



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

Tuesday, July 19, 2022

MINUTES

The regular board meeting of the Tennessee Board of Medical Examiners was called to order at 8:34 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 Loyd, MD, Vice President
Robert Ellis, Consumer Member, Secretary
Samantha McLerran, MD
John Hale, MD
Randall Pearson, MD
Keith Anderson, MD

Board member(s) absent: Deborah Christiansen, MD
Phyllis Miller, MD
Jennifer Claxton, Consumer Member
John McGraw, MD
James Diaz-Barriga, Consumer Member

Staff present: Francine Baca-Chavez, JD, Office of General Counsel
Stacy Tarr, BME Executive Director
Candyce Wilson, Administrative Director
Brandi Allocco, Board Administrator
Samantha Green, Board Administrator

I. CONSIDERATION OF APPLICATIONS

Albert Isaacs, MD – appeared before the Board without legal representation. Dr. Isaacs is a Canadian Medical School graduate who has completed the LMCC and 6 years of RCPSC accredited postgraduate residency training. He is not currently ABMS certified and has not passed all steps of the USMLE. He holds a limited license to practice medicine in Alberta, Canada. Dr. Isaacs recently moved to Middle Tennessee to complete a Pediatric Neurosurgery Fellowship at Vanderbilt University Medical Center. Dr. Isaacs is eligible for a full and unrestricted license in Canada; however, he did not apply for such as he was planning to move to the United States to complete his fellowship training. Ms. Francine Baca-Chavez went over the Declaratory Order process. Dr. Stephen Loyd motions to table the application for up to six

(6) months to allow Dr. Isaacs time to decide whether he will petition the Board for a Declaratory Order or sit for the USMLE exam. Mr. Robert Ellis seconds the motion, and it passes.

Meenakumari Manoharan, MD – appeared before the Board without legal representation. Dr. Manoharan is an International Medical School graduate who has not completed the required postgraduate medical education and is not ABMS certified. Dr. Manoharan was accepted into a Preventative Medicine Residency Program at Meharry Medical Center. The residency program requires a full and unrestricted medical license in order for Dr. Manoharan to continue to attend. The Board tabled the application for Ms. Manoharan for later in the meeting to allow time for the Board to review an email Ms. Manoharan received from her program regarding the program’s licensure requirement.

James Rynerson, MD – appeared before the Board without legal representation. Dr. Rynerson has been out of clinical practice since January 31, 2019. Dr. Rynerson owns a dry-eye clinic which has seen an increase in patient volume. Due to demands, Dr. Rynerson wishes to re-enter clinical care to help meet his practice’s needs. Dr. Rynerson would be performing procedures to help patients with dry-eye disease, which he briefly explained. The procedures are not surgical. On or about February 5, 2005, Dr. Rynerson had restrictions placed on his Kentucky Medical License, related to improper prescribing, however he has since met all requirements and continued to work as a physician until 2019. The Board went over the re-entry pathway for Dr. Rynerson. Dr. McLerran motions to grant a limited license for up to one (1) year, contingent on acceptance of a reentry pathway created by Dr. Randall Pearson and Dr. Rene Saunders in conjunction with Dr. Rynerson, where a minimum of twelve (12) cases will be presented after preceptorship for evaluation and review to ensure clinical competency for reentry after proving formal assessment of clinical skills for each procedure, in lieu of which Dr. Rynerson may obtain ABMS recognized Board Specialty Certification. Dr. Loyd seconds the motion, and it passes.

Meenakumari Manoharan, MD (continued) – The Board reviewed the email and have further questions for the program. Administrative staff has called the program to see if they will speak with the Board to answer questions. The application has been tabled for later in the meeting to allow time to get the program on the phone.

Nathan Mulroy, MD – appeared before the Board without legal representation. Dr. Mulroy is a current participant in the Tennessee Medical Foundation (hereinafter TMF). Dr. Mulroy recently completed pediatric residency and has been offered a position at the Le Bonheur Emergency Department. Dr. Mulroy’s position will allow him time to continue to work on his physical and mental health as a means of coping with stressors. Dr. Michael Barron, Medical Director for TMF spoke on behalf of Dr. Mulroy. Dr. Mulroy has full TMF advocacy and has been actively attending multiple meetings a week. Dr. Loyd motions to grant a full and unrestricted license. Dr. Pearson seconds the motion. The motion passes.

Meenakumari Manoharan, MD (continued) – The Board spoke with Dr. Bedder who is the program director for the Addiction Medicine Fellowship Program at Medical College of Georgia. Dr. Bedder gave a glowing reference for Dr. Manoharan. The application has been tabled for later in the meeting to allow time to get the Preventative Medicine program at Meharry Medical College on the phone.

Christopher Braxton, MD – appeared before the Board without legal representation. Dr. Braxton has participated in a Physicians Health Program and has recommendations from the Tennessee Medical Foundation (hereinafter TMF) for the future. Dr. Braxton has moved to the Middle Tennessee area to accept a position in General Surgery. Dr. Braxton will complete his residency training as of August 31, 2022. Dr. Braxton admitted that while he did have some personal matters that affected his academic performance, the evaluation completed by Louisiana State University was conducted shortly after a vacation in which Dr. Braxton admits to making poor decisions during. Dr. Braxton has no history of substance abuse prior to or after the evaluation. Dr. Baron went over “Rule-Out Monitoring Agreements”

for the Board. Dr. Braxton's monitoring agreement with Louisiana would be transferred to Tennessee upon his acceptance of a position. The monitoring agreement is set to end in August 2023. Dr. Pearson motions to grant a full and unrestricted license contingent on Dr. Braxton signing a monitoring agreement with TMF until August 2, 2024. Dr. Keith Anderson seconds the motion and the motion passes.

Alan Rozen, MD – appeared before the Board without legal representation. Dr. Rozen appeared before the Board previously and is at the meeting today to get clarification regarding the Board's previous decision. The Board granted Dr. Rozen a limited license for one (1) year to allow Dr. Rozen to engage in a reentry plan. The reentry plan included a three (3) month preceptorship, and the preceptor must be board certified in the same field as Dr. Rozen's intended practice. The Board delegated the authority to the Board's Medical Consultant, Dr. Rene Saunders, to approve the preceptorship. Dr. Rozen has questions on whether the preceptor may be in a state he is currently licensed in, or if they had to be located in Tennessee. If Dr. Rozen were to partake in a preceptorship in a state where he is actively licensed, then it would obviate the reentry pathway, as he would be actively practicing in a state where he holds an unrestricted license. Dr. Rozen was presented with three options. Dr. Rozen may complete a preceptorship in Tennessee under the limited license granted by the Board at the May 24, 2022 meeting. The Board may grant Dr. Rozen an administrative license with Dr. Rozen's current licensure application, should Dr. Rozen choose to only practice administrative medicine in Tennessee. Lastly, if Dr. Rozen practices medicine outside of Tennessee in a state where he is fully licensed, he may apply for a full and unrestricted license. Dr. McLerran motions to table the application for up to four (4) months to allow time for Dr. Rozen to decide how he would like to proceed with licensure. Dr. Loyd seconds the motion, and it passes. Dr. Loyd motions to allow Dr. Rozen to choose a preceptor in a state where he is fully licensed. Dr. McLerran seconds the motion, and it passes.

Victor Scott, MD – did not appear before the Board. Administrative staff will invite him to appear at the September 27, 2022 meeting.

II. COLLABORATIVE PHARMACY PRACTICE RULE

Lucy Shell, PharmD, Executive Director for the Tennessee Board of Pharmacy provided an overview of Public Chapter 908, which requires the Board of Pharmacy to promulgate rules regarding collaborative practice agreements for Ivermectin. Under T.C.A. § 63-10-217, the Board of Pharmacy in collaboration with the Board of Medical Examiners and the Osteopathic Examination Board shall promulgate rules establishing appropriate minimum standards for collaborative practice agreements. The proposed change for Rule 1140-03-.17 will add "Ivermectin" to subparagraph 5(b) and will add "dispensing of Ivermectin" to subparagraph 6(a). Currently, collaborative practice agreements are required between a prescriber (licensed physician in the state), and a pharmacist. The physician must have an established relationship with the patient except when it relates to immunizations, opioid antagonists, and preventative care. Under the new statutory guidelines, Ivermectin would be added to the exceptions. The Board wishes to review the proposed rules further prior to taking action.

III. CONDUCT NEW BUSINESS

Discuss, consider and take action as needed regarding University of Memphis Limited Scope Radiography Program – The University of Memphis College of Health Sciences, in conjunction with Methodist LeBonheur Healthcare (MLH), is proposing a Limited Scope Radiography program. This program is being designed specifically for MLH employees that are currently serving as certified medical assistants. Eligible medical assistants will be given the opportunity for education and growth in the field of radiography. The program has appeared at the May Board of Medical Examiners meeting, and the decision was to table action pending the Medical Consultant's review of the program so recommendations may be made, and additional required information may be gathered. Dr. McLerran motions to approve the

program contingent on the endorsement of the Board's Medical Consultant, Dr. Rene Saunders. Dr. Anderson seconds the motion and the motion passes.

IV. CONSIDERATION OF APPLICATIONS (CONTINUED)

Christopher Braxton, MD (continued) – Dr. Braxton's application does not have a cleared criminal background check at the time of his interview. Dr. McLerran motions to grant a full and unrestricted license contingent on a cleared criminal background check and on Dr. Braxton signing an extended monitoring agreement with TMF until August 2, 2024. Dr. Loyd seconds the motion and the motion passes.

V. ACCME PRESENTATION

Dr. Graham McMahon, CEO of ACCME, appeared via telephone before the Board to provide an update regarding the ACCME continuing medical education tracking program CME Passport. Dr. McMahon has previously presented at the March 15, 2022, Board of Medical Examiners Meeting. The ACCME accredits 1680 organizations. These organizations provide about 171,000 activities yearly for continuing medical education. By use of the ACCME digital data infrastructure, physicians and State Medical Boards may track continuing medical education credits received from participating in any activities through organizations accredited by ACCME. By digitizing continuing medical education, information may be shared seamlessly to the physician and the licensing boards, while minimizing the amount of paper record keeping. CME Passport is offered for free to physicians and State Medical Boards and is already being utilized in several states. The goal of CME Passport is to move away from box checking behaviors to promote engagement in continuing medical education, while informing physicians of each states' requirements and whether or not the requirements are being met. The information reported on the CME Passport is gathered from the continuing medical education activities. The Board is unable to list CME Passport on the state website as they are currently in a non-compete contract with CE Broker. The contract with CE Broker is set for renegotiation in January 2023. ACCME will work with the Board to begin training of Board Administrators to allow utilization of CME Passport while contracts are being negotiated. Licensees may retrieve their own transcript by signing up on the website regardless of Board participation. The Board Administrative staff will work with ACCME to test pilot the system and report back to the Board at the September 27, 2022 meeting.

VI. CONDUCT NEW BUSINESS (CONTINUED)

Discuss, consider and take action if needed regarding CME policy changes due to rule change and notifying licensees – Ms. Baca-Chavez briefly reviewed the changes made to the rules regarding continuing medical education, along with the proposed policy changes to address the updated rules. An email blast has been proposed to notify licensees of the changes to the rule and policy.

Discuss, consider and take action if needed regarding Quiztime – Quiztime has asked if the Board would send an email blast to applicants regarding the Quiztime continuing medical education opportunities. In the email blast being sent to licensees regarding the policy change, there will also be information about Tennessee specific opioid education and places applicants may acquire these hours to include Quiztime as well as other entities which are often used by licensees. Dr. Hale motions to accept the policy changes and the proposed email blast to include the policy changes and TN specific opioid education opportunities. Dr. Pearson seconds and the motion passes.

Discuss, consider and take action if needed regarding CME waiver request – Izabela Burja, MD is requesting an exemption from the two (2) hours of Tennessee specific controlled substance prescribing guidelines continuing medical education requirement. Dr. Burja is a board-certified pathologist who does

not hold a DEA license. Dr. McLerran motions to deny the waiver request. The motion was seconded, and it passes.

Discuss, consider and take action if needed regarding Advisory Opinion request – Dr. Steven Haywood requested an advisory ruling to determine what level of control a Tennessee licensed hospital must have over its affiliate in order to meet the statutory definition of hospital affiliate. Dr. Haywood also inquired about what is considered “common control” for purposes of the statute and sought guidance on how to structure an affiliate relationship with a Tennessee hospital in order to meet the definition of a hospital affiliate. TCA § 63-6-204(f)(5), provides that a hospital licensed under title 68, chapter 11, or title 33, chapter 2, or an affiliate of a hospital, can employ licensed physicians other than radiologists, anesthesiologists, pathologists, or emergency physicians, to provide medical services subject to enumerated conditions in the statute. At this time, the Board has not promulgated rules that expound on or address the statutory provision in question. Dr. Blake requested the letter be amended to include July 19, 2022 as the date of discussion. Dr. Hale motions to accept the advisory ruling with the amended dates. Dr. Anderson seconds the motion and the motion passes.

VII. **UPDATES FROM TASKFORCES & COMMITTEE MEETINGS**

a. **Development Committee Meeting Update (Dr. Blake and Mr. Ellis) -**

- i. The Committee met yesterday, July 18, 2022.
- ii. CE Broker Contract – Elizabeth Minkoff, Senior Associate from the Office of General Counsel shared options regarding the contractual issues with CE Broker. The contract is up for renewal in January. The Committee also discussed the potential relationship with ACCME for the CME Passport database participation. The Committee has asked Ms. Minkoff to reach out to several different entities to discuss the nuances of the contractual process as time gets closer to renew the CE Broker contract. The Committee asked about carveouts for each Board to be able to accept other means of CME data collection.

VIII. **CONSIDERATION OF APPLICATIONS (CONTINUED)**

Meenakumari Manoharan, MD (continued) – Meharry Medical spoke to the Board regarding the ACGME requirements for their program. As such, Dr. Manoharan will not be able to continue in the program without a full and unrestricted license. Under the current statutes, the Board is unable to grant a full license to Dr. Manoharan. Dr. Manoharan withdraws her application for licensure.

Victor Scott, MD – did not appear before the Board. Dr. Hale motions to table the application until the September 27, 2022 meeting. Dr. McLerran seconds the motion and the motion passes.

IX. **CONSIDER AND APPROVE CONSENT AGENDA**

Dr. Hale motions to accept the consent agenda with the report from the Office of Investigations extracted. Dr. Anderson seconded the motion and it passed. The Consent Agenda contained the following:

1. Approval of May 23, 2022 Development Committee Meeting minutes
2. Approval of May 24-25, 2022 Board of Medical Examiners Meeting minutes
3. Approval of June 10, 2022 Board of Medical Examiners Special Meeting Minutes
4. Ratification of new licenses, reinstatement and renewals of Medical Doctors, MD X-Ray Operators, Genetic Counselors, Clinical Perfusion and Polysomnography
5. Review and approve Polysomnography Policy Statement
6. Review of Legislative Update
7. Review of Administrative Office Statistical Licensing Report

8. Review of the Office of General Counsel Report
9. Review and approve unlicensed practice Agreed Citations – Ruth Stewart, MD (license #26021) and Stephen Bollig, MD (license #25717).
Review and approve continuing education Agreed Citations – Pamela Hannah, RPSGT (license #530), Kimberly White, PSGT (license #840), Douglas MacGaw, MD (license #7103), Nancy Alison, MD (license #24597), Benjamin Evans, MD (license #19874).

The Board recessed for lunch.

X. REVIEW REPORT FROM THE OFFICE OF INVESTIGATIONS

Dorsey Luther, Legal Review Coordinator for the Office of Investigations presented the report. Ms. Luther went over the breakdown of each segment of the report as it pertains to the Board of Medical Examiners. Dr. Blake questioned if for each category the number of cases closed could be listed adjacent to the year-to-date number of cases opened. Ms. Luther states that due to the newer tracking system in use it will be easier to provide this information to the Board on future reports. Mr. Ellis motions to approve the report. Dr. Loyd seconds the motion and it passes.

XI. OVERVIEW OF INTENSIVE COURSES OFFERED BY CASE WESTERN RESERVE

Ted Parran, MD, FACP presented the Intensive CME courses for Physicians and other Health Professionals offered by Case Western Reserve University School of Medicine. The first of the intensive, skill based, longitudinal courses with outcome assessments were developed in 1992. Topic areas for the courses include controlled substance prescribing; medical documentation; managing inappropriate communications; medical ethics, boundaries, and professionalism; and Buprenorphine best practice updates. Each course takes a varied approach for assessment. This includes skill practices and feedback; standardized patient OSCEs; pre-post MCQ testing that is faculty generated; standardized testing (such as NBME Step II Ethics); reflective essays with faculty feedback; chart reviews; 360 feedbacks; and self-directed CQI project with faculty mentors. The Intensive Course in Controlled Substance Prescribing has had over three thousand nine hundred (3900) participants across all health professions over three decades. The course is offered three (3) times a year and they have been exploring a hybrid model since having to switch to virtual during the pandemic. All participants in the course practice substance abuse screening skills; family substance-use disorder skills; negotiating treatment plans skills; and dealing with scams skills. Assessment methods include pre-post reflective essay with faculty feedback; pre-post test; objective standardized clinical exam with standardized patients; verbal and check list feedback from standardized patients; and an optional four (4) month post course chart review. The Intensive Course in Managing Inappropriate Communications is offered virtually two (2) times a year. This course includes reflective essays, 360 assessment, objective standardized clinical exam with standardized patients, verbal and skills checklist feedback from standardized patients, narrative assignments, genogram, story hours, and CQI cycle and self-directed CQI project with faculty mentoring. The Intensive Course in Medical Ethics, Boundaries & Professionalism is offered in person, two (2) times per year with a hybrid model option. Assessments include reflective essays, objective standardized clinical exam with standardized patients, skills and verbal checklist feedback, pre-post tests, and MCQ test with most missed questions discussed. The Intensive Course in Medical Documentation is offered in person three (3) times per year. Assessments include pre-course provision of redacted charts, review by a Medical Records professional onsite, individualized feedback sessions, and post course chart provision at three (3) and six (6) months. The Buprenorphine Best Practices Update is offered virtually two (2) times per year. Assessments include pre-post reflective essays and an optional post course chart review. The course focuses on dosing

decisions, levels of patient supervision, concomitant prescribing of other controlled drugs, minimization of diversion, and patient monitoring. There is an emphasis on patient safety and boundary maintenance as well.

XII. DISCIPLINARY ORDERS

Consent Order(s)

Steven Flatt, MD – did not appear before the Board nor did his legal representative, Mr. David Steed, appear on his behalf. Mr. Michael Varnell represented the State. Dr. Blake, Dr. McLerran, and Dr. Hale recused. Respondent was licensed on May 31, 1989, which is currently set to expire on March 31, 2023. On or about September 2014, Respondent’s medical license was placed on probation by Consent Order for one (1) year for treating an individual with whom he had a romantic relationship. Respondent asserts that the individual had just moved to town, and treatment was until she located a new physician. The care included treatment for attention deficit disorder (ADD), anxiety, and hypertension. The medications prescribed were documented in the patient’s medical record and were administered in appropriate amounts. A year after treating the patient, Respondent referred the patient to another medical provider. Respondent accepted the proposed Consent Order as presented to him, without obtaining legal representation. An Order of Compliance was entered in 2015, upon completion of the one (1) year of probation and the remainder of the terms in the Consent Order. Respondent asserts that on or about April 5, 2016, following a spontaneous, in-person encounter with A.C., a personal friend, and a detailed discussion of her significant problems with insomnia, Respondent gave her a prescription for thirty (30) Zolpidem. Approximately nine (9) months later, on or about December 26, 2016, after another in-person encounter, Respondent gave A.C. a second prescription for Zolpidem, upon her report that the medication had been effective in remedying her insomnia and reducing her distress. Respondent asserts that his office medical record documenting the prescriptions was not contemporaneous; Respondent signed the records, noted as a late entry, on June 12, 2019. On or about April 7, 2018 Respondent wrote a prescription for ten (10) alprazolam (Xanax), 1 mg, a controlled substance, to a romantic partner, J.J., and created a contemporaneous record thereof. Respondent represents J.J. contacted Respondent by telephone on a Saturday night while Respondent was out of town, stating that she had run out of Xanax because her physician had closed his practice due to an accident, and that she believed she was in withdrawal. Respondent represents he was concerned J.J. might develop seizures from withdrawal and would likely reject advice to go to the emergency room, as she was a single parent with children. Respondent represents he prescribed this minimal amount of alprazolam necessary to protect J.J. from seizures until she could find a new physician on Monday. Respondent contends that this prescription was pursuant to an emergency situation and that refusing to call in this prescription to avoid a risk of seizures would have unnecessarily placed J.J. at significant risk of harm. The Department contends that the prescription was not acceptable for the following reasons: 1) there was a romantic relationship between Respondent and the patient; 2) it was not an emergency situation; 3) there was no bona fide doctor/patient relationship; 4) there was no adequately documented physical examination, diagnosis, or therapeutic plan, and; 5) Respondent did not check the patient’s Controlled Substances Monitoring Database report prior to prescribing the controlled substance. Respondent has already voluntarily completed multi-day CME courses through Case Western to address concerns relating to these facts. The facts stipulated are grounds for discipline. This order shall place Respondent’s medical license on probation for a period of no less than one (1) year. In addition to the coursework already completed, Respondent must enroll in and successfully complete within one (1) year of the effective date of this Order, the two (2) day medical course entitled “*Medical Documentation: Clinical, Legal and Economic Implications for Healthcare Providers*” offered at The Case Western Reserve University Continuing Medical Education Program at The Case Western Reserve University School of Medicine, or an equivalent course approved by the Board. Respondent shall pay two (2) Type C civil penalties for a total of two hundred dollars (\$200.00). Respondent shall pay all actual and reasonable costs of the case not to exceed two thousand dollars

(\$2,000.00). At the expiration of the probationary period, Respondent may file a Petition for Order of Compliance demonstrating compliance with all terms and conditions in this Order. Respondent must appear personally before the board as part of his Petition for Order of Compliance. Dr. Anderson motioned to approve the order. Mr. Ellis seconded, and the motion passed with Dr. Blake, Dr. McLerran, and Dr. Hale recused.

Roger Hodge, MD – did not appear before the Board nor did his legal representative, Mr. David Steed, appear on his behalf. Mr. Jae Lim represented the State. Mr. Ellis and Dr. McLerran recused. Respondent was licensed on June 18, 1986, which is currently set to expire on November 30, 2023. Until his resignation in May 2021, Respondent practiced internal medicine at Saint Thomas Medical Group in Nashville for over nineteen (19) years. On or about April 1, 2022, the Board entered an Agreed Order of Summary Action (hereinafter “Summary Action”) suspending Respondent’s ability to prescribe controlled substances after finding that Respondent improperly prescribed controlled substances to family members and coworkers and did not document those prescriptions in their medical records. Specifically, Respondent prescribed Xanax to several family members and did not document those prescriptions. Respondent admitted to the Department’s investigator that he took some of the prescribed Xanax for personal use. Prior to May 4, 2021, Respondent prescribed hydrocodone to two coworkers at his office practice to treat their medical conditions. During the ongoing course of treatment, these coworkers agreed to Respondent’s request to share the prescribed hydrocodone with him on workdays. Respondent took one hydrocodone a day during work at his medical practice, but none after May 4, 2021. Following his resignation from Saint Thomas Medical Group, Respondent promptly sought help from the Tennessee Medical Foundation (hereinafter “TMF”) and signed the 5-year TMF Aftercare Agreement in July 2021. He has since fully complied with all recommendations and requirements of the Aftercare Agreement. Since October 2021, Respondent has been employed by Centurion, which provides medical care to inmates at Tennessee Department of Corrections facilities. The facts stipulated are grounds for discipline. This order shall place Respondent’s medical license on probation for a period of two (2) years. Respondent is prohibited from prescribing any and all controlled substances for the six (6) months following April 1, 2022. Following the period of prohibition on prescribing controlled substances, Respondent’s ability to prescribe controlled substances must strictly adhere to the conditions outlined in the Order for the remainder of the probation. Additionally, Respondent will be subject to practice monitoring during the two-year period of probation. If Respondent is no longer employed by Centurion to work at Tennessee Department of Corrections facilities, he must notify the Board within ten (10) days. Respondent is restricted against collaborating with any advanced practice registered nurses or physician assistants for prescribing controlled substances during the period in which Respondent is prohibited from prescribing controlled substances. Respondent shall maintain advocacy of the TMF and shall continue his contract with the TMF for at least the duration of his probation. Respondent must successfully complete the three-day medical course entitled *Prescribing Controlled Drugs* offered by Vanderbilt University Medical Center. Respondent shall pay four (4) Type A civil penalties for a total of two thousand dollars (\$2,000.00). Respondent shall pay all actual and reasonable costs of the case not to exceed sixteen thousand dollars (\$16,000.00). At the expiration of the two (2) year probation and upon completing all requirements stated in the Order, Respondent may file a Petitioner for Order of Compliance. As part of his petition, Respondent must physically appear before the Board. Dr. Hale motioned to approve the order. Dr. Pearson seconded and the motion passed with Mr. Ellis and Dr. McLerran recused.

Terry Adams, MD – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Francine Baca-Chavez represented the State. Respondent was licensed on August 20, 1981, which is currently set to expire on April 30, 2023. Respondent held surgical privileges at Parkwest Medical Center (hereinafter “Parkwest”) until he surrendered those privileges on or about August 12, 2021. At the time of surrender, there was an active facility investigation regarding inappropriate behavior by Respondent towards nurses and other staff members at the hospital. During his time at Parkwest, Respondent repeatedly made inappropriate comments with a sexual undertone to female employees, including

referring to his anatomy as his “dingdong” and making comments about the size. On or about July 2021, Respondent got blood on his pants during a surgery, Respondent was asked by staff to go to the physician lounge and change his pants, however, he refused and changed his pants in the surgery room in front of the entire staff. The facts stipulated are grounds for discipline. This order shall reprimand Respondent’s medical license. Within thirty (30) days, Respondent agrees to contact the Tennessee Medical Foundation (hereinafter “TMF”) for the purpose of arranging an evaluation. The evaluation should be completed within sixty (60) days. Respondent shall cause a copy of this evaluation and the TMF assessment to be forwarded to the Board’s consultant by TMF. Respondent shall comply with any and all recommendations by TMF. Within thirty (30) days, Respondent must enroll in a distressed physician’s course such as the one offered at Vanderbilt Medical Center. Respondent shall pay one (1) Type A civil penalties for a total of one thousand dollars (\$1,000.00). Respondent shall pay all actual and reasonable costs of the case not to exceed three thousand dollars (\$3,000.00). Dr. Hale motioned to approve the order. Dr. Loyd seconded and the motion passed.

Patrick Toy, MD – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Francine Baca-Chavez represented the State. Respondent was licensed on July 19, 2005, and that license expired on September 30, 2021. On or about February 24, 2021, in US v. Toy, case number 4:21-CR-5 LPR, in the US District Court for the Eastern District of Arkansas Central Division, Respondent pleaded guilty to one count of making a false statement, a felony. Respondent, by and through his guilty plea, agreed to the following elements of the crime: Defendant knowingly and intentionally made the statement as charged; the statement was false; the statement concerned a material fact; the statement was about a matter within the jurisdiction of the FBI; and Defendant knew it was untrue when he made the statement. As a result of Respondent’s guilty plea, he was sentenced to three (3) years probation and a fine of one-hundred and sixty thousand dollars (\$160,000). The facts stipulated are grounds for discipline. This order shall place Respondent’s medical license on probation, which shall run concurrently for the duration of the Respondent’s criminal probation. During the period of probation, Respondent shall maintain good and lawful conduct, and any violation of law that relates to the practice of medicine or Respondent’s ability to safely and competently practice medicine will be a violation of the terms of this Order. During the period of probation and while the Respondent’s license remains encumbered, Respondent shall not serve as a supervising or collaborating physician, or substitute supervising or collaborating physician, to any advanced practice registered nurse, physician assistant, or pharmacist. At the expiration of the probationary period, Respondent becomes eligible to petition the Tennessee Board of Medical Examiners for an “Order of Compliance” lifting the restrictions imposed by this Consent Order. As part of his petition, Respondent shall appear personally before the Board. Respondent shall pay all actual and reasonable costs of the case not to exceed four thousand dollars (\$4,000.00). Mr. Ellis motioned to approve the order. Dr. Loyd seconded and the motion passed.

Jah Fatimah, MD – did not appear before the Board nor did a legal representative appear on her behalf. Ms. Francine Baca-Chavez represented the State. Respondent was licensed on September 26, 2013, which is currently set to expire on May 31, 2023. On or about October 13, 2021, the Rhode Island Board of Medical Examiners reprimanded Respondent’s medical license with the following findings: The Board was notified Respondent failed to properly document patient care that was provided during telemedicine visits with two patients. Respondent submitted a written response to the Board and appeared via telephone before the Investigative Committee. Respondent stated that she worked three different telemedicine companies from about April 2018 to about September 2019. In her written response, Respondent stated that she has left her previous employers relevant to this complaint. The Investigative Committee determined, based on information supplied, that she is licensed in eight (8) other states. Respondent was paid a flat fee for every patient encounter but was unable to produce medical records documenting her care sufficient to meet the Telemedicine Guidelines established by the Board. The Investigative Committee reviewed the above-referenced complaint, response, and investigative materials, and concluded that Respondent did not keep appropriate medical records for the telemedicine patient

encounters referenced above and, therefore, violated the Rhode Island Department of Health, Board of Medical Licensure and Discipline Guidelines Regarding the Telemedicine Rules. The facts stipulated are grounds for discipline. This order shall reprimand Respondent's medical license. Within six (6) months, Respondent shall provide proof of the twenty-one (21) hours of Continuing Medical Education related to the care of patients by Telemedicine and maintaining appropriate medical records documenting the history obtained, examination performed, assessment of the patient's condition and recommendations for care, as required by the Rhode Island Consent Order. Respondent shall pay all actual and reasonable costs of the case not to exceed five thousand dollars (\$5,000.00). Dr. Hale motioned to approve the order. Dr. Anderson seconded and the motion passed.

David Kickliter, MD – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Francine Baca-Chavez represented the State. Respondent was licensed on May 4, 1987, which is currently set to expire on December 31, 2022. Respondent is a Family Medicine Practitioner practicing at The Family Practice Center in Newport, Tennessee. From at least October 2015 through at least December 2021, Respondent routinely prescribed controlled and non-controlled substances to himself and members of his family at times without proper documentation for the prescriptions. The prescriptions were not written pursuant to an emergency as Respondent served as the primary care physician for his family. Respondent was aware that it was improper to prescribe to himself. Respondent wrote prescriptions for controlled substances to himself which included prescriptions for Eszopiclone, Belsomra, and Diphenoxylate-Atropine. Respondent wrote prescriptions for controlled substances to his wife which included prescriptions for Eszopiclone, Belsomra, Diphenoxylate-Atropine, testosterone micronized powder, and Hydrocodone-Chlorphen. Respondent wrote prescriptions for controlled substances to at least four of his grandchildren which included prescriptions for Guaitussin AC liquid and Diphenoxylate-Atropine. Respondent wrote prescriptions for controlled substances to two of his sons which included prescriptions for testosterone, Guaitussin AC liquid and Diphenoxylate-Atropine. Respondent wrote prescriptions for controlled substances to his brother which included prescriptions for Diphenoxylate-Atropine. Respondent wrote prescriptions for controlled substances to two of his daughters-in-law which included prescriptions for Guaitussin AC liquid, Oxycodone, and Alprazolam. The facts stipulated are grounds for discipline. This order shall place Respondent's medical license on probation for a period of five (5) years. Within ninety (90) days, Respondent must provide proof to the Disciplinary Coordinator that he has notified any physicians, podiatrists, advanced practice registered nurses, or physician assistants with whom he collaborates of the discipline. Respondent shall not prescribe opioids for at least six (6) months, and until successful completion of the continuing education contained in the Order. Respondent shall pay one (1) Type A civil penalties and ten (10) Type B civil penalties for a total of six thousand dollars (\$6,000.00). Respondent shall pay all actual and reasonable costs of the case not to exceed three thousand dollars (\$3,000.00). During the period of probation, Respondent shall not serve as a collaborating physician or substitute collaborating physician. At the expiration of the probationary period, Respondent becomes eligible to petition the Tennessee Board of Medical Examiners for an "Order of Compliance" lifting the restrictions imposed by this Consent Order. As part of his petition, Respondent shall appear personally before the Tennessee Board of Medical Examiners. Dr. Loyd motioned to accept the order. Dr. Hale seconded the motion and the motion passed.

Grayson Wheatly, III, MD – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Francine Baca-Chavez represented the State. Respondent was licensed on July 28, 2016, which is currently set to expire on October 31, 2023. On or about February 16, 2021, Respondent entered into a Consent Order with the Arizona Medical Board that issued a censure and assessed a civil penalty against Respondent's license for failing to maintain adequate records, making false statements, fraudulent billing practices, and inappropriately prescribing through a telemedicine encounter without a first-time examination of the patient. On or about June 25, 2021, the Medical Board of California issued a public letter of reprimand to the Respondent. Respondent failed to timely report the California action pursuant to the Consumer Right to Know Act. The facts stipulated are grounds for discipline. This order shall

reprimand Respondent's medical license. Respondent shall pay one (1) Type C civil penalty in the amount of one hundred dollars (\$100.00). Respondent shall pay all actual and reasonable costs of the case not to exceed one thousand dollars (\$1,000.00). Dr. Loyd motioned to approve the order. Dr. Hale seconded and the motion passed.

XIII. **ORDERS OF COMPLIANCE**

Tracy H. Goen, MD – did not appear before the Board nor did his legal representative, Mr. Robert J. Kraemer, Jr., appear on his behalf. Ms. Francine Baca-Chavez presented the Order of Compliance. Dr. Loyd recused. Dr. Goen previously petitioned for an Order of Compliance, which placed his license on probation for a period of ten (10) years and was conditioned on the entering into and maintaining one-hundred percent advocacy with the Tennessee Medical Foundation. Although the original Adverse License Action required appearance for the Order of Compliance that placed the petitioner's license on probation, there was not mention of an appearance required for an additional Order of Compliance to lift the probation from Dr. Goen's license. As such, the petitioner and his legal representative did not appear before the Board, however they are willing to if the Board should require. The ten-year probationary period will expire July 24, 2022. It is the position of the Disciplinary Coordinator and the Office of General Counsel that he is compliant with the terms of his previous order. Dr. Pearson motioned to accept the order of compliance to lift the probation from Dr. Goen's license as of July 24, 2022. Mr. Ellis seconded the motion and it passed with Dr. Loyd recused.

Next Development Committee Agenda

- a. NP/PA supervision termination documents
- b. CE Broker contract
- c. FCVS Profiles
- d. TMF contracts and Agreed Orders
- e. Board Member Education

XIV. **PUBLIC COMMENT** – No public comment.

The Board recessed at 2:55 pm CT.



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

Day Two of the Regular Meeting of the Tennessee Board of Medical Examiners

Wednesday, July 20, 2022

A panel of the Tennessee Board of Medical Examiners were called to order at 9:00 a.m. in the Poplar Room Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243.

Board members present: Samantha McLerran, MD
John Hale, MD
James Diaz-Barriga, Consumer Member

Staff present: Paetria Morgan, JD, Office of General Counsel
Candyce Wilson, Administrative Director
Brandi Allocco, Board Administrator
Samantha Green, Board Administrator

Hearing for Declaratory Order – Poplar Room

**Hannah Lonsdale, MD v. State of Tennessee Board of Medical Examiners
Poplar Room**

Administrative Law Judge: Shannon Barnhill

Panelists: Samantha McLarren, MD, James Diaz-Barriga, Consumer Member, and John Hale, MD

Counsel for State: Paetria Morgan, Deputy General Counsel

Counsel for Respondent: Kaitlin Parham, Esq. and Adam Castellarin, Esq.

A panel of the Board heard the position of the Petitioner and the State and reviewed any evidence presented. After discussion and consideration, the panel motioned and seconded, which was followed by an approval of the following Final Order with all findings of fact and conclusions of law considered and agreed upon.

Petitioner, Hannah Lonsdale, MD, attended the University of Edinburg and graduated with a Bachelor of Medicine and Surgery in 2006. The University of Edinburgh's Bachelor of Medicine and Surgery is accredited by the UK General Medical Council and is recognized by the Medical Board of California. After medical school and a two-year internship, the Petitioner attended and completed a residency program, for specialty training in anesthesia, in the United Kingdom, from 2008 to 2015. In 2011, the Petitioner was formally inducted into the Fellowship of the Royal College of Anaesthetists (FRCA), which is functionally equivalent to the certification by the American Board of Anesthesiology, and will satisfy Vanderbilt University Medical Center's requirement for Board Certification. Following her residency, the Petitioner completed a one-year clinical fellowship in pediatric anesthesia, specifically

pediatric critical care and resuscitation, at Alder Hey Children's NHS Foundation Trust in the United Kingdom from 2015-2016. After her clinical fellowship, the Petitioner was a consultant (attending physician) in pediatric anesthesiology at Sheffield Children's Hospital NHS Foundation Trust in the United Kingdom from 2016-2019. In 2019-2021, the Petitioner accepted a position as a faculty research associate at The Johns Hopkins University. In June 2021, the Petitioner successfully completed the United States Medical Licensing Examination. From July 2021 to present, the Petitioner began her post-doctoral fellowship in pediatric anesthesiology at The Johns Hopkins Hospital Children's Center. The Petitioner has accepted an offer from Vanderbilt University Medical Center to work as an Assistant Professor of Anesthesiology, Pediatric Division, pending approval of a full and unrestricted Tennessee medical license. The Petitioner has a highly specialized and unique expertise in clinical research addressing questions in pediatric anesthesiology that will benefit patients. The Petitioner will bring this rare skillset to Vanderbilt and will strive to provide superior evidence-based care for anesthetic management to greatly improve patient outcomes and patient satisfaction in Tennessee. Regarding her academic work, the Petitioner has developed an impressive portfolio and has made new and original contributions to the field of pediatric anesthesiology. Her work produces research that directly affects Tennessee's patient population and is also read by physicians around the globe. The Petitioner has been invited to speak on the national and international level. The Petitioner completed six years of medical school at a California-list-approved school in the United Kingdom, two years of an internship program at a respected training program in the United Kingdom, seven years of anesthesiology residency, including training in pediatric anesthesiology, at a respected institution in the United Kingdom, one year as a clinical fellow in pediatric anesthesiology in the United Kingdom, three years as an attending consultant anesthesiologist in the United Kingdom, induction into the Fellowship of the Royal College of Anaesthetists, two years as a faculty research associate at The Johns Hopkins University, successfully completed all three steps of the USMLE, successfully completed the ECFMG, received a postgraduate certificate in Workplace-Based Medical Education, completed a Masters level module in Medical Leadership Development, and is currently completing her post-doctoral fellowship in pediatric anesthesiology at The Johns Hopkins Children's Center. The Petitioner has sixteen years of experience as a physician, with many years of anesthesia training and experience. While the Petitioner's education does not fulfill Rule 0880-02-.04(5) regarding residency, her education, experience, and skillset meet or exceed any competency requirement for physicians in the State. Given the Petitioner's rare skillset and the need for her unique pediatric anesthesiology expertise, the citizens of Tennessee would benefit by her having a full and unrestricted Tennessee medical license. The petition for Declaratory Order, for this Petitioner, was approved.

Hearing for Declaratory Order – Poplar Room

**Celine Richard, MD v. State of Tennessee Board of Medical Examiners
Poplar Room**

Administrative Law Judge: Shannon Barnhill

Panelists: Samantha McLarren, MD, James Diaz-Barriga, Consumer Member, and John Hale, MD

Counsel for State: W. Michael Varnell, Deputy General Counsel

Counsel for Respondent: C. J. Gideon

A panel of the Board heard the position of the Petitioner and the State and reviewed any evidence presented. After discussion and consideration, the panel motioned and seconded, which was followed by an approval of the following Final Order with all findings of fact and conclusions of law considered and agreed upon.

Petitioner, Celine Richard, MD, Petitioner is an international medical school graduate who has not submitted evidence of the satisfactory completion of a three-year US ACGME accredited residency and is not currently certified by an American Board of Medical Specialties, specialty board. Petitioner attended

the University of St. Etienne, School of Medicine in France and obtained a medical degree in October of 2008. Following her medical degree, Petitioner obtained a Ph.D. in neuroscience from the University of Lumiere Lyon II, in Lyon, France in March of 2011. Petitioner completed an otolaryngology internship/residency at the University of St. Etienne Hospital in France from approximately 2003 through 2008. Petitioner completed an ENT Head and Neck Surgical/Clinical Fellowship at the University of St. Etienne Hospital in France from approximately May 2009 through May of 2011. Petitioner completed a research fellowship in ENT at the House Ear Institute at the University of Southern California from approximately June 1, 2011, through June 30, 2012. Petitioner completed an ENT Head and Neck Surgical/Clinical Fellowship at the University of St. Etienne Hospital in France from approximately July 2012 through June of 2013. From approximately July 2013 through December of 2015, Petitioner served as the Medical Director for the Division of Pediatric Otolaryngology and Co-Director of the Geneva-Lausanne Cochlear Implant Center CHUV/CURIC in Switzerland. Petitioner completed a pediatric otolaryngology ENT fellowship at Nationwide Children's Hospital, Ohio State University in Columbus, Ohio from approximately July 2020 through June 2021. Petitioner completed a pediatric otolaryngology oncology ENT fellowship at St. Jude's Research Hospital and LeBonheur Children's Hospital, University of Tennessee Health Science Center in Memphis, Tennessee from approximately July 2021 through June 2022. Petitioner currently holds a training certificate in Ohio which expires in June 2023, Petitioner has had no disciplinary action taken on this training certificate. Petitioner also holds medical licenses in France and Switzerland. Petitioner has had no disciplinary actions taken on these licenses. Petitioner has authored over forty (40) peer reviewed publications and has also authored book chapters. There is a significant need for a physician with her qualifications to maintain the level of care needed to provide otolaryngology services to children in this state. The Petitioner has satisfied by preponderance of evidence that the training she received meets or exceeds the requirements. The petition for Declaratory Order, for this Petitioner, was approved.

This concludes the Board of Medical Examiners Day 2 meeting.