another person for President-Elect. Dr. Saunders made a motion to nominate the following officers for 2008-2009: Dr. Donald Jablonski as President-Elect, and Dr. Janice Huff as Secretary/Treasurer. Dr. Rhyne seconded the motion and the motion was approved unanimously.

**CPT Code 95930-Visual Evoked Potential**: Mr. Henderson reviewed with the Committee a memo from Mr. Johnny Loper to Dr. John Robinson in which Mr. Loper opines that optometrists can perform a Visual Evoked Potential procedure (CPT Code 95930). The Committee accepted this as information.

**Personnel**: The Executive Committee met with Mr. Henderson in closed session to discuss a personnel matter pursuant to NC General Statute §143-318.11(a)(6).

**POLICY COMMITTEE MEETING**

Committee members: Dr. Walker, Judge Lewis, and Dr. Rhyne

**REVIEW OF POSITION STATEMENTS:**

- Retention of Medical Records (Brosius)
- Medical Record Documentation (Brosius)

May 2008 – It was reported that the FSMB’s version dealt mostly with electronic medical records.

**5/2008 COMMITTEE ACTION**: A draft of the proposed changes will be presented at the July Committee meeting for consideration.

**5/2008 BOARD ACTION**: Accept Committee Recommendation

**7/2008 BOARD ACTION**: Todd to continue to work on a proposal.
9/2008 BOARD ACTION: Todd to continue to work on a proposal.

11/2008 COMMITTEE RECOMMENDATION: Keep position statements separate, consider requiring corporations be held responsible for patient records, and consider alternative wording for the SOAP method of documentation. A proposed draft will be worked on for the January 2009 meeting.

11/2008 BOARD ACTION: Keep position statements separate, consider requiring corporations be held responsible for patient records, and consider alternative wording for the SOAP method of documentation. A proposed draft will be worked on for the January 2009 meeting.

REVIEW OF POSITION STATEMENT:
Departure from or Closing of Medical Practices

Issue: Review Committee referred this issue to Policy Committee to determine if the current position statement should be amended to cover nurse practitioners physician assistants.

5/2008 – It was pointed out that not all physician extenders work in the same circumstances. Many physician extenders are at-will employees; others work in practice environments in which they are the owner and/or the sole practitioner. The statement should cover both extremes. It was suggested that the layout of the statement could be similar to the Physician Supervision position statement, which lists circumstances to be considered on a case by case basis. Additionally, it was stated that continuity of care for patients must be the ultimate concern.

5/2008 BOARD ACTION: Accept Committee recommendation

7/2008 BOARD ACTION: Todd and Dr. Walker to continue to work on a proposal.

9/2008 BOARD ACTION: Todd and Dr. Walker to continue to work on a proposal.

11/2008 COMMITTEE RECOMMENDATION: Todd and Dr. Walker to continue to work on a proposal.

11/2008 BOARD ACTION: Todd and Dr. Walker to continue to work on a proposal.

BOARD CERTIFICATION DISTINCTION

Issue: How North Carolina-licensed physicians may advertise their Board certification status to the general public?

- Mr. Brosius will attempt to develop language to add to the advertising and publicity position statement to be presented at this meeting for consideration.

5/2008 BOARD ACTION: Accept the proposed Position Statement with the following change. Do not delete the following sentence: “If patient photographs are used, they should be of the physician’s own patients and demonstrate realistic outcomes.” This Position Statement is to be published in the Forum for comments.

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**7/2008 BOARD ACTION:** Submit the following proposed position statement with the amendment to the last sentence of the third paragraph.

**9/17/2008:** The Committee discussed the fact that the proposed changes to the current Position Statement would not be consistent with the information currently being provided on the Board’s website. Additionally, a representative from the Medical Society recommended that the position statement should include PAs and NPs.

**9/2008 COMMITTEE RECOMMENDATION:** (Walker/Lennon) Add the following language to the position statement “To avoid misleading the public, the Board strongly encourages that the use of the term “Board Certified” only be used in advertisements when it refers to certification derived from a specialty board recognized by the American Board of Medical Specialties or the American Osteopathic Association.”

**9/2008 BOARD ACTION:** Policy Committee to continue to address issue

**11/2008 COMMITTEE RECOMMENDATION:** Policy Committee to continue to address issue. Consideration to be given to making sure that physicians should only advertise board certification if that certification is in the specialty for which they are advertising.

**11/2008 BOARD ACTION:** Policy Committee to continue to address issue. Consideration to be given to making sure that physicians should only advertise board certification if that certification is in the specialty for which they are advertising. Dr. Saunders to attend January Policy Committee.

**NARROW THERAPEUTIC INDEX DRUG LIST**

- **Issue:** Request from Astellas Pharma US that the North Carolina Medical Board recommend to the NC State Secretary of Human Resources that tacrolimus be added to the NC narrow therapeutic index drug list.

  The following people spoke in support of the request: Marty Lasak, Pharm. D, Astellas Pharma US; Matt Harris, Pharm. D, Duke Medical Center/Transplant Unit; David Work Executive Director Emeritus, NC Board of Pharmacy; and Erin Fisher, RN, liver transplant recipient.

  The following person spoke in opposition of the request: Arthur Straughn, Pharm. D, Director Drug Research Laboratory.

**11/2008 COMMITTEE RECOMMENDATION:** Policy Committee will report to the full Board and receive input from the Board of Pharmacy before making final determination regarding a recommendation to DHHS.

**11/2008 BOARD ACTION:** Dr. Sheppa will check with other Boards. If he receives anything negative, this issue will be brought back to the Board. If nothing negative is received, approve for NTI list.
USE OF TELEPSYCHIATRY

In July 2007, a request was made by ACT Medical Group for the Board to provide clarification regarding internet prescribing after a telehealth visit was conducted via internet-based, real-time, interactive audio/video telecommunications as it relates to the Board’s position statement, Contact with Patients Before Prescribing.

In March 2008, the Board adopted the Committee’s recommendation that the informal opinion of the Policy Committee was that the practice of telemedicine for treating psychiatric patients as described was appropriate. The staff researched the issue to insure there would be no violation of Board rules.

Issue: A request was made by NC Department of Health and Human Services that the Medical Board consider clarifying its March 2008 action so as not to appear to be limiting other programs' ability to engage in the telepsychiatry for the same purposes.

**11/2008 COMMITTEE RECOMMENDATION:** Mr. Brosius will write a statement to clarify the Board’s intent and have it published in the Forum and on the Board website.

**11/2008 BOARD ACTION:** Mr. Brosius will write a statement to clarify the Board’s intent and have it published in the Forum and on the Board website.

CONTINUED COMPETENCE COMMITTEE REPORT

The Continued Competence Committee of the North Carolina Medical Board was called to order at 3:00 p.m., Thursday, November 20, 2008, at the office of the Medical Board. Members present were: Peggy Robinson, PA-C, Chair; William Walker, MD and Paul Camnitz, MD. Also attending were: Janelle Rhyne, MD; Michael Sheppa, MD, Medical Director; R. David Henderson, Executive Director; Christina Apperson, Legal Intern and Maureen Bedell, Recorder.

September Minutes

Motion to approve the September minutes was approved.

NEW BUSINESS

I. FSMB Maintenance of Licensure Meeting

Dr. Rhyne gave a brief summary of the FSMB Maintenance of Licensure meeting that she attended. The handout she distributed reviews the FSMB background, status, collaboration opportunities and discussion items.

**Background**

In May 2003 the FSMB appointed a special committee to study the role that state medical boards should play in ensuring the continued competence of licensed physicians, and to
develop recommendations as to how state medical boards should proceed in this arena. The committee included physician and public members of state medical boards and consultants from the education and testing communities, including the National Board of Medical Examiners (NBME).

In April 2004, the FSMB House of Delegates adopted the following policy statement: "State medical boards have a responsibility to the public to ensure the ongoing competence of physicians seeking relicensure." In doing so, the FSMB, for the first time in the history of the organization, publicly supported state medical board development and implementation of continuing competence requirements for physicians.

In late 2007, the Special Committee on Maintenance of Licensure disseminated a draft of its final report to member boards and other key stakeholder organizations for comment. The committee received mixed feedback on the draft policy document, with state medical boards citing legislative and operational concerns about implementation of the proposed Maintenance of Licensure (MOL) requirements, as well as concerns about the impact to practicing physicians and the physician workforce. The committee subsequently revised its report and submitted it to the FSMB Board of Directors for consideration in February 2008.

Acknowledging the concerns raised by state medical boards, the Board of Directors deferred acting on the Committee's report and instead, recommended to the FSMB House of Delegates that it direct FSMB to study how medical boards and other stakeholders might be impacted by implementation of MOL requirements and report to the House of Delegates in May 2010. The Board of Directors also recommended the following five principles be adopted as a framework for guiding future FSMB activities related to MOL:

- Maintenance of licensure should support physicians' commitment to lifelong learning and facilitate improvement in physician practice.
- Maintenance of licensure systems should be administratively feasible and should be developed in collaboration with other stakeholders. The authority for establishing maintenance of licensure requirements should remain within the purview of state medical boards.
- Maintenance of licensure should not be overly burdensome for the profession and should not hinder physician mobility.
- The infrastructure to support physician compliance with maintenance of licensure requirements must be flexible and offer a choice of options for meeting requirements.
- Maintenance of licensure processes should balance transparency with privacy protections.

Both recommendations were adopted by the FSMB House of Delegates in May 2009.

**Status of MOL Work**
FSMB has developed a work plan to meet the directive set forth by the House of Delegates. The objectives of the plan are to develop evidence supporting the need for implementing MOL policies and to develop information for use in understanding the impact of MOL on state medical boards and other stakeholders.
On October 9-10, 2008 the FSMB convened members and staff from 13 state medical boards in a two day meeting to evaluate the potential impact of the proposed MOL policy on state medical boards and other stakeholder groups. Representatives from the assessment, continuing medical education, physician practice, hospital and certification communities were invited to serve as content experts to the taskforce. Dr. Richard Hawkins from NBME represented the assessment community. The taskforce discussion will form the basis for a report to the House of Delegates. The report also will include a section providing an analysis of the available research regarding physician competence.

In addition, FSMB is in discussion with two state medical boards about the possibility of conducting pilot projects aimed at studying different aspects of a possible MOL infrastructure — one being the use of performance-based CME in assuring the continuing competence of licensees and the other involving license survey mechanisms that would enable the creation of more detailed physician practice profiles.

**Collaboration Opportunities**

The FSMB and NBME, through its collaboration in the Post-Licensure Assessment System, has been exploring how the PLAS program might respond to future demand for assessment resources resulting from current and emerging regulatory mandates and professional responsibilities (including MOL). As noted in the PLAS agenda materials, the PLAS program has invited representatives from key stakeholder organizations, including the American Board of Medical Specialties, Accreditation Council of Graduate Medication Education, Accreditation Council on Continuing Medical Education, Joint Commission, Council of Medical Specialty Societies, American College of Physicians, state medical boards and the public, to participate in a strategic dialogue aimed at identifying current and future opportunities and gaps to supporting physicians in meeting regulatory mandates and to explore opportunities for collaboration. The taskforce is scheduled to have its first meeting in February 2009.

In addition, FSMB and NBME have been engaged in informal dialogue with ABMS and its member boards regarding assessment of non-board certified physicians. In June 2008, the FSMB invited the NBME and the ABMS to meet and begin discussions about how the three organizations might collaborate in developing resources that meet the unique needs of state medical boards in evaluating the continued competence of non-board certified physicians. This development is significant, since ABMS certifying boards historically have been unwilling to make their portfolio of resources available to non-board certified physicians.

On other fronts, the FSMB, NBME, and ABMS are collaborating to conduct a national survey of practicing physicians that will produce more reliable data about physician practice patterns, board certification status, and physician participation in Maintenance of Certification. The survey will initially be piloted using physician contact information from the FCVS database; we are also in conversation with the Minnesota Board of Medicine to pilot the survey with that state’s licensee population. It is anticipated that information gained from the survey will help to identify the needs of practicing physicians in meeting regulatory requirements and to determine what kinds of tools and resources will be necessary to support physicians in meeting existing and emerging regulatory mandates.

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For discussion:

In a future environment where physicians are asked to provide evidence regarding their continuing competence and performance in practice:

- What are the pros and cons of pursuing a three-way dialogue between ABMS, FSMB and NBME regarding collaboration opportunities in the development of assessment resources for physicians?
- What are the desired outcomes for FSMB through such collaboration?
- What are the desired outcomes for NBME through such collaboration?

II. Report on the AMA/AAP Conference on Re-entry

Dr. Sheppa reviewed the report Dr. Michael Norins submitted when he attended the AMA/AAP Conference on behalf of the NCMB. A brief discussion then followed.

It was an honor for me to represent the NCMB at the invitational ’Conference on Reentry’ sponsored by the AMA and the AAP September 9-11, 2008 in Elk Grove, Illinois at AAP headquarters. There was representation by outstanding leaders in medicine from the AMA (Dr. Scheidman -well know to us), AAP, ABMS, NBME, AMA Council on Continuing Education, the CCME, CPEP, CPE, FSMB, Drexel University, distinguished consultants and medical educators.

The meeting site was very user friendly and our host, Holly Mulvey of AAP, was the gracious organizer and whip. Dr. Scheidman, our AMA host, inspired us to share our experiences and to focus on how we can help move the “reentry” process, along with MOC, forward.

A concise history of Woman’s Issues in Medicine, particularly how this intertwines with time away from practice issues, was sketched out by Dr. Saralyn Marks, The current landscape along with research data describing the scope of the problem was brought forward by Holly Mulvey and her staff. Key issues, already recognized by the NCMB and articulated at the Nov. ’06 Summit, included workforce needs, changing demographics of the medical profession, evolving views on “professionalism” and lifestyle.

Dr. Claudette Dalton, as an educator, policy maker and member of the Virginia Board presented several salient issues:

- reentry needs are not discriminatory and should be non-punitive
- evaluative needs when MDs change their field of practice
- key role of hospital credentialing.

Dr. Subbarao - the AMA preparedness liaison, gave key insights in regard to the need to be able to mobilize medical manpower in times of need, e.g. pandemics, including activating MDs who may be retired or on extended personal leave.

My presentation provided a working model of a reentry process from concept to legislation to practical application including how to craft a reentry agreement. NC has a successful model that may be adaptable throughout the regulatory community. Several of our obstacles were highlighted, particularly the remediation component and shortage of opportunities for carrying out the prescriptive component of a reentry assessment. This was well received.

Dr. Hall, for CPE, and Dr. Hawkins, for NBME, addressed issues of assessment and remediation. The need for high quality assessment, including testing, along with a dearth of remediation opportunities was further described, building in large measure on
our work in NC. The painted a picture of real momentum in the assessment and testing arena which will generate products to meet the needs of regulatory and credentialing organizations.

Currently available services, such as CPEP were delineated. Oregon Health Sciences University and Drexel University’s programs for remediation were described in detail by representatives of each institution. There is clearly a growing response to the needs for remediation opportunities in ways that may be cost neutral to the sponsoring organization if not allowing for a minimal financial margin.

The last half day was a brainstorming of small topic groups ala “Innovation Labs” to identify key concepts for moving forward.

Assessment - what are the triggers for formal remediation?
What is the role for regulators? What is the state’s role in assuring competence?
What mechanisms are necessary for MDs who don’t participate in ABMS boards?
GMP-US- what is the role of this working paper in “reentry” and “MOC?”
Can we prepare the political groundwork for acceptance of MOC/MOL? How do “pitch the sell?”
How can organizational structures be modified so they engender positive oversight of physician performance?
Can the AMA serve in a fashion akin to the British General Medical Council to be a fair broker for physicians in a federalized system?

This was an exciting opportunity for me. I was very proud of the work we in North Carolina have done, which may serve as a model for sister Boards throughout the country. The Federation stands as a resource for all Boards and can be the vehicle, along with AIM, for dissemination of our experience.

III. NCMS Report on Quality Improvement CME for Pain Medicine Prescribing

Dr. Rhyne discussed the NCMS meeting on pain medicine prescribing and a discussion followed. A handout on Controlled Substance Reporting System was distributed and reviewed.

Controlled Substance Reporting System FAQs

Q: What is it?
A: Established by State law, the CSRS is a prescription monitoring system that allows registered dispensers and practitioners to review a patient's controlled substances prescription history on the web. It is intended to assist practitioners in monitoring patients and identifying and referring patients for specialized substance abuse treatment or specialized pain management. Information regarding the CSRS can be found at www.ncdhhs.gov/mhddsas/controlledsubstance

Q: How do I gain access?
A: You need to follow the attached instructions to complete the attached application form, have it notarized, sign the privacy statement, and mail these along with a copy of your driver's license to the indicated address. Please do not fax it. Upon receipt we will approve it, send it to our contractor, who in turn will confirm your proposed password via E mail, and then E Mail your username and log on information.
Q. How does the system work?

A.: Anytime a prescription for a controlled substance, schedules II- V is dispensed in North Carolina, it must be reported into the CSRS database. Pharmacies must transmit the data by the 15th and 30th of each month. Persons with prescriptive authority and pharmacists who have registered with us and been granted a password may access the system and look up a patient to gain information on what prescriptions that patient has received within the specified time period of the search. Information in the system dates back to July 2007.

Q. What about privacy- what can I do with the information?

A: Practitioners should meet with the patient and discuss their findings. They may legally query the system for their patients only. The physician may suggest a referral of his/her patient to a substance abuse program or a pain specialist. The prescriber or practitioner may not call another prescriber without explicit written permission of the patient. The practitioner may not contact law enforcement unless the patient has forged a prescription. The purpose of the system is to provide an additional tool to care for the patient. Pharmacists may discuss findings with the prescribing physician only and discuss that physician’s prescription.

Q: Who may I contact with questions?
A: You may contact the DHHS Drug Control Unit at 919-733-1765 and ask to speak to John Womble or William Bronson or E mail: johnny.womble@ncmail.net or william.bronson@ncmail.net

ALLIED HEALTH COMMITTEE REPORT

Present: Peggy Robinson, PA-C, Chairperson, Dr. Foster, Dr. Hill, Marcus Jimison, Lori King, CPCS, Quanta Williams, Barbara Gartside, Christina Apperson, Don Pittman, Marc Katz, Katy Martinelli, Mike Borden, Scarlette Gardner.

Open Session

PA Site Visit Compliance Reviews.


Board Action: Accept as information.

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**PA-C's Reactivations/Reinstatements/Re-Entries**

Hardin, Geoffrey Lance 09/02/2008 Reinstatement
Hebert, Lisa Gianferante 09/15/2008 Reactivation
Hughes, Robin Rebecca 10/03/2008 Reactivation
Tomsett, Robert Mason 10/30/2008 Reinstatement

**Additional Supervisor List – 09/01/08 – 09/30/08**

**PA-Cs**

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Rocky Mount
High Point
November 19-21, 2008
Physician Assistant Advisory Council (PAAC) – November 19, 2008

The Physician Assistant Advisory Council (PAAC) met on Wednesday, November 19, 2008 at the office of the Board.

Present: Peggy Robinson, PA-C, Chairperson, Dr. Foster, Dr. Hill, Marcus Jimison, Lori King, CPCS, J. Hill, G. Uremovich, L. Dennis, R. Foster, M. Katz, K. Martinelli, E. Powell, M. Borden, S. Gardner, N. Hemphill, C. Apperson, D. Henderson

Introductions: Ms Robinson welcomed guests and new Board Members.

Old Business

PA Competency and Certification Requirements. NCAPA Maintenance Task Force Competency Report. Katy Martinelli gave a presentation and members discussed. NCAPA formed a task force and created ideas of what defines a competent physician assistant. The American Board
of Medical Specialties has moved to a model called maintenance of certification or MOC and the committee agreed this to be a useful tool.

New Business

CME Rule. PA Rules – CME 21 NCAC 32S.0106 - Currently the PA Rule reads: 21 NCAC 32S .0106 CONTINUING MEDICAL EDUCATION. In order to maintain physician assistant licensure, documentation must be maintained by the physician assistant of 100 hours of continuing medical education (CME) completed for every two year period, at least 40 hours of which must be American Academy of Physician Assistants Category I CME or the equivalent. CME documentation must be available for inspection by the Board or an agent of the Board upon request.

History Note: Authority G.S. 90-18(c)(13); 90-18.1; Eff. May 1, 1999; Amended Eff. April 1, 2004.

The Board voted at the 09/17/08 meeting to incorporate the same verbiage as the physicians rule. “The two year period described in Paragraph (1) of this Rule shall run from the physician assistant’s birthday beginning in the year XXXX or the first birthday following initial licensure, whichever occurs later.” Awaiting year information from MJ (1999).

NCMB is currently working on PA Rule revisions and this may be worded to: “The two year period runs from the first renewal date.” For information.


Next Meeting Date: Tentative – May 20, 2009. For information.

Proposal to delegate staff approval of routine NP, Perfusionist, and AA applications

Catchline: Staff currently approves physician and physician assistant applications. Please consider delegating approval of nurse practitioner, perfusionist, and AA applications to staff, these will only be processed every other month.

BOARD ACTION: Allow staff to approve routine nurse practitioner, perfusionist, and anesthesiologist assistant applications. AA applications will be sent to Dr. Hill for review prior to issuing license.

October NP Vote List

Catchline: NP Vote List was approved by a majority vote of the Board on October 10, 2008.

BOARD ACTION: Ratify the October vote list for approval.

SANE course (Sexual Assault Nurse Examiner)

Catchline: The Nursing Board has made a request to modify a SANE (sexual assault nurse examiner) course for out of state nurses who have completed a similar training in another state but now want to be certified in NC or nurses who have completed the training & need a refresher course. Pursuant to N.C.G.S. 90-171.38, the Nursing Board, in cooperation with the
Medical Board, through the NP joint subcommittee, shall establish, revise, or repeal standards for any such program.

BOARD ACTION: Recommend approval to NPJS. Also, the Board’s Legislative Liaison is directed to work with the Board of Nursing to remove references to the NP Joint Subcommittee and the NC Medical Board from G.S. 90-171.38(b) so that the NPJS and NCMB are no longer involved in approving SANE nursing curricu

Perfusionist Report – Open

Catchline: Open session portion of PAC meeting minutes (August, September & October).

BOARD ACTION: Accept as information

KETHEESWARAN, Tsi Ton, CPP

Catchline: Application & protocol agreement

BOARD ACTION: Applicant was approved

BOBEK, MaryBeth, CPP

Catchline: Application & protocol agreement (for approval of 3 supervising physicians with same protocols).

BOARD ACTION: Applicant was approved

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

The Committee chair presented the closed session portions of PAC meeting minutes from December, January, and February.

Written reports on 5 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.
## OCTOBER 2008 NP/LP/AA VOTE LIST

List of Initial Applicants Pending Board Approval

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<td>CZUBA, KAREN</td>
<td>SPARTANBURG</td>
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<td>PINEHURST</td>
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<td>CROMER, AMANDA</td>
<td>BURRI, STUART</td>
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<td>CUNHA, CHRISTINE</td>
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<td>CHARLOTTE</td>
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<td>CURRAN, MARY ALYCE</td>
<td>PRICE, BILLY</td>
<td>MT. HOLLY</td>
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<td>STATESVILLE</td>
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<td>DAY, MELISSA</td>
<td>LUCERERINI, SILVIA</td>
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<td>DESAI, SHAKTI</td>
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<td>ARTMAN, MICHAEL</td>
<td>RALEIGH</td>
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<td>DOUGLASS, MARGARET</td>
<td>BUTLER, RICHARD</td>
<td>RALEIGH</td>
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<tr>
<td>DOWD, LISA</td>
<td>HORTON, JANET</td>
<td>DURHAM</td>
</tr>
<tr>
<td>DRIVER, SHEILA</td>
<td>DEVIRGILIS, JUAN</td>
<td>WEST JEFFERSON</td>
</tr>
</tbody>
</table>

**ALLIED HEALTH PE ADDITIONAL SUPERVISOR LIST**

November 19-21, 2008
MOODY, PATRICIA
MORGAN, EILEEN
MOUSSA, MAHAMAN
MURPHY, NANCE
NEEL, WILLIAM
NUNN, LYDIA
O’HANLON, LORETTA
OUTLAND, PATRICIA
OXENDINE, VICTORIA
OXFORD, WILLIAM
PARKER, VALERIE
PERRY, JUDITH
PIERCE, CHRISTY
POILLUCI, VICTORIA
PRESELY, MELISSA
PURVIS, LATASHA
REID, TERI
RENDE, ELIZABETH
REVELS, JESSICA
REYNOLDS, SANDRA
RICHARDS, BETSY
ROBINSON, KARLA
RODGMAN, MELODY
ROSADO, SHERRY
RUPPERT, NANCY
SHAMEK, HELEN
SHAVER, SANDRA
SHELTON, PENNY
SPENCER, DORAINE
STEVENS, DARLENE
STEVENS, DARLA
STRAYHORN, MARTHA DELL
STUKES, KAREN
SUGG, BRINKLEY
TODD, CHRISTINE
VOGRINC, ASHLEY
WALL, JENNIFER
WALLACE, JULIE
WALSON, STELLA
WALTON, RENAE
WARD, CHRISTINE
WAYAND, CATHY
WHISNANT ROPER, REGINA
WILKINSON, MELODY
WILLIFORD, ELIZABETH
WISE, LORI

SHAH, DEVENDRA
WHITMAN, BRUCE
CHAMOVITZ, ALLEN
WEIR, SAMUEL
MORRIS, JOHN
SILVER, ROBERT
KIRATZIS, PHILIP
COOK, DAVID
MEYER, ALBERT
WEST, THADEUS
HARRISON, MYLENE
BROWN, SHERRY
MCGARRITY, MICHAEL
WINCHESTER, MARK
COOK, ELISABETH
SOUFFRON, WILFREDO
LEE, SUE
GALLENTINE, WILLIAM
MORRIS, JOHN
BUCHELE, BARRY
OSBAHR, ALBERT
LUE, ALVIN
MISSE, EDOUARD
FINK, GARY
WOOD, WILLIAM
RUDISILL, ELBERT
ATAGA, KENNETH
HARRIS, PAMELA
CHRISTIE, HEATHER
TAUTO, EDWARD
JONES, ENRICO
GRAY, THEODORE
CLEMENTS, THAD
TRIPP, HENRY
JAHRSDOFER, CHARLES
MEYER, ALBERT
BAUGHAM, LEONARD
ALAM, SITARA
LANG, JOSEPH
HUSSER, FELICIA
REDDICK, BRADLEY

CHARLOTTE
LUMBERTON
WINSTON SALEM
CHAPEL HILL
FLAT ROCK
CONCORD
ASHEVILLE
LINVILLE
WILMINGTON
GOLDSBORO
RALEIGH
AHOSKIE
WILMINGTON
DURHAM
WASHINGTON
BAYBORO
DURHAM
CARY
KERNERSVILLE
LOUSBURG
HICKORY
WAKE FOREST
HENDERSON
TROY
WAYNESVILLE
WINSTON-SALEM
AHOSKIE
SALISBURY
GRENVILLE
HICKORY
CHAPEL HILL
WINSTON SALEM
MORRISVILLE
HUNTERSVILLE
OAK RIDGE
BOONE
CHARLOTTE
KERNERSVILLE
GREENVILLE
WILMINGTON
WILKESBORO
MORGANTON
CHARLOTTE
GOLDSBORO
CHARLOTTE

November 19-21, 2008
Time & Place of Meeting
A meeting of the Joint Subcommittee was held at the North Carolina Board of Nursing office in Raleigh, NC on September 17, 2008. Meeting convened at 12:34 p.m.

Presiding
Peggy Robinson, PA-C (NCMB)

Members Present
Mary Ann Fuchs, RN (NCBON)
Dan Hudgins (NCBON)
Gale Adcock, RN, FNP (NCBON)
Janice Huff, MD (NCMB)

Members Absent
John Lewis (NCMB)

Staff Present
Julie George, Executive Director (NCBON)
Donna Mooney, Manager of Discipline Proceedings (NCBON)
Marcus Jimison, Legal Counsel (NCMB)
Jack Nichols, Legal Counsel (NCBON)
Christina Apperson, Legal Counsel (NCMB)
Eileen Kugler, Practice Consultant (NCBON)
David Kalbacker (NCBON)
Quanta C. Williams, Physician Extender Coordinator (NCMB)
Jean H. Stanley, Administrative Assistant to MJC and NCBON

Guests
Tom Bush, NP – NCNA
Cheryl Duke, NP – NCNP
Debra Kosko – NCNA
Janis P Puglisi, FNP – NCNA
Ryan Vann, PA – NCAPA
Mike Borden, CAE – NCAPA
Nancy Bruton-Maree, CRNA

Ethics Statement
Ms. Robinson read the Ethics Statement & asked committee members to state any conflicts of interest.

Announcements
Ms. Robinson welcomed committee members, staff, and guests.

Approval of Joint Subcommittee March 26, 2008 Minutes
**MOTION:** That the Joint Subcommittee approve the Open Session Minutes of July 16, 2008 with a correction to the section regarding the Six Month Compliance Review Report to read as follows:

“The Joint Subcommittee received the report from Ms. Eileen Kugler, Practice Consultant, Board of Nursing and Don Pittman, Compliance Supervisor/Investigator, North Carolina Medical Board. Nine visits were completed thus far. The process and outcomes of the compliance reviews were discussed. One NP failed to submit additional documentation within 30 days, and documentation later submitted was ambiguous and inconsistent.

**MOTION:** NCBON to send a letter of concern to NP signed jointly by Ms. Kugler and Mr. Pittman expressing concern about timeliness and quality of documentation submitted. **Passed.**
**MOTION:** That the Joint Subcommittee approve the Closed Session Minutes of July 16, 2008.  **Passed.**

The September 17, 2008 agenda was approved with the addition of the 2009 meeting schedule.

There were 3 actions reported by the Medical Board and 4 by the Board of Nursing since the last meeting.

Due to staff being able to handle certain duties administratively, there have been fewer items on the agenda in recent months. Ms. Adcock suggested meeting quarterly in 2009 – cutting the amount of yearly meetings from 6 to 4. There was discussion about if this would slow down the process for NPs waiting for decisions regarding disciplinary cases. It should not have a significant impact on these NPs. Ms. Stanley noted that November would have to be one of the meeting months as that is when the annual midwifery meeting is held. A special meeting could be called if necessary.

**MOTION:** That the 2009 NPJS meetings be held quarterly with the fourth quarter meeting being held in November to coincide with the Midwifery Meeting.

**AMENDED MOTION:** That the 2009 NPJS meetings be held once per quarter with the fourth quarter meeting being held in November to coincide with the Midwifery Meeting.

**MOTION:** That the Joint Subcommittee go into Open Session for purpose of taking action on extracted cases.  **Passed.**

**MOTION:** To approve the recommendations for closed session cases 01 – 04.  **Passed.**

<table>
<thead>
<tr>
<th>Case #</th>
<th>Issue/Allegation</th>
<th>Responsible Agency/Section</th>
<th>Recommended Disposition</th>
<th>Joint Subcommittee Motion</th>
<th>Follow-up by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Exceeding Scope Inappropriate prescribing</td>
<td>NCBON</td>
<td>Issue a Letter of Concern</td>
<td>Issue a Letter of Concern</td>
<td>NCBON</td>
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<tr>
<td>02</td>
<td>Request for termination of consent order</td>
<td>NCMB</td>
<td>Terminate Consent Order</td>
<td>Terminate Consent Order</td>
<td>NCMB</td>
</tr>
<tr>
<td>03</td>
<td>Prescribing</td>
<td>NCMB</td>
<td>Charge. Share report with DEA</td>
<td>Offer reprimand. If reprimand is not accepted, then charge.</td>
<td>NCMB</td>
</tr>
<tr>
<td>04</td>
<td>Quality of Care</td>
<td>NCMB</td>
<td>Letter to Complainant: Appropriate action taken. PLOC to NP re: OMD comments</td>
<td>Letter to Complainant: Appropriate action taken. PLOC to NP re: OMD comments</td>
<td>NCMB</td>
</tr>
</tbody>
</table>

November 19, 2008 at 12:30 p.m. until 2 p.m. - North Carolina Board of Nursing – Raleigh, NC. Lunch available at 12 noon

November 19-21, 2008
LICENSE COMMITTEE REPORT

Don Jablonski, DO, Chairman, Janice Huff, MD, Joy Cooke, Michelle Allen, Ravonda James, Mary Mazzetti, Kim Chapin, Scott Kirby, MD, Thom Mansfield

Requirement for time spent in medical school

Catchline: In the process of rewriting the Medical Practice Act the requirement for attendance of not less than 4 years (36 months) of medical school was accidentally removed. A plan is in place to have it reentered into the MPA. Four years is approximately 155 weeks. The Committee discussed this at the July meeting and staff was instructed to contact ECFMG to determine if there is a "standard amount of time" required for medical school completion. Information received show medical education at foreign schools range from 4 to 9 years.

BOARD ACTION: Implement a rule requiring not less than 130 weeks of medical education for graduates of foreign medical schools unless there is evidence of further accomplishment of ABMS certification.

Single Board Member interviews resulting with a recommendation for a PLOC

Catchline: The Board previously approved a motion that all PLOCs require full Board approval. This process sometimes delays issuing a license by as much as 2 months. The Medical Director and Senior Staff Review Committee continue to support the Board's prior action requiring Board approval

BOARD ACTION: Senior Staff Review Committee to develop a proposal for a process for "pre-approving PLOCs recommended by Board members" by developing a narrow list of "failure to disclose information" that are of moderate or less significance for consideration at the January 2009 License Committee meeting.

Modification of 21 NCAC 32B .0314 –Passing Exam Score

Catchline: The Board has tended to consider ABMS and AOA board certification as a factor in deciding whether to grant exception to the 7-year rule requirement.

BOARD ACTION: Table until January 2009 – Staff to draft a modification that will address exception to the 7-year rule for ABMS and AOA certified physicians as well as the number of attempts allowed for passing each step of the USMLE examination.

Oral Interview Questions

Catchline: There have been some concerns regarding the interview questions asked during single Board member and split-Board license interviews.

BOARD ACTION: Abandon "oral" questions during an interview. On arrival to the interview, provide applicant with a copy of the application they submitted and a new set of the questions to report any changes or corrections.
Suggestions for the application form

Catchline: It has been suggested that the following be added to the license application:
(1) Add a question about the applicant’s practice plans for North Carolina. (2) Add a “strong” statement emphasizing the importance of the questions and that “over” disclosure is the best policy. The statement should also emphasize it is the applicant’s responsibility to answer the questions and what the repercussions could be if they don’t.

BOARD ACTION:
(1) Add a question about the applicant’s practice plans for North Carolina.
(2) Add a “strong” statement emphasizing the importance of the application and that “over” disclosure is the best policy. The statement should also emphasize it is the applicant’s responsibility to answer the questions and what the repercussions could be if they don’t.
(3) The Committee recommends revising question #8 to include reporting arrests that have been “expunged”.

Legal Department to draft verbiage on #2 & #3.

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

Twenty two 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.

NOVEMBER 2008
APPLICANTS PRESENTED

Adkins, Heather Denise
Albon, Dana Petronela
Aleti, Vikram Kishore-Reddy
Ali, Moinuddin
Alkeylani, Abd Ulmoez
Allen, Bishop
Aluko, Babajide Olufemi
Amin, Aman Virendra
Amoako, Patricia
Anekwe, Emmanuel Chukwuemeka
Apoe, Ogheneruona Osehi
Arida, Muammar Abdelkarim
Astin, Matthew Raymond
Augustine, Santhosh

November 19-21, 2008
Avitabile, Ann Marie
Babcock, Michael John
Bachmann, Laura Hinkle
Baddigam, Latha
Bader, Walid Gomaa
Balaravi, Bhavani
Bamert, Melanie Jan
Barbian, Peter James
Bareket, Henry Zvi
Barnett, Ted Marcus
Battle, Jamila Randolph
Becker, Aida
Becker, David Lowell
Bermudez, Arthur R.
Bertagnolli, Reono
Bhadiraju, Padmini
Bhaskaran, Dharmendra
Bhatia, Parneeta Haresh
Bilska, Magdalena Alicja
Bird, John Andrew
Blanks, Richard Charles
Blasko, Edward Conrad
Bliss, Laura Katherine
Blumenthal, Mark Gary
Blumling, Brandi Renee
Boinapally, Aravind Rao
Bonfiglio, Richard Paul
Borgeson, Dana Geoffrey
Bownds, Shannon Eloi
Brown, Robert Alan
Broyles, Michael Otis
Camponovo, Ernest John
Cao, Qing
Carter, Adam James
Castillo-Roth, Alejandra Isadora
Chan, Suk-Yin
Childs, John Michael
Chin, Brian Michael
Chiu, David
Chughtai, Haroon Latif
Clingan, Mary Jennings
Cohen, Jonathan
Compagna, Thomas Neil
Conley, Diane Huntington
Crawford, Mary Jo
Crittendon, Cindy
Croitoru, Anca Georgiana
Crosby, Bradley J.
Crotte, Fernando
Crow, Amanda Renee
Crowley, Arthur Reeves
Cruz Melendez, Jose Luis
Dann, Phoebe Hope
Dannewitz, Stephen Richard
Davies, Janine Marie
Davis, Craig Thomas
Davis, Ivan Christopher
Davis, Stephen Bradley
Davis, Willette Christine
Dawalibi, Salim Joseph
Deepak, Bangalore V
Dinescu, Cristian Laurentiu
Dixon, Donovan Dave
Dorsey, Eugene Richard
Duguay, Veronique
Durso, Amy Michelle
Eanni, Richard Francis
Edwards, Justin Reid
Edwards, Sarah Marie
Eickman, Kara Denae
Ellis-Cox, Leesha Michelle
Everhart, Clyde Hugh
Fandetti, Glen Anthony
Fares, Wassim H
Farmer, Jennifer Burke
Fedoriw, Kelly Bossenbroek
Fortner, Michael Cameron
Fox, James Walter
Frankel, Lawrence Steven
Gadudasu, Gouri
Gallo, Ralph Charles
Gamboa, Stephen Hodges
Gear, Andrew John Leishman
Gentry, Mary Katherine
Giese, William Lewis
Gillespie, John Anthony
Gluck, George Scott
Goldberg, Stephen Andrew
Goldenberg, Matthew Nelson
Goldstein, Bernard Baruch
Goodnough, Taylor Katherine
Grace, Brian Eugene
Greenberg, Brent Geoffrey
Grigoryeva, Anna
Guest, William
Gupta, Madhur
Gupta, Sumit Kumar
Hannan, Paul John
Harbour, Chad Marc
Harris, Mesha
Harrison, Gary Noel
Harrison, Richard James
Haskins, Angela Page
Hata, Ryan Gene
Hayden, Jennifer Lynn
Hey, Daniel Spurgeon
Ho, Jonathan Ngoc
Holland, Eliza
Holmes, Keith Marshall
Horn, Thomas Dag
Horney, Candace Wayne
Hornik, Christoph Paul Vincent
Horowitz, Alexander Ross
Hossain, Fatima
Huber, Kenneth Robert
Hyde, Mary Elizabeth
Jackson, Marianne
Jawaid, Benazeer Fatima
Jayaswamy, Asha
Jednacz, Jeffrey Aaron
Jefferies, Bryan Garfield
Jenson, James Joseph
Jones, Christopher Todd
Kane, Andrew John
Kastrup, John Joseph
Kaufman, Andrew Russell
Kaza, Mohan Viswa
Kelly, Timothy Joseph
Khayal, Saba Haji
Kies, Darren David
Killion, Carter Norvel
Kilpatrick, Michaux Renata
Kimberley, Barry Paul
Kimple, Randall Joel
Klein, Lisa Rachelle
Koewler, Thomas Joseph
Kotlyarevska, Kateryna
Kreps, Matthew Michael
Lacaze, Mary Elizabeth
Lakhanpal, Gaurav
Lam, Michael Alan
Latif, Shariq
Lautenschlaeger, Natascha Susanne
Lee, Yueh Zenas
Leung, Eugene Wai Ching
Lewis, James Howard
Livingston, Jeffrey Charles
Livingston, Lauren Snyder
Lotterhos, Joseph Edward
Machen, Byron Cornell
Mack, Peter Bowman
Magnus, Adam Charles
Mahmoud, Hatim Ahmed
Maize, John Christopher
Malone, Michael Andrew
Mangalat, Dev
Maready, Edward Earl
Markewich, Stephen Douglas
Mason, Mark Thomas
McAlarney, Kelly Whitson
McCartney, Michael Sean
McCullough, Heath
McGruder, Sandra Waldine
McKay, George
McLaughlin, Kimberly Patrice
McLaughlin, Lisa Grace Swinton
Messick, Brent Hamilton
Meyermann, Mark William
Middleton, Tiffani Marguerite
Migaly, John
Mitchell, Robert Edgar
Mizelle, Eric Quentin
Moo Young, Karl James
Moodie, Kurtis Rosendo
Moore, Andrea Rolanda
Morales, Sergio
Moreno-Coll, Adlih
Morris, Andrew James
Morris, John Christopher
Morter, Gregory Alan
Mullin, Timothy Ian
Mullins, Christopher E.
Muncie, Jr., Hebert Lee
Munnis, Holly Noel
Murray, Laura Wilson
Nagaraj, Raghava
Neison, David Peter
Nicholas, Kremer Barr
Ntimba, Francis David
O'Bannon, Robert Toney
Oliver, Gary Wayne
O'Malley, Donald Francis
Pabich, Wendy Leah
Page-Turner, Yvette Denise
Pandey, Nivedita
Parlette, Eric Christian
Parsons, Amy Carol

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Ho, Jonathan Ngoc
Hodge, Alicia Simeon
Horn, Thomas Dag
Horney, Candace Wayne
Hornik, Christoph Paul Vincent
Hossain, Fatima
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Jawaid, Benazeer Fatima
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Jenson, James Joseph
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Kastrup, John Joseph
Kelly, Timothy Joseph
Khayal, Saba Haji
Kies, Darren David
Killion, Carter Norvel
Kilpatrick, Michaux Renata
Kimberley, Barry Paul
Kimple, Randall Joel
Klein, Lisa Rachelle
Koewler, Thomas Joseph
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Lakhanpal, Gaurav
Lam, Michael Alan
Latif, Shariq
Lautenschlaeger, Natascha Susanne
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Leung, Eugene Wai Ching
Livingston, Lauren Snyder
Lotterhos, Joseph Edward
Machen, Byron Cornell
Mack, Peter Bowman
Magnus, Adam Charles
Mahmoud, Hatim Ahmed
Maize, John Christopher
Malone, Michael Andrew
Tong, Winnie Mao Yiu
Torre, Wayne Joseph
Troche, Milton
Truesdell, Alexander George
Truss, Kelli Danielle
Tu, Song-Yih
Uyesugi, Walter Yutaka
Vachon, Tyler Allen
Valiveti, Prakash
Vasudevan, Arvind
Vattigunta, Haritha
Verka, Lisena Gabriela
Villanueva, Rodney Anthony
Villarroel, Omar M
Wallace, Celeste Nicole
Wallin, Jordan Lee
Wang, Gordon Guan
Weigle, Jeffrey Paul
Weston, Marie Fils-Aime
Wiley Cene, Crystal Natasha
Womack, Beverly Fortner
Woodfill, Gregory Leonard
Youens, Kenneth Emory
Young, Sarah Wistran

Reinstatement
Blasko, Edward Conrad
Chiu, David
Compagna, Thomas Neil
Davis, Stephen Bradley
Dorsey, Eugene Richard
Everhart, Clyde Hugh
Fox, James Walter
Grace, Brian Eugene
Guest, William Arthur
Livingston, Jeffrey Charles
Mitchell, Robert Edgar
Morris, Andrew James
Pierce, Kerry Lee

Reactivation
Adkins, Heather Denise
Giese, William Lewis
Lacaze, Mary Elizabeth
Philips, Ateiat Zekry Boulos
Retired Volunteer License
Holmes, Keith Marshall
Kane, Andrew John

Special Volunteer License
Holland, Eliza Thomasson

DISCIPLINARY (COMPLAINT) COMMITTEE REPORT
Janelle Rhyne, MD, Chair; Donald Jablonski, DO; William Walker, MD; Pamela Blizzard; Paul Camnitz, MD

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

The Disciplinary Committee (complaints) reported on five 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.

PROFESSIONAL LIABILITY INSURANCE PAYMENTS
Janelle Rhyne, MD, Chair; Donald Jablonski, DO; William Walker, MD; Pamela Blizzard; Paul Camnitz, MD

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

The Professional Liability Insurance Payments Committee reported on 49 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.
DISCIPLINARY (COMPLAINT) REVIEW COMMITTEE REPORT
Janelle Rhyne, MD, Chair; Donald Jablonski, DO; William Walker, MD; Pamela Blizzard; Paul Camnitz, MD

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

The Disciplinary (Complaint) Review Committee reported on 50 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

NORTH CAROLINA PHYSICIANS HEALTH PROGRAM (NCPHP) COMMITTEE REPORT
Thelma Lennon, Chair; Thomas Hill, MD, Janice Huff, MD

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

The Board reviewed 38 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

DISCIPLINARY (INVESTIGATIVE) COMMITTEE REPORT
Janelle Rhyne, MD, Chair; Donald Jablonski, DO; William Walker, MD; Pamela Blizzard; Paul Camnitz, MD

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

The Disciplinary (Investigative) Committee reported on 37 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 pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney/client privilege.

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

A motion passed to return to open session.

DISCIPLINARY (INVESTIGATIVE) REVIEW COMMITTEE REPORT
Thomas Hill, MD, Chair; Peggy Robinson; Thelma Lennon; William Foster, MD

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

The Disciplinary (Investigative) Review Committee reported on 46 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.

ADJOURNMENT
This meeting was adjourned at 5:15 p.m., November 21, 2008.

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Janice E. Huff, MD
Secretary