



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

**Tuesday, November 7, 2023**

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**MINUTES**

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The regular board meeting of the Tennessee Board of Medical Examiners was called to order at 9:00 a.m. in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Dr. Stephen Loyd, Board Vice President.

Board members present:	Stephen Loyd, MD, Vice President Michael Bittell, Consumer Member Keith Anderson, MD Samantha McLerran, MD Todd Tillmanns, MD James Diaz-Barriga, Consumer Member John McGraw, MD
Board member(s) absent:	Melanie Blake, MD, President Deborah Christiansen, MD Randall Pearson, MD Jennifer Claxton, Consumer Member John Hale, MD
Staff present:	Francine Baca-Chavez, JD, Office of General Counsel W. Reeves Johnson, MD Interim Medical Director Kavita Vankenini, MD Medical Director Stacy Tarr, BME Executive Director Brandi Allocco, Administrative Director Samantha Green, Board Administrator Jeffrin Zachariah, Board Administrator

The meeting began with a moment of silence in honor of Veterans in the state of Tennessee and an introduction to new Board members.

**I. ELECTION OF OFFICER**

Mr. Robert Ellis has completed his term with the Board of Medical Examiners, which leaves a vacancy for Board secretary. Dr. Keith Anderson nominates Dr. Samantha McLerran for the position of Board Secretary. Dr. McLerran accepts the position and the motion passes unanimously.

## II. CONSIDERATION OF APPLICATIONS

### **Medical X-Ray Applicant Interview(s):**

**Lynn Tillery-Pearson, MDXL** – appeared before the Board without legal representation. Ms. Tillery-Pearson is an applicant for licensure reinstatement who has been out of clinical practice since 2012. She has completed ninety (90) hours of continuing education within the previous six (6) months. Dr. John McGraw motions to grant a license contingent on the completion of one hundred ninety (190) hours of supervision to include ninety (90) hours of general X-Ray scans. A letter of completion shall be submitted to the Board’s Consultant for approval. The supervising technician must be certified in bone densitometry. Ms. Tillery-Pearson’s application will be tabled for a period of up to one (1) year to allow her to complete the 190 hours of supervised scans. Dr. Anderson seconds the motion. It was noted by administrative staff that Ms. Tillery-Pearson is reinstating a limited scope bone densitometry license. The motion is withdrawn by Dr. McGraw. Dr. McGraw motions to grant a limited scope bone densitometry license contingent on the completion of one hundred (100) hours of supervised bone densitometry scans. The preceptor must be approved by the Board’s medical consultant. Additionally, ten (10) scans should be reviewed by an expert in the field to confirm Ms. Tillery-Pearson’s technical abilities. At the conclusion of the preceptorship, the preceptor should submit a letter of successful completion to the Board’s medical consultant for review and consideration. Dr. McLerran seconds the motion and the motion passes.

### **Medical Doctor Applicant Interview(s):**

**Ismail El-Hamamsy, MD** – did not appear before the Board. His legal representation, Ms. Kimberly Silvus, appeared on his behalf. Dr. El-Hamamsy is an applicant for single purpose licensure with no malpractice history, no criminal history, and no prior board action. Dr. El-Hamamsy is not able to provide verification of credentials by a specialty organization in this country, as required by Rule 0880-02-.07(5)(c). Ms. Silvus spoke on behalf of Dr. El-Hamamsy and his sponsoring hospital Vanderbilt University Medical Center. Ms. Silvus went over the procedure Dr. El-Hamamsy would be performing and his credentials as a leading expert in that procedure. Ms. Silvus requests the Board consider Dr. El-Hamamsy’s verification of credentials from the Royal College of Physicians and Surgeons. Ms. Francine Baca-Chavez reviewed Rule 0880-02-.07(5) for the Board along with their options for consideration of this application. Ms. Baca-Chavez also noted that the Board does not usually allow for applicants to have an attorney appear on their behalf, however the Board may allow it given special circumstances. Dr. Loyd noted that due to the emergent nature of the case and given Dr. El-Hamamsy’s credentials, it would be appropriate to consider waving the in-person interview and approving the single purpose license. Dr. McLerran motions to accept Dr. El-Hamamsy’s verification of credentials from the Royal College of Physicians and Surgeons and to waive in-person appearance requirement for interview given the special circumstances. The single purpose license will be issued for a period of one year. Dr. McGraw seconds the motion, and it passes.

**Allen Walker, MD** – appeared before the Board without legal representation. Dr. Walker has previously appeared before the Board in May 2023 and July 2023. Dr. Walker is appearing today to present his re-entry plan to the Board for consideration. Dr. Walker is an applicant for initial licensure. Dr. Walker has previously held a TN Medical License, which he voluntarily surrendered (same as revocation). Dr. Walker has been out of clinical practice since 2012. During the previous appearances, the Board requested Dr. Walker meet with the Tennessee Medical Foundation (hereinafter “TMF”). Dr. Michael Baron, Medical Director for TMF, reported to the Board that Dr. Walker had completed a comprehensive evaluation which found Dr. Walker fit for duty. Dr. Walker shared the components of the University of California at San Diego’s reentry program stating it is a twelve-month program that includes

preceptorship, monthly meetings, and required coursework. Dr. McGraw motions to grant a limited license for a period of one (1) year to allow Dr. Walker to complete a preceptorship. The limited license will be issued contingent on signing a lifetime monitoring contract with TMF and maintaining advocacy. Upon completion of the preceptorship, a letter of successful completion should be submitted to the Board's medical consultant for consideration. Dr. Anderson seconds the motion and the motion passes.

**Abdulrahman Rageh, MD** – appeared before the Board without legal representation. Dr. Rageh appeared before the Board previously at the September 2023 meeting. Dr. Rageh is an applicant for initial licensure with no malpractice history, no criminal history, and no prior board action. Dr. Rageh is an International Medical School graduate who has not completed three years US ACGME accredited training and is not board certified. At the September meeting, the Board tabled the application to allow Dr. Rageh to submit a Petition for Declaratory Order for the Board's consideration, which he has done. Dr. McLerran motions to accept Dr. Rageh's Petition for a Declaratory Order. Mr. James Diaz-Barriga seconds the motion, and it passes with Mr. Michael Bittel abstained.

**Naguib Farah, MD** – appeared before the Board without legal representation. Dr. Farah is an applicant for initial licensure with no malpractice history, no criminal history, and no prior board action. Dr. Farah is an International Medical School graduate who has completed a three (3) year US ACGME accredited residency, passed all steps of the USMLE, and is currently ABMS board certified. Dr. Farah is unable to provide the required medical school transcript from Egypt. Dr. Farah has submitted an ECFMG certificate of completion as proof of completion of medical school. Dr. McLarren motions to grant a full and unrestricted medical license. Dr. McGraw seconds the motion and the motion passes.

**Sharon Carson, MD** – appeared before the Board without legal representation. Dr. Carson is an applicant for initial licensure with no criminal history, no malpractice history, and no prior board action. Dr. Carson is a Canadian medical school graduate who has completed the required postgraduate training but has only taken the LMCC exam and does not hold another state license. Dr. Carson has submitted a Petition for Declaratory Order for the Board's consideration. Dr. Anderson motions to accept Dr. Carson's Petition for Declaratory Order. Dr. McLerran seconds the motion and the motion passes.

### III. UPDATE FROM WILLIAM REEVES JOHNSON, MD

William Reeves Johnson, MD, Interim Medical Director Board of Medical Examiners, provided an update from the Federation of State Medical Boards. This year's topic is artificial intelligence and the use of advanced data analytics. The Federation of State Medical Boards' annual meeting will be held in Nashville in April 2024, and Dr. Johnson encourages the Board members to attend.

Dr. Johnson thanked the Board for allowing him to serve as the Board's interim medical consultant. He briefly went over the changes to the licensure process that the Board made during his time as interim consultant that helped reduce redundancy and time spent completing applications.

### IV. BOARD MEMBER EDUCATION

Ms. Tracy Alcock, Deputy General Counsel for the improper prescribing team. Ms. Alcock is before the Board to provide an overview of the prescribing guidelines and laws.

Ms. Alcock went over the process of Pain Clinic licensure, inspections and discipline, which is under the authority of the Commissioner of Health. The Commissioner of Health is responsible for promulgating rules and guidelines for Pain Management Clinics. The Tennessee Department of Health Bureau of Investigations inspects the clinics and provides the inspection reports to a team of consultants for review.

These reviewers include a physician, an advanced nurse practitioner, and an Office of General Counsel attorney. If a clinic is found to be in minor violation of the guidelines, a letter of concern or a letter of warning may be issued. For issues requiring immediate correction, a corrective action plan may be ordered. For substantial or repetitive quality of care issues, the clinic may be referred to the Office of General Counsel for disciplinary action against the pain clinic license. If warranted, a complaint may be opened on the license of the medical director of the clinic. Medical directors and other providers may only be disciplined by their respective licensing boards. If the pain management clinic is disciplined, the disciplinary action is not reported to the Board of Medical Examiners as the discipline is only against the clinic. The Board of Medical Examiners may decide to discipline the medical director, or any medical doctor involved with the pain management clinic, separate from the pain management clinic's disciplinary action.

Ms. Alcock continued her presentation with the current status of the chronic pain guidelines, and whether or not discipline can result from violation of the guidelines. T.C.A. § 63-1-401 requires the Department of Health Commissioner to develop recommended treatment guidelines for prescribing opioids that can be used by Tennessee Prescribers as a guide for caring for patients. The law requires the Commissioner to review these guidelines annually and to post them on the Department's website. The guidelines shall be submitted to each prescribing board that licenses health professionals who can legally prescribe controlled substances. Each board shall review the treatment guidelines and determine how these guidelines can be used by the respective board's licensees. Each board shall disseminate the guidelines and use of said guidelines to their licensees. This year, in reviewing the Tennessee pain guidelines, the Commissioner set up an initial internal review process. This internal review process involved consultants which included a pain management specialist. The consultants review the guidelines to provide feedback to the Commissioner including information about outdated materials. After the internal review process, the updated version of the guidelines will be shared with the prescribing Board chairs and to the executive directors of the Tennessee Pain Society and the Tennessee Medical Association, so they may provide feedback that they have to the Commissioner for his consideration. The Commissioner has the ultimate decision on the guidelines. The guidelines are not law, so discipline does not result directly from violation of the guidelines, however if an improper prescribing case is brought before the Board, an expert witness may be called to provide testimony on the standard of care, which may include citation of the guidelines. T.C.A § 68-1-128 is the statute concerning frequent or high-risk prescribers of controlled substances. The law requires the Department of Health to annually identify the top fifty prescribers of controlled substances; the top twenty prescribers of buprenorphine products; the top ten prescribers of controlled substances in all of the counties combined having a population less than fifty thousand; and high-risk prescribers based on clinical outcomes. The law requires the Department of Health send out letters to prescribers identified in the above lists, and to the collaborating physician for any mid-levels on the lists. If the Department of Health is not satisfied by any explanation given by the prescriber or the collaborating physician, then it will communicate the concerns to the prescriber via registered mail. The prescriber or collaborating physician will then have an additional fifteen days to respond with more explanation regarding the areas of concern. If the Department of Health remains unsatisfied after receiving the second justification response, they may submit its concerns to a member of the controlled substances database committee, who represents the Board that licenses the individual. This member would have access to all of the documents pertaining to the concerns of the Department and the expert reviewer. If that member also believes the explanations are not sufficient in justifying the prescribing pattern of the prescriber, the concerns may be forwarded to the Department of Health's Office of Investigation. Investigations will then be conducted for the license of that prescriber. Ms. Alcock notes there are a greater number of non-responses to the letters than there are poor responses. Being identified on one of the lists does not automatically result in disciplinary action. It is the consensus of some Board Members that providers should be educated on proper prescribing during medical school and residency training as many do not learn about improper prescribing until they are disciplined by their licensing Board. The Commissioner has the authority by statute over the Tennessee Pain Management Clinics, Pain Clinic Guidelines, Chronic Pain Guidelines, and the top prescribers list. The Board of Medical Examiners

(“BME”) has authority of its licensees. BME can choose to adopt guidelines as they pertain to its licensees and BME can choose whether or not to discipline its licensees. Ms. Alcock concluded the presentation with a brief overview of how improper prescribing complaints are handled.

#### V. CHRONIC PAIN GUIDELINES UPDATE

Dr. Christopher Stanley, MD, Director of Special Projects, appeared before the Board to give an update on the Tennessee Chronic Pain Guidelines. An internal review of the guidelines has been completed and has been returned to the Commissioner so he may complete the update to the guidelines. An Epidemiologist gives data regarding Opioid related deaths to facilitate the update of the guidelines.

The Board recessed for lunch.

#### VI. TENNESSEE PAIN SOCIETY

Robin Hoyle, JD, Executive Director for the Tennessee Pain Society (“TPS”), introduced herself to the Board prior to turning the presentation over to Mr. Yarnell Beatty. Yarnell Beatty, JD, General Counsel for the Tennessee Medical Association (“TMA”), introduced Dr. David Arehart, MD, Dr. John Schneider, MD, and Mr. David Steed. Mr. Beatty spoke on behalf of TMA and TPS regarding suggestions and concerns surrounding the disciplinary actions that result from the pain management clinic inspections. One suggestion was to provide pain clinics with a score akin to a restaurant rating, so the pain management clinics know if they have passed or failed the inspection. The scoring of these clinics would be based on a checklist that all can reference to be sure they are in compliance. When the pain management clinic is given a score, they should have the opportunity to remedy areas of noncompliance, similar to restaurants who are given a week to correct deficiencies prior to having an inspection to ensure those deficiencies have been addressed. Another suggestion is to allow pain management clinics the ability to request an advisory opinion to ensure they are complying with rules and policies that may be more nuanced. A concern presented by the group are the number of prescribers leaving the state due to the rules and the letters they have received from the Department of Health notifying them that they are on one of the top prescribers lists addressed in the previous presentation. Many of the prescribers retain counsel to respond to the letters as they fear being disciplined due to their prescribing practices as pain management specialists. The suggestions made are to reassess the algorithm for the top prescriber lists and to tone down the language of the letters, so they do not sound threatening. Finally, TPS suggests education be provided to all pain management specialists regarding the inspection process. The Board will provide the recommendations presented to the Commissioner through the Board President, Dr. Melanie Blake.

Ms. Mary Katherine Bratton, General Counsel for the Department of Health, briefly responded to some of the suggestions and concerns raised by TPS and TMA, prior to the Board’s next agenda item.

#### VII. CONDUCT NEW BUSINESS

Discuss, consider and take action as needed regarding Change in Federal Law – Portability of professional licenses of service members and their spouses: Ms. Francine Baca-Chavez went over the change in federal law that allows service members and their spouses to use their professional licenses and certificates in certain circumstances where they must relocate due to military orders. Ms. Baca-Chavez went over the five criteria that the service members and their spouses must meet in order to qualify. No action needs to be taken by the Board regarding this law. The Department of Health will promulgate rules for this law on behalf of all the Boards.

Discuss, consider and take action as needed regarding update on FARB Conference – Brittani Kendrick, Office of General Counsel: Ms. Kendrick provided an overview on topics of interest at the FARB Conference. Topics included regulatory ethics, use of artificial intelligence and the influence artificial intelligence has on the practice of regulatory litigation, and finally the use of expert witnesses in cases. Discuss, consider and take action as needed regarding sending Medical Consultant, Executive Director and Board Member to FSMB Symposium on AI, January 17, 2024: Dr. McGraw motions to send the Board’s Medical Consultant, the Board’s Executive Director, and a volunteer Board member to the FSMB Symposium on AI. Mr. Bittel seconds the motion and it passes. Mr. Bittel volunteers to attend the conference.

Discuss, consider and take action as needed regarding sending board member to Forum on Professional Regulation (FARB) conference – January 25-27, 2024, in Fort Worth, TX: Dr. McLerran volunteers to attend the FARB conference. Dr. McGraw motions to send Dr. McLerran to the FARB conference. Mr. Diaz-Barriga seconds the motion and the motion passes.

Discuss, consider and take action as needed regarding sending board members and staff to FSMB Annual meeting in Nashville, TN April 18-20, 2024: Dr. Anderson motions to send three Board members to the FSMB annual meeting in Nashville. Dr. McLerran seconds the motion, and it passes. Mr. Bittel motions send staff, the Medical Director, and attorneys to the FSMB annual meeting in Nashville. Dr. Tillmanns seconds the motion, and it passes.

Discuss, consider and take action as needed regarding rules for Public Chapter 211: Ms. Baca-Chavez briefly reviewed Public Chapter 211 with the Board and presented drafted Rules to the Board for their consideration. It is the consensus of the Board that applicants shall have taken the USMLE. Dr. Anderson motions to accept the Rules as proposed with the addition of an initial application fee of five hundred (\$500) dollars and a processing fee for the conversion of the license from temporary to full of two hundred and twenty-five (\$225) dollars. Dr. McGraw seconds the motion and the motion passes.

Discuss, consider and take action as needed regarding joint taskforce with Board of Osteopathic Examination for Office Based Surgery: At the Board of Osteopathic Examination meeting, it was proposed that a taskforce be created for Office Based Surgery. Members of the Board of Osteopathic Examination have agreed to meet with members of the Board of Medical Examiners (“BME”) during BME’s regularly scheduled Office Based Surgery meetings. Dr. McGraw motions to combine the two committees into a taskforce for the January 2024 meeting. Dr. Anderson seconds the motion and the motion passes.

Discuss, consider and take action as needed regarding revision to Development Committee Policy: Ms. Baca-Chavez reviewed the current Development Committee Policy. Dr. McGraw motions to appoint Dr. McLerran as a member of the Development Committee. Dr. Tillmanns seconds the motion and the motion passes.

## VIII. CONSIDER AND APPROVE CONSENT AGENDA

Dr. McGraw motions to accept the consent agenda. Dr. Anderson seconds the motion, and it passes. The Consent Agenda contained the following:

1. Approval of September 26-27, 2023, Board of Medical Examiners Meeting minutes
2. Approval of September 26, 2023, Development Committee Meeting minutes
3. Approval of September 27, 2023, Office Based Surgery Meeting minutes
4. Ratification of new licenses, reinstatement and renewals of Medical Doctors, MD X-Ray Operators, Genetic Counselors, Surgical Assistants, Clinical Perfusion
5. Review of the Office of General Counsel Report
6. Review report from the Administrative Office
7. Review report from the Office of Investigations
8. Ratification of Polysomnography Policy regarding applicants practicing prior to July 1, 2007

IX. **PETITION TO LIFT RESTRICTION**

[Shelton Hager, MD\\*](#) – appeared before the Board along with his legal representative, Ms. Jimmie Miller, Esq. Mr. Gerard Dolan represented the state. Dr. Loyd recused. Dr. McGraw motions to lift the restriction on Dr. Hager’s license. Dr. Anderson seconds the motion, and it passes with Dr. Loyd recused.

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

a. **Office Based Surgery Committee Meeting Update (Dr. Anderson, Dr. Hale, and Dr. McGraw) -**

i. The Committee is scheduled to meet Wednesday January 24, 2023 at 7:30am.

XI. **ORDERS OF COMPLIANCE**

**Derron Allen, MD** – appeared before the Board without legal representation. Ms. Francine Baca-Chavez presented the Order of Compliance. The petition requests the Board lift the probation on Dr. Allen’s medical license. 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. Anderson motions to accept the order of compliance. Dr. McGraw seconds the motion, and it passes.

**Sarah Beth Bush, MD** – did not appear before the Board nor did a legal representative appear on her behalf. Ms. Francine Baca-Chavez presented the Order of Compliance. The petition requests the Board lifts the restrictions on prescribing opioids on petitioner’s license. Appearance before the Board was not required by the Consent Order to lift the restriction on prescribing. It is the position of the Disciplinary Coordinator and the Office of General Counsel that she is compliant with the terms of her previous order. Dr. McGraw motions to accept the order of compliance lifting the restriction on prescribing opioids. Dr. McLerran seconds the motion, and it passes.

**Joseph Hensley, MD** – appeared before the Board with his legal representation, Mr. David Steed. Ms. Francine Baca-Chavez presented the Order of Compliance. The petition requests the Board lift the probation on Dr. Hensley’s medical license. 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. Anderson motions to accept the order of compliance. Dr. McGraw seconds the motion, and it passes.

**Kevin King, AMDX** – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Francine Baca-Chavez presented the Order of Compliance. The original Order did not require appearance before the Board. Mr. King’s license was granted conditioned upon TMF advocacy and signing a TMF contract for a period of three (3) years. 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. Anderson motions to accept the order of compliance. Dr. McLerran seconds the motion, and it passes.

XII. **DISCIPLINARY ORDERS**

**Consent Order(s)**

[Francis LeBuffe, MD\\*](#) – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Candace Carter represented the State. Dr. Anderson motions to approve the order. Dr. McLerran seconds, and the motion passes.

[Zhiqiang Sun, MD\\*](#) – did not appear before the Board nor did his legal representative, Mr. Joseph Clark, II, appear on his behalf. Ms. Candace Carter represented the State. Dr. McGraw motions to approve the order. Dr. Tillmanns seconds, and the motion passes.

[Miguel Rodriguez Antonatos, MD\\*](#)– did not appear before the Board nor did a legal representative appear on his behalf. Mr. Michael Varnell represented the State. Dr. McGraw motions to approve the order. Mr. Bittel seconds, and the motion passes.

[Susan Webb, MD\\*](#)– did not appear before the Board nor did her legal representative, Mr. Stephen Johnson, appear on her behalf. Mr. Michael Varnell represented the State. Dr. McGraw motions to approve the order. Mr. Diaz-Barriga seconds, and the motion passes with Mr. Bittel opposed.

[Judy Foster, AMDX\\*](#) – did not appear before the Board nor did her legal representative, Mr. Travis Swearingen, appear on her behalf. Mr. Michael Varnell represented the State. Dr. Anderson motions to approve the order. Dr. McLerran seconds, and the motion passes.

**Kevin Merigian, MD** – did not appear before the Board nor did his legal representative, Mr. Michael McLaren, appear on his behalf. Ms. Brittani Kendrick represented the State. Respondent was licensed on September 26, 1991, which is currently set to expire on November 30, 2024. Respondent is an emergency medicine physician and the sole owner and practitioner at The Stone Institute, The Center for Medicinal Arts, in Eads, Tennessee, which, according to its website, “embraces conventional medical and nontraditional treatment modalities.” On his website, Respondent calls his treatments “therapeutic adventures.” Respondent treated patient L.C. from about August 2006 until May 2018 for multiple ailments, including joint pain and migraine headaches. Patient L.C. had received opioid therapy from a previous provider, and Respondent continued providing her opioid therapy, including IV infusions of Promethazine and Demerol and oral prescriptions of hydrocodone and carisoprodol. Respondent engaged in a sexual relationship with patient L.C. from approximately January 2011 until May 2015 during which time Respondent continued to provide opioid therapy as described above. After Respondent and patient L.C. ended their sexual relationship, patient L.C. threatened to notify the Board of her and Respondent’s sexual relationship if Respondent did not meet her demands to spend time with her and continue the sexual relationship. Respondent terminated the physician/patient relationship via letter on May 17, 2018. The facts stipulated are grounds for discipline. This order shall reprimand Respondent’s medical license. Respondent must enroll in and successfully complete the continuing medical education outlined in the Order. Respondent shall pay four (4) “Type A” civil penalties in the amount of two thousand dollars (\$2,000.00). Respondent shall pay all actual and reasonable costs of the case not to exceed five thousand dollars (\$5,000.00). It is the consensus of the Board that the Order should include an evaluation with the Tennessee Medical Foundation. Dr. Anderson motions to deny the Order. Dr. Tillmanns seconds, and the motion passes.

[Elmer Pinzon, MD\\*](#) – did not appear before the Board nor did his legal representative, Mr. Dale Amburn, appear on his behalf. Ms. Brittani Kendrick represented the State. Dr. Loyd recused. Mr. Diaz-Barriga motions to approve the order. Dr. McGraw seconds, and the motion passes with Dr. Loyd recused.

[Jack Scariano, MD\\*](#)– did not appear before the Board nor did his legal representative, Mr. David Eldridge, appear on his behalf. Mr. Gerard Dolan represented the State. Dr. McGraw recused. Dr. Anderson motions to approve the order. Dr. Tillmanns seconds, and the motion passes with Dr. McGraw recused.

[Benjamin Kotinsley, MD\\*](#)– did not appear before the Board nor did a legal representative appear on his behalf. Ms. Jessica Turner represented the State and Ms. Francine Baca-Chavez presented it on her

behalf. Dr. McGraw motions to approve the order. Dr. McLerran seconds, and the motion passes.

**Next Development Committee Agenda**

- a. Discuss and take action as needed regarding acceptance of ECFMG certification as proof of completion of medical school
- b. NP/PA collaboration requirements and providing education to licensees regarding collaboration

XIII. **PUBLIC COMMENT - None**

**The Board recessed at 3:30 pm CT.**



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

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

**Wednesday, November 8, 2023**

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The regular board meeting of the Tennessee Board of Medical Examiners was called to order at 9:00 a.m. in the Iris Room Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243.

Board members present: Stephen Loyd, MD, Vice President  
Michael Bittell, Consumer Member  
Keith Anderson, MD  
Samantha McLerran, MD  
Todd Tillmanns, MD  
James Diaz-Barriga, Consumer Member  
John McGraw, MD

Staff present: Francine Baca-Chavez, JD, Office of General Counsel  
Kavita Vankenini, MD Medical Director  
Stacy Tarr, BME Executive Director  
Brandi Allocco, Administrative Director  
Samantha Green, Board Administrator  
Jeffrin Zachariah, Board Administrator

**XIV. DISCIPLINARY ORDERS (CONTINUED)**

**Consent Order(s) – Iris Room**

[Milford James Huffnagle II, MD](#)\* – did not appear before a panel of the Board nor did his legal representative, Mr. Rob McKinney, appear on his behalf. Mr. Gerard Dolan represented the State. Dr. Anderson motions to approve the order. Dr. McGraw seconds, and the motion passes.

**Agreed Order – Iris Room**

[Deborah Poteet-Johnson, MD](#)\* – appeared before a panel of the Board along with her legal representative, Mr. Scott McDearman, appear on his behalf. Mr. Gerard Dolan represented the State. Dr. Anderson motions to approve the order. Dr. McGraw seconds, and the motion passes.

## **Declaratory Order Hearing – Poplar Room**

**Chawki Elzein, MD v. State of Tennessee Board of Medical Examiners  
Poplar Room**

**Administrative Law Judge: Elizabeth Cambron**

**Panelists: John McGraw, MD, Samantha McLerran, MD, and James Diaz-Barriga, Consumer Member**

**Counsel for State: Francine Baca-Chavez, Deputy General Counsel**

**Counsel for Respondent: Respondent was not represented**

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, Chawki Elzein, MD, attended the American University of Beirut in Beirut, Lebanon and obtained a medical degree in June of 1992. Petitioner is an international medical school graduate who has not submitted evidence of the satisfactory completion of a three-year US ACGME accredited post-graduate training program and is not currently certified by an American Board of Medical Specialties, (“ABMS”) member board or eligible for board certification through ABMS. After receiving a medical degree, Petitioner completed eight years of post-graduate training in the United States and Lebanon. From July 1993 to June 1997, Petitioner completed a general surgery residency at American University of Beirut Medical Center in Beirut, Lebanon. From July 1997 to June 1999, Petitioner completed an adult cardiothoracic surgery fellowship at University Hospitals of Cleveland in Cleveland, Ohio. The program was ACGME accredited, however, Petitioner’s position was a non-accredited fellowship. Petitioner received an excellence award at the end of his training. From July 1999 to June 2000, Petitioner completed a pediatric cardiac surgery fellowship at Hope Children’s Hospital (currently Advocate Children’s Hospital) in Oak Lawn, Illinois. Following the completion of the pediatric cardiac surgery fellowship, Petitioner returned to Lebanon for a year where he was a cardiac surgery attending at Makassed General Hospital. Since approximately April 2002, Petitioner has held many academic appointments at the University of Illinois, Rush University Medical Center, University of Chicago and Loyola Medical Center. Petitioner has trained many cardiothoracic surgery residents from ACGME accredited programs at the University of Chicago, Loyola Medical Center, Rush University Medical Center and the University of Illinois. Over the last twenty-two years, Petitioner has performed over 5,000 congenital cardiac operations as primary surgeon and co-surgeon. Petitioner has published and presented on many topics in pediatric cardiac surgery, with over 50 publications and 40 oral and poster presentations in national and international meetings and conferences. Petitioner currently holds a full and unrestricted medical license in Illinois. His medical license in Illinois was first issued on May 24, 2001. Petitioner has had no disciplinary action taken on this license. There is a significant need for a physician with Petitioner’s qualifications in Tennessee. Petitioner is being recruited to be the chief of pediatric cardiac surgery division and the surgical director of the Heart Institute at Le Bonheur Children’s Hospital in Memphis, Tennessee. The petition for Declaratory Order, for this Petitioner, was approved.

**This concludes the Board of Medical Examiners Day 2 meeting.**