



**Tennessee Board of Medical Examiners
Development Committee**

Monday, May 18, 2015

MINUTES

A meeting of the Tennessee Board of Medical Examiners' Development Committee was called to order at 4:32 p.m. in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Dr. Ali, Committee Chair.

Board members present: Michael Zanolli, MD
Subhi Ali, MD
Dennis Higdon, MD
Neal Beckford, MD
Pat Eller, Consumer Member

Board member(s) absent: None

Staff present: David Reagan, MD, Chief Medical Officer
Andrea Huddleston, Chief Deputy General Counsel
Maegan Carr Martin, Executive Director, BME
Rene Saunders, MD, Medical Consultant, BME

Dr. Ali determined that a quorum was present and stated that the Committee has three agenda items to discuss. Dr. Zanolli made a motion to add a fourth agenda item. Dr. Ali seconded the motion. Dr. Zanolli noted that he was not proposing the item for action, but discussion.

I. DISCUSSION OF PRESCRIBING EDUCATION IN TENNESSEE TRAINING PROGRAMS

Ms. Martin stated that Dr. Reagan was invited to attend the meeting to discuss the Department's dialogue with training programs on this issue and suggested that he address the Board. Dr. Reagan stated that the Department put together and released in January of this year a one hour, self-guided educational opportunity that would be relevant. There are different portions for different professions. The Department spoke to forty (40) different schools across the state to make them aware of it. It was posted to the website. The video isn't something the Department is interested in updating every year. Dr. Reagan agrees that it is crucially important to educate health care professionals when they are in training. He advocated on behalf of coordinating any efforts undertaken with the other professions. Dr. Reagan confirmed that several letters have been sent out to the programs to notify them of the Department's

activities. He suggested that the CSMD Committee might be an appropriate platform for this activity. Dr. Beckford spoke in support of putting this issue before the CSMD Committee. Dr. Beckford spoke to the dean of the University of Tennessee Medical School and he is very interested in putting something together for the medical students and residents. He asked if it would be better to give each institution the opportunity to present the information in the way they see fit or to standardize the information presented? Dr. Reagan stated that the approach to date has been somewhat standardized in that there is a core video and then additional components for each of the professions. Dr. Higdon agreed with Dr. Beckford that the CSMD Committee would be a good platform; however, he thought the Board should be consulted to confirm that they agree.

Ms. Eller reported that she also had a conversation with some UT educators and they have agreed to distribute the “Chronic Pain Guidelines” as part of resident orientation. She asked whether there is a cost to access the video. Dr. Reagan responded that the course is free. He added that the Department has considered developing initial content (which has now been developed) and having a publicly accessible website so that the institutions could log on and access the most recent data available to the Department. Dr. Beckford thought it would be useful to allow the institutions to share information on this publicly accessible website. Dr. Reagan agreed, though he wasn’t sure that the technology is currently available. Dr. Ali invited Dr. Reagan to attend the Board meeting for the Board’s discussion of this issue.

II. NOTIFICATION TO LICENSEES REGARDING EXPIRATION OR LAPSED LICENSE

Dr. Zanolli wants to explore ways to provide notification to licensees of their impending licensure expiration. Dr. Higdon asked whether an electronic notification can be provided. Ms. Martin stated that electronic notifications are already going out to licensees who are “opted in” to receive electronic notification. Paper renewals are sent to individuals who are not “opted in.” The problem is that the Board’s licensees aren’t reliably updating their email and physical addresses. Dr. Zanolli asked whether it would be possible to “ping” licensees’ email addresses to confirm that they are correct. Ms. Martin responded that she has asked Ms. Otto, Director of Health Related Boards, about the possibility of such a system but does not yet know whether the technology is available. She added that the administrative office has a new system that is able to do much more than the previous system, but at the moment, the kinks of moving to a new system are being worked out and it’s going to be several months before staff can be forward-looking. Dr. Zanolli reminded the Board that a licensee who works on a license that he or she has inadvertently allowed to lapse has committed an infraction that is reportable to the National Practitioner Databank. Dr. Reagan suggested that perhaps we rely upon the electronic notification system, but send multiple emails instead of a single email. Dr. Ali directed that this report be on the agenda of the next Development Committee meeting.

III. REENTRY OPTIONS FOR MD X-RAY OPERATORS

Ms. Martin introduced this topic and stated that it was added pursuant to the high volume of applicants that have appeared before the Board to address their absence from practice for a period of two (2) or more years. She directed the Committee to a letter sent to all the Board-approved programs as well as the relevant MD X-Ray Operator rule. She summarized the Board’s options to address this issue: reexamination, clinical retraining, didactic instruction, or a combination of any one of these methods. Dr. Higdon reported that after speaking with a radiologist and a radiologic technologist (RT) he believes that a two week retraining would be sufficient for x-ray operators who have been out of practice for a period of five (5) or fewer years. Reexamination would also be an appropriate reentry pathway. He was left with the impression that hospitals could accommodate individuals seeking a clinical retraining. Dr. Higdon believes someone who has been out of practice for more than five (5) years may need a

combination of reexamination plus retraining. Dr. Zanolli spoke in opposition to requiring reexamination. Ms. Eller asked whether retraining needed to account for new equipment. Dr. Higdon said that equipment was discussed, but is not an obstacle to retraining. Dr. Ali spoke in favor of two weeks of clinical exposure. Dr. Beckford agreed that the clinical component is important, but is skeptical that someone who has been out of practice for years can be brought back up to speed in two weeks. Dr. Ali spoke in favor of a two week clinical retraining for individuals who have been out of practice for two years or less. Dr. Zanolli made the suggestion that the Board hear from one of the Board-approved programs. Ms. Martin reported that a representative from Radiologic Education Seminars (RES) will be present at the meeting tomorrow and could be asked to address the Board.

IV. DISCUSSION OF RECENT ACTIONS RELATED TO *FTC v. NORTH CAROLINA BOARD OF DENTAL EXAMINERS*

Dr. Zanolli summarized an email discussion that occurred between he and General Counsel, Jane Young. He reported that there has already been a meeting addressing this case and analyzing what steps, if any, need to be taken. Ms. Martin and Ms. Huddleston attended. The Solicitor General agreed to be present at the July meeting to make a presentation. Dr. Zanolli seeks to provide this information to the Board members so that it is known that the state is going to protect the Board members in a bonafide way. Ms. Huddleston stated that at this point the analysis is quite preliminary and there isn't much to report at the moment. Dr. Zanolli asked that a representative from the BME, such as Ms. Martin, be present as an observer if possible. Dr. Ali asked that an update be provided to the Board at tomorrow's meeting.

There being no other Committee business the meeting was adjourned.