



**Tennessee Board of Medical Examiners
Regular Board Meeting**

Tuesday, May 11, 2021

MINUTES

The regular board meeting of the Tennessee Board of Medical Examiners was called to order at 8:41 a.m. in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Dr. Melanie Blake, Board President.

Board members present: Melanie Blake, MD, President
Stephen D. Loyd, MD, Vice President
Robert Ellis, Consumer Member, Secretary
W. Reeves Johnson, MD
Neal Beckford, MD
Deborah Christiansen, MD
Randall Pearson, MD
Samantha McLerran, MD
Phyllis Miller, MD
Jennifer Claxton, Consumer Member

Board member(s) absent: John Hale, MD
Julianne Cole, Consumer Member

Staff present: Francine Baca-Chavez, JD, Office of General Counsel
Rene Saunders, MD, Medical Consultant, BME
Angela Lawrence, BME Executive Director
Stacy Tarr, Administrative Director
Candyce Wilson, Administrative Director
Brandi Allocco, Board Administrator

I. CONSIDERATION OF APPLICATIONS

Medical Doctor Applicant Interview(s):

Emeka Oputa, MD – appeared before the Board without legal representation. Dr. Oputa graduated from an unapproved International Medical School. The University was not accredited at the time of graduation and is not currently accredited. He completed all steps of the USMLE in greater than 10 years though he passed Step 3 on the first attempt. He is not eligible for licensure through reciprocity. He is not ABMS Board Certified, has no malpractice history, no criminal history, and no prior Board action. His intended specialty is psychiatry. He holds active licensure in Kentucky and North Carolina.

He begins a fellowship program at Vanderbilt on July 1, 2021. He will be eligible to sit for the ABMS Board examination after he completes his residency program on June 30, 2021. The Board questioned the applicant on his brief delay in completing his USMLE steps within the ten (10) year time period. The applicant discussed personal matters which led to this delay. Board Rule 0880-02-.08(4)(d)(4) states the ten (10) year rule does not apply to applicants who present a verifiable and rational and verifiable explanation. The consensus of the Board is that his situation is rational and verifiable.

Dr. Neal Beckford motioned to grant a temporary license up to one (1) year, with consideration to his rational and verifiable circumstance regarding his delay in completing his exams within ten (10) years, for the purpose of passing his Board Specialty Exam. With this license the applicant cannot supervise mid-levels, the license cannot be renewed, and all rules apply with this license. Mr. Robert Ellis seconded the motion and it passed.

Brett Donegan, MD – appeared before the Board without legal representation. Dr. Donegan was required to participate in a Focused Professional Practice Evaluation/Plan for his practice for Endovascular Therapy for Ischemic Stroke after having his clinical privileges restricted at a past work site as a result of a Peer Review process. This action was not completed through no fault of the applicant. The restriction of privileges action was not reported to the NPDB. Dr. Donegan is ABMS Board Certified, with no malpractice history, no criminal history, and no prior Board action. The Board questioned the applicant regarding the matters in which resulted in the restriction on his privileges and his intended practice in Tennessee. He reports that after five (5) cases, his supervisor was no longer interested in teaching/supervising him in the procedure anymore without any specific explanation. The consensus of the Board is that they would feel comfortable granting licensure after receiving proof that his potential employer has a plan in place for remediation before he is able to perform the specific procedures solo. Dr. Deborah Christiansen motioned to grant a full and unrestricted license contingent on submission to the Boards medical director a letter that states the group and the hospital for which he will be practicing is aware of the situation at Huntsville and they have a plan to moving forward to get him credentialed in that specific procedure. Dr. W. Reeves Johnson seconded the motion and it passed.

Andrew Gong, MD – appeared before the Board without legal representation. Dr. Gong has criminal history not initially reported on the application. There are distant felony convictions resulting in incarceration. Dr. Gong is not ABMS Board Certified, has no malpractice history, and no prior Board action. Dr. Gong reports he was convicted as a juvenile and he was under the impression this did not carry over into his adult record. He reports his medical school and residency program were aware of his criminal history and he has continued to grow and overcome his juvenile obstacles with no criminal matters in his adult life. He intends to ultimately practice as a primary care physician in Tennessee. Dr. Beckford motioned to grant an unrestricted medical license. Dr. Christiansen seconded the motion and it passed.

Blaise Wolfrum, MD – appeared before the Board without legal representation. Dr. Wolfrum's Illinois Medical license was summarily suspended in 2017 due to prescribing and boundary issues. The license status has not been restored to active. Dr. Wolfrum is not ABMS Board Certified, has no malpractice history, and no criminal history. Dr. Wolfrum reports the Illinois Board is not conducting their cases virtually and when they do resume in person meetings, they will initially be hearing new suspensions and not restoration cases. Dr. Wolfrum presented his position on the events that led up to the suspension of his Illinois medical license. Dr. Wolfrum addressed the concerns of inappropriate prescribing. Dr. Christiansen motioned to deny the application unless the applicant requests to withdraw his application on the basis that he needs to clear up his Illinois medical licensure concerns. Dr. Samantha McLerran seconded the motion. Dr. Michael Baron, with TMF, reports he met virtually with the applicant and his attorney in October 2020, and at that time he recommended the applicant complete a fitness for duty

evaluation so there is some idea as to his fitness to practice. However, without that information Dr. Baron does not have a recommendation for the Board. The applicant requested to withdraw his application.

Anup Satpathy, MD – appeared before the Board without legal representation. Dr. Satpathy was issued his Tennessee medical license in 1990. This license was first disciplined in 1996 and again in 2009. He has been excluded from participation in Medicaid/Medicare as well. He reports no active medical practice since the revocation. He is now requesting an Administrative License. He no longer qualifies to hold a license in the State of Tennessee as he is an International Medical School graduate with just one (1) year of U.S. ACGME accredited postgraduate training. Dr. Satpathy is not ABMS Board Certified, has no malpractice history, and no criminal history. Based on the work he intends to perform, the consensus of the Board is that an administrative license is not appropriate. The Board does not see a path towards licensure for this applicant. The applicant requested to withdraw his application.

II. **Presentation by Dr. Michael Baron, TMF Medical Director, on TNPSQ One Year Results**

Dr. Baron introduced the Board to the Tennessee Medical Foundation’s newest case managers: Tamiko Webb, PhD and Nancy Hooper, DPh.

On February 3, 2020, the Tennessee Medical Foundation launched the TNPSQ. This screening program is intended to be a non-crisis tool that helps several healthcare professionals anonymously assess their current state of mental health and well-being.

Within the first year, the program saw more than three times the level of activity which was anticipated. For the first year the following statistics are reported:

- 238 individuals submitted a questionnaire
- 176 individuals reviewed counselor response
- 62 individuals dialogued with a counselor
- 42 individuals requested an appointment or referral
- Of the 238 individuals which submitted a questionnaire, 84% of them were not currently receiving counseling or therapy
- To date, 263 users have submitted a questionnaire.

Some of the participant key concerns identified were difficulty finding a provider with expertise working with physicians, job stress, financial stress, and relationship stress.

Dr. Baron asked the Board to authorize another email blast to all TN licensees about the TNPSQ. Dr. Christiansen motioned to authorize the Board’s office to send out an e-mail blast notifying licensees about the TNPSQ. Dr. Johnson seconded the motion and it passed.

III. **Updates from Taskforces & Committees**

a. **Development Committee (Dr. Loyd, Dr. Blake, Dr. Johnson, Dr. Beckford, Mr. Ellis and Dr. Christiansen) – Dr. Stephen Loyd presented the following update:**

- i. The Committee met yesterday, May 10, 2021.
- ii. **Sexual Misconduct Policy** – the FSMB ratified their Sexual Misconduct policy on April 20th. The Committee will review that policy and compare to the existing Board policy at the meeting in July. The Committee will bring forth any suggested changes to the Board at the July meeting.
- iii. **Disciplinary Grid for Improper Prescribing of Controlled Substances** – in 2019 a taskforce of the Board developed the minimum discipline on prescribing

of opioids. There is not a grid for discipline for layered prescribing, such as prescribing in potentially deadly combinations (e.g. opioids and benzodiazepines) and the prescription of amphetamines. Which is reported to be the number one combination of overdose deaths reported in Tennessee. It was requested that Dr. Hale, Dr. Blake, and Dr. Baron look at constructing a policy regarding the prescriptive guidelines and minimum discipline for prescribing of controlled substances II through V rather than just scheduled II and III opioids.

- iv. **First time DUI Offense** – the Committee recommends that we issue a letter of warning to a licensee recommending they reach out to TMF whenever we receive information of a licensee receiving their first DUI. This came before the Board with a motion and second and it passed by the Board.
 - v. **Medical Ethics Policy** – the Committee recommends the Board accept the AMA Principles of Medical Ethics as their policy. The Board reviewed the AMA’s latest version of their Principles of Medical Ethics and the revised draft Board policy. This comes before the Board with a motion and second and it passed by the Board.
 - vi. **Timeline for Completion of Requirements in Disciplinary Orders** – whenever a disciplinary order is issued and whether timelines should be added to proposed sanctions. The Committee decided that whenever orders come before the Board for consideration, and the Board adds sanctions, the attorney will remind the Board that they may discuss issuing timeline requirements during their closing arguments.
 - vii. **Discussion regarding Telemedicine Taskforce** – the Committee wants the Telehealth Taskforce to review the current rules, define the “practice site”, and the requirements of the supervising physician in regard to collaboration with mid-levels. The Committee will be inviting some individuals from TennCare to appear at the next meeting to talk about what TennCare envisions for telehealth moving forward, and Dr. Johnson has a colleague with AAFP which will be invited as well.
- b. **Justice 3D Webex Training held on May 10, 2021** – Dr. Johnson presented a brief overview of the training provided by Justice 3D. Many of the Boards investigators, attorneys with the Office of General Counsel and Board members were in attendance. The consensus of the Board is that the training was excellent but more geared towards investigators. Dr. Loyd reported he was hopeful the Board members would have received more training on implicit bias. Dr. Blake suggested the Board can consider other training opportunities for later this year on implicit bias.
 - c. **FSMB 2021 Annual Meeting Update by Dr. Melanie Blake** – Dr. Blake reports the highlights of the meeting included: discussions on the impact of COVID-19, physician burn out, the importance of emergency preparedness and response, physician impairment, and the bylaw amendments and policy updates were voted on.

IV. Conduct New Business

- 1. **Discuss and take action if needed regarding licensee request regarding Tennessee specific CMEs** – the Board reviewed communication from a licensee of the Board who seeks for the Board to no longer require licensees who do not hold a DEA to be required to complete the 2 hour TN specific prescribing CME. Statutorily, only licensees who hold a DEA are required to complete this specific CME with the exception that some specific Board-Certified licensees are exempt. However, the Board previously approved their rules

to require all licensees to complete this CME unless they are statutorily exempt. The consensus of the Board is that all licensees should be required to complete the specific course. It was mentioned that even if someone does not have a DEA, they may come in contact with someone who was prescribed or who does prescribe opioids.

2. **Discuss and take action if needed regarding CME notice** – at a recent Board meeting the Board voted to remove the option for licensees to use MOC as proof they are compliant with their CMEs. The Board's administrative office released an e-mail blast notifying the licensees of this change and this has triggered numerous questions regarding its interpretation. It is the Board's position that moving forward, licensees who are audited will need to submit proof of the CME hours earned within the time frame required per the rules. However, any licensee who is unable to prove compliance because they were completing hours for their MOC and the time frame differs for their license, then the Board will consider these matters on a case by case basis.
3. **Discuss and take action if needed regarding Investigative Consultant** – Dr. Saunders reports at times she is conflicted out based on knowledge she may have regarding a particular physician presented in case review. Dr. Saunders reports previously this was not an issue because the office had two (2) physician staff consultants available. All physician members of the Board expressed an interest in filling this role as needed. When the need arises, the Office of General Counsel will reach out to one (1) of the members to ensure the case is reviewed in a timely manner.
4. The Board discussed possibly providing Mr. David Silvus with the day(s) of the week they are usually available for a contested case to help schedule meetings outside of the regular Board meetings to resolve the backlog of cases.

Discussion on the Office of General Counsel having no cases to be heard and a limited number of applicant interviews at this Board meeting. There were twelve (12) applicant interviews who did not appear at this meeting due to the meeting switching to in person on April 28th. It is the case that some individuals did not feel comfortable due to COVID-19 related reasons and some individuals felt it was too short of notice to travel to Nashville. Ms. Baca-Chavez discussed the option for the Board to consider allowing an applicant to appear virtually for reasons pertaining to the pandemic. The consensus of the Board is that in-person interviews are best but if permitted a virtual attendance may be considered on a case by case basis. Ms. Baca-Chavez reported the office would first seek approval to conduct interviews virtually and then on a case by case basis the office along with Dr. Blake would review the situation presented and make a determination.

V. Consider and Approve Consent Agenda

Mr. Ellis requested the Office of Investigations report be removed from the Consent Agenda. Dr. Christiansen motioned to accept the consent agenda with the extraction of the Investigative report. Dr. Johnson seconded the motion and it passed. The Consent Agenda contained the following:

1. Approval of March 15, 2021 Development Committee meeting minutes
2. Approval of March 16-17, 2021 BME Meeting
3. Ratification of new licenses, reinstatement and renewals of Medical Doctors, MD X-Ray Operators, Genetic Counselors, Clinical Perfusionists, Physician Assistants
4. ~~Review of Office of Investigations Statistical Complaint Report and Currently Monitored Practitioners Report~~
5. Review of Administrative Office Statistical Licensing Report
6. Review of the Office of General Counsel Report
7. Quarterly FSMB Update on USMLE

8. Review and approve unlicensed practice Agreed Citations – K. Brandon Strenge, MD (license #58299), and Kaitlyn Thacker, AMDX (license #8898), and Jeffrey A. Bunn, AMDX (license # 9397)
9. Review and approve continuing education Agreed Citations – Katherine Arnold, PA (license #2831), Nels Walker, AMDX (license # 9736), Victoria Earle, AMDX (license #9208), Sarah Fellowes (license #39669), Michael Hutto, AMDX (license # 9080), and Jodie White, AMDX (license #3664)

The Board led a discussion on their concerns with the level of monitoring and to which degree licensees are truly following the requirements of their Board Orders within the required time frames. Furthermore, if they aren't following the timelines precisely, is the Investigative Office promptly identifying those whom are not compliant with their Board Orders. The Board wishes to have Ms. Lori Leonard appear at their next Development Committee to discuss these concerns. Mr. Ellis motioned, and Dr. Miller seconded the motion, to have Ms. Leonard appear at the next Development Committee meeting to discuss these concerns.

The Board recessed for lunch.

Dr. Beckford and Ms. Claxton will rejoin the meeting shortly.

Ms. Jennifer Putnam, Deputy Assistant General Counsel appeared before the Board to address their discussion on allowing virtual appearances. The Board does have the option to allow applicants to appear in person or virtually. If virtual, it would be preferred that all applicants be present with a visual appearance and that it be a Board's blanket policy that all applicants appear virtually. We do not want to give the appearance that we are picking and choosing which applicants are allowed to appear virtually. Based on this information, the Board will continue to require all applicants appear in-person.

VI. Policy for Ratification – Standards to Evaluate Orthopedic Physician Assistant Programs – Ms. Tracy Alcock, Advisory Attorney for the Physician Assistant Committee, presented an amended policy which was recently ratified by the PA Committee. Mr. Ellis motioned to ratify the policy. Dr. Miller seconded the motion and it passed.

VII. Disciplinary Order(s) – Agreed Order(s)

Donald Douglas, PA – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Tracy Alcock represented the State. Dr. Loyd recused himself. Respondent was licensed on March 18, 1999 and that license is set to expire on November 30, 2021. The Department conducted an investigation that included the review of ten (10) patient records prepared and kept by Respondent, reflecting treatment from 2010 to 2013 with controlled substances in amounts and/or of durations not medically necessary, advisable or justified. During the time period of 2010 to 2014, Respondent was employed as a physician assistant at Bearden Healthcare Associates, a pain management clinic in Knoxville, Tennessee. Under his supervising physician's direction, Respondent routinely prescribed controlled substances, primarily large quantities of opioids, for treatment of patients with chronic pain complaints at Bearden Healthcare. It is the Department's position that Respondent's prescribing was non-therapeutic in nature, neither justified nor medically necessary for patients' diagnoses, and not for a legitimate purpose. Respondent often prescribed monthly prescriptions to individual patients which included combinations of long-acting and short-acting opioids often combined with a benzodiazepine. Respondent typically treated patients that had been receiving care from multiple providers at Bearden Healthcare prior to his encounter with the patient. It is the Department's position that Respondent prescribed large amounts of controlled substances for which patient charts did not

provide sufficient justification. Additionally, at times, Respondent authorized refills for patients without having a face-to-face encounter with the patient. Respondent is no longer working in pain management and has not worked in pain management for six (6) months, and Respondent's recent practice included very little controlled substance prescribing. The facts stipulated are grounds for discipline. This Order shall place Respondent's license on probation for three (3) years. Respondent is prohibited from prescribing opioids for six (6) months. Respondent shall submit proof to the Committee that he notifies any physician with whom he collaborates, of this Order. Respondent must enroll and complete the Intensive Course in Controlled Substance Prescribing offered at Case Western. Respondent must pay one (1) Type A Civil Penalty for a total of five hundred dollars (\$500.00). Respondent must pay all actual and reasonable costs of this case not to exceed twenty thousand dollars (\$20,000.00). This Order was ratified by the Committee on Physician Assistants. Dr. Christiansen motioned to approve this Order. Dr. Johnson seconded this motion and it passed with Dr. Loyd recused.

VIII. **Disciplinary Order(s) – Consent Order(s)**

Steven Richardson, PA – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Tracy Alcock represented the State. Respondent was licensed on May 15, 2019 and that license expired on July 31, 2020. Respondent's California physician assistant license is currently under investigation by the California Medical Board for practicing and prescribing controlled substances to patients without proper supervision. The formal California Medical Board accusation was issued on December 5, 2019 and is pending resolution. On March 13, 2020, an Order was issued in *The People of the State of California vs. Steven F. Richardson, PA*, in the Superior Court of the State of California. Under the Order, as a condition of bail, Respondent was prohibited from providing physician assistant services, prohibited from prescribing controlled substances, and ordered within 72 hours after the Order to surrender prescription pads to the Physician Assistant Board of California, pending the outcome of the matter. On or about September 1, 2020, the Idaho State Board of Medicine issued a Stipulation and Order whereby Respondent's Idaho physician assistant license was surrendered after the Superior Court of California ordered Respondent to cease practice as a physician assistant in CA and prohibited Respondent from prescribing controlled substances. On or about September 15, 2020, the VA Board of Medicine suspended Respondent's physician assistant license due to action taken by another board or agency. On or about October 23, 2020, Respondent entered into an Order with the State of Illinois Medical Disciplinary Board whereby Respondent's Illinois physician assistant license was voluntarily placed on permanent surrender status. The facts stipulated are grounds for discipline. This Order shall voluntarily surrender Respondent's license which is the same effect as a revocation. Respondent shall pay all actual and reasonable costs of the case not to exceed five thousand dollars (\$5,000.00). This Order was ratified by the Committee on Physician Assistants. Dr. Christiansen motioned to approve this Order. Dr. Loyd seconded the motion and it passed.

Crystal McKiddy, PA – did not appear before the Board nor did her legal representative, Julia Kavanagh, appear on her behalf. Ms. Tracy Alcock represented the State. Respondent was licensed on January 5, 2012 and that license is set to expire on May 31, 2022. The Department conducted an investigation that included the review of one (1) patient record, a pediatric patient that was three (3) years old at the time of the office visit. On or about December 7, 2018, Respondent examined the patient while Respondent was working as a physician assistant at Fast Pace Urgent Care Clinic in Oneida, Tennessee. A provider in training conducted the primary examination, which Respondent supervised. Respondent failed to ensure that the provider in training documented the bruises that were visible on the patient. This Order outlines additional stipulated facts to include that the bruises visible on the child were not included in the patient record and the Respondent did not report the bruising to the Department of Children's Services.

In or around March 2019, the patients' father was subsequently indicted for two counts of aggravated child abuse for acts that occurred on or about December 5, 2018 – December 7, 2018, for injuries to the skin that involved severe bruising. The Respondent testified in court at this criminal trial and the Defendant was found guilty and convicted of aggravated child abuse, beyond a reasonable doubt, for the substantial body injury he inflicted on the patient or about December 5, 2018 – December 7, 2018. The facts stipulated are grounds for discipline. This Order shall place Respondents license on probation for two (2) years. Respondent shall submit proof to the Committee that she has notified any physician with whom she collaborates with of this Order. Respondent must enroll in and complete certain specific courses. Respondent must pay five (5) Type A Civil Penalties for a total of three thousand seven hundred and fifty dollars (\$3,750.00). Respondent shall pay all actual and reasonable costs of this case not to exceed four thousand dollars (\$4,000.00). This Order was ratified by the Committee on Physician Assistants. Dr. Christiansen motioned to approve this Order. Mr. Ellis seconded the motion and it passed.

Discussion on “provider in training” and the level to which supervision is handled for that individual. The Board discussed the education of these providers in training and to whom is responsible for them. There was a brief discussion regarding a new law that should come forth, but has not been signed by the Governor, which changes the PA Committee into a Board.

Dr. Beckford rejoined the meeting.

Evelyn Cintron, MD – did appear before the Board with her legal representative, Ms. Lisa Helton. Ms. Lara Gill represented the State. Respondent's license number 26640 is set to expire on October 31, 2021. Respondent specializes in internal medicine and has hospital privileges at Saint Thomas River Park Hospital in McMinnville, TN. Respondent owns and operates her own clinic in McMinnville, TN. Respondent is not certified in pain management. The Department received a complaint against the Respondent and conducted an investigation. The Investigator observed that Respondents medical records were in a state of disarray. Multiple deficiencies were found in the review of the medical records. Respondent failed to appropriately monitor many of her patients for signs of abuse or addiction. The Departments investigation also revealed that records kept by Respondent at her clinic often failed to document adequate physical exams or reflect the reason for prescribing the quantity and/or combinations of controlled substances that the patients were prescribed. In some instances, Respondent prescribed controlled substances and other medications without taking a history, performing a physical exam, documenting a written treatment plan, or checking the controlled substance monitoring database as required. The facts stipulated are grounds for discipline. This Order shall reprimand Respondents license. Respondent shall be prohibited from prescribing opioids and benzodiazepines for six (6) months and until the successful completion of the continuing education required by this Order. This Order outlines several other requirements of the Respondent. Respondent must pay all actual and reasonable costs of this case not to exceed five thousand dollars (\$5,000.00). Dr. Loyd motioned to approve the Order. Dr. Miller seconded the motion and it passed.

Lance Dozier, MD - did not appear before the Board nor did a legal representative appear on his behalf. Mr. Peyton Smith represented the State. Respondent was licensed on June 20, 1996 and the license expires on March 31, 2023. On November 12, 2019, Respondent entered into a Consent Order with the Board which reprimanded Respondents license based on discipline from the Virginia Board of Medicine. The Virginia Boards discipline, a reprimand with terms, stemmed from Respondents driving while intoxicated arrest in Virginia, while on call at two different hospitals, on April 23, 2018. Respondent pled guilty to a reckless driving charge, and the VA Board found that Respondent was unable to practice with reasonable skill and safety due to illness or substance use and required him to enter a contract and successfully complete a

program with the VA Health Practitioners Monitoring Program. The Tennessee Board Order also stipulated that Respondent failed to include the 2018 reckless driving conviction and two malpractice settlements on his practitioner profile, and that he answered “no” to the criminal conviction question on his 2019 TN medical renewal application. The TN Board Order reprimanded Respondents license and required him to contact TMF within thirty (30) days and follow all recommendations. Respondent failed to contact TMF within thirty (30) days. While he failed to contact TMF within thirty (30) days, he has since signed a secondary monitoring contract with TMF. The facts stipulated are grounds for discipline. This Order shall place Respondents license on probation for a time period to run concurrently with the duration of his VA Health Practitioners Monitoring Program. During his probation, Respondent must maintain a good and lawful conduct, and maintain TMF advocacy. Respondent shall not serve as a supervising physician. Respondent shall pay one (1) Type A Civil Penalty for a total of one thousand dollars (\$1,000.00). Respondent shall pay all actual and reasonable costs of the case, not to exceed two thousand dollars (\$2,000.00). Dr. Johnson motioned to approve this Order. Dr. Christiansen seconded the motion and it passed.

Steven Flatt, MD – did not appear before the Board but his legal representative, Mr. David Steed, was present on his behalf. Mr. Peyton Smith represented the State. Respondent was licensed on May 31, 1989 and this license is set to expire on March 31, 2023. On or about September 2014, Respondents medical license was placed on probation by Consent Order for one (1) year for refilling prescriptions for a romantic partner. On or about April 7, 2018, Respondent wrote a prescription for ten (10) alprazolam, 1 mg, a controlled substance, to a romantic partner and created a contemporaneous record thereof. On or about April 5, 2016, Respondent wrote a prescription for thirty (30) Zolpidem, a controlled substance, to a friend. Respondent has completed multi-day CME courses through Case Western to address concerns related to these facts. The Order lists more details in the stipulated facts. The facts stipulated are ground for discipline. This Order shall reprimand Respondents license. Respondent shall complete specific course work listed in the Order. Respondent shall pay all actual and reasonable costs of the case not to exceed two thousand dollars (\$2,000.00). Respondent shall pay two (2) Type C civil penalties for a total of two hundred dollars (\$200.00).

Mr. Steed provided the following clarifications to the Board. Dr. Flatt has previously explained, he was out of town, and knows this individual was prescribed Xanax for a certain period of time. He agonized with what the right thing to do was but decided to do what he felt was for the best well-being of the patient at that moment because he knew the patient would not go seek the help elsewhere. Furthermore, the patients primary care physician had been in an accident and closed his practice. So, the Respondent did provide a limited prescription to help prevent the patient from having seizures until the patient was able to find a new primary care physician.

The Board led a discussion on the type of discipline being suggested based on the pattern of behavior presented. Furthermore, there was a discussion on the definition of an emergency versus inconvenience. Dr. Christiansen motioned to approve this Order. Dr. Johnson seconded the motion and the motion failed in a roll call vote: Dr. Christiansen - aye, Dr. Loyd - nay, Dr. Blake - nay, Mr. Ellis – nay, Dr. Beckford – nay, Dr. Johnson - aye, Dr. Miller -nay, Dr. Pearson – nay, and Dr. McLerran recused. The final vote was six (6) opposed, two (2) for the motion, and one (1) recusal.

Tameka Noel, MD – did not appear before the Board nor did a legal representative appear on her behalf. Ms. Kaitlin Parham represented the State. Respondent was licensed on June 28, 2016 and that license expires on March 31, 2022. On or about October 8, 2020, the Texas Medical Board entered an Order of Temporary Suspension against Respondents Texas medical license. The

discipline against Respondents Texas medical license stemmed from Respondent not registering her clinic as a pain management clinic. Additionally, on or about September 21, 2020, the federal government indicted the Respondent, along with other co-conspirators, alleging that they had operated a pill mill since 2011. This Order outlines other stipulated facts. The facts stipulated are grounds for discipline. This Order shall permanently revoke Respondents license. Respondent shall pay all actual and reasonable costs of this case not to exceed five thousand dollars (\$5,000.00). Dr. Christiansen motioned to approve this Order. Dr. Loyd seconded the motion and it passed.

Ms. Claxton rejoined the meeting.

Claude E. Varner, Jr., MD – did not appear before the Board nor did his legal representative, Ms. Leslie Ballin. Mr. Grant Mullins presented this for the State. Respondent was licensed on February 16, 1967 and that license is set to expire on August 31, 2022. Between January 16, 2021, and February 10, 2021, Respondent volunteered repeatedly to administer vaccines as part of the Shelby County Health Department’s COVID-19 vaccine administration plan at the Pipken building vaccine POD in Memphis, Tennessee. On one occasion, Respondent unlawfully removed three doses of the COVID-19 vaccine from the Pipken building vaccine POD, and on a separate occasion he removed two additional doses from the POD site. Respondent administered two of the doses to his wife, two of the doses to a friend, and one dose to his daughter-in-law, who was not in the phase to receive a dose of the vaccine at the time. Respondent did not return any intake forms to the POD site documenting having administered these doses of the COVID-19 vaccine. The facts stipulated are grounds for discipline. This Order shall reprimand the Respondents license. The Respondent must complete course work listed in the Order. Respondent must pay five (5) Type C civil penalties for a total of five hundred dollars (\$500.00). Respondent shall pay actual and reasonable costs of the case not to exceed one thousand dollars (\$1,000.00). Dr. Johnson motioned to approve this Order. Dr. Phyllis Miller seconded the motion and it passed.

July 2021 Development Committee Agenda items:

1. Investigative summary report with Ms. Lori Leonard
2. Proper prescribing of controlled substances guidelines
3. Telemedicine taskforce update

The Board expressed a desire to have more information on the responsibility of students in training; these students are present with mid-levels and the collaborating physician is not signing off on their presence and what is the physician licensee’s responsibility for them. This information will be researched and brought before the Board at their next Board meeting.

Dr. Blake expressed the value of all Board meeting material being given to the Board members by noon on the Friday before the Board meets.

IX. **Public Comment** – None.

The Board recognized the exemplary service from Dr. Beckford over the past 15 years. It is the understanding of the Board that the several members, whose terms are to end soon, will remain on the Board until they are reappointed or replaced.

The Board concluded all business at 2:43pm CT and will not be meeting on Wednesday, May 12, 2021.

