

ARIZONA BOARD OF OSTEOPATHIC EXAMINERS IN MEDICINE AND SURGERY

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Board Members

Gary A. Erbstoesser, D.O., Pres. Jonathan Maitem, D.O., V.P. Douglas L. Cunningham, D.O. Jerry G. Landau, J.D. Jeffrey H. Burg, AlF Dawn K. Walker, D.O. Ken S. Ota, D.O.

> Executive Director Justin Bohall

FINAL MINUTES FOR VIRTUAL MEETING OF THE ARIZONA BOARD OFOSTEOPATHIC EXAMINERS IN MEDICINE AND SURGERY

Held on Saturday, June 19, 2021

1. CALL TO ORDER

Board President Erbstoesser called the meeting to order at 8:33 a.m.

President Erbstoesser thanked the Board members and staff for facilitating today's proceedings, and ask the Director call the roll.

2. ROLL CALL AND REVIEW OF AGENDA

	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Present:	Х	Х	Х	Х	Х	Х	Х
Absent:							

3. CALL TO THE PUBLIC

President Erbstoesser read aloud the Board's mission statement: "The mission of the Board is to protect the public by setting educational and training standards for licensure, and by reviewing complaints made against osteopathic physicians, interns, and residents to ensure that their conduct meets the standards of the profession, as defined in law (A.R.S. § 32- 1854)."

- A. President Erbstoesser welcomed the medical students from Arizona College of Osteopathic Medicine at Midwestern University, A.T. Still University Kirksville College of Osteopathic Medicine and A.T. Still University School of Osteopathic Medicine in Arizona.
- B. No individuals addressed the Board during the Call to the Public portion of the meeting.

4. REVIEW, CONSIDERATION AND APPROVAL OF MINUTES

A. April 17, 2021 Open Session

MOTION: Dr. Maitem moved for the Board to approve the April 17, 2021 Open

Session.

SECOND: Dr. Cunningham

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Х	Х	Х	Х	Х	Х	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

B. April 17, 2021 Executive Session

MOTION: Dr. Maitem moved for the Board to approve the April 17, 2021 Executive

Session.

SECOND: Dr. Cunningham

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

C. May 21, 2021 Open Session

MOTION: Mr. Landau moved for the Board to approve the May 21, 2021 Open

Session.

SECOND: Dr. Walker

VOTE: 5-yay, 0-nay, 2-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	5	Χ	Χ	Χ			Χ	Х
Nay:	0							
Abstain/ Recuse:	2				Х	Х		
Absent:	0							

D. May 21, 2021 Executive Session

MOTION: Mr. Landau moved for the Board to approve the May 21, 2021 Executive

Session.

SECOND: Dr. Walker

VOTE: 4-yay, 0-nay, 3-abstain, 0-recuse, 0-absent. MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	4	Χ	Χ				Χ	Χ
Nay:	0							
Abstain/ Recuse:	3			Х	Х	Х		
Absent:	0							

E. June 3, 2021 Open Session

MOTION: Vice-President Maitem moved for the Board to approve the June 3, 2021 Open Session.

SECOND: President Erbstoesser

VOTE: 4-yay, 0-nay, 3-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	4		Χ	Χ	Χ			Х
Nay:	0							
Abstain/ Recuse:	3	Х				Х	Х	
Absent:	0							

5. REVIEW, DISCUSSION AND ACTION ON CASE REVIEWS OF ALLEGATIONS OF UNPROFESSIONAL CONDUCT A.R.S. § 32-1855 (D)

A. <u>DO-20-0137A</u>, E. Griffin Cipolla, DO, LIC. #2811

Dr. Cipolla and Attorney Jay Fradkin participated in the virtual meeting during the Board's consideration of this matter.

MOTION: Mr. Landau moved for the Board to enter into Executive Session to obtain legal advice pursuant to A.R.S. § 38-431.03(A)(3).

SECOND: Vice-President Maitem

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Х	Х	Х	Х	Х	Х	Х
Nay:	0							
Abstain/	0							

Recuse:					
Absent:	0				

The Board entered into Executive Session at 8:41 a.m.

The Board returned to open Session at 8:45 a.m.

No legal action was taken by the Board during Executive Session.

Board staff summarized that the complainant was a patient of Dr. Cipolla's from 2003 – 2008. The complainant alleged that he underwent a rectal exam performed by Dr. Cipolla that he felt deviated from other rectal exams he had undergone in the past. The complainant reported that the examination made him uncomfortable and that he subsequently changed providers as a result. The complainant had also indicated that he filed the complaint to the Board after becoming aware that the physician had been placed on probation for being sexually inappropriate with another male patient. Board staff reported that there were no medical records available for review in this case as the licensee destroyed the records in 2014 after the patient had not been seen for a number of years. Billing records were located and contained diagnosis codes that allowed the licensee to put things together in terms of visits. He indicated that the patient's first and subsequent office visit were for complaints of anal fissure, and that those were the only times that the diagnosis would have been appropriate to perform a rectal examination.

Mr. Fradkin stated it was undisputed that a rectal exam occurred. He stated that the patient waited more than 16 years to file the complaint reportedly after seeing the probationary order, that the probationary order was vacated by the Superior Court and that this complaint would not have been filed had the Board not prematurely posted the probationary order to the physician's online profile. Mr. Fradkin asked the Board to dismiss the case and noted that the Medical Consultant found no improper conduct in this case.

Mr. Landau clarified that the probationary order was remanded by the Superior Court based on legal procedural grounds and that it was not relevant to the current case. Mr. Landau proposed returning the case and directing staff and the Medical Consultant to re-interview the complainant to obtain more details and his willingness to move forward.

MOTION: Mr. Landau moved for the Board to continue the case review and direct staff and the Medical Consultant to re-interview the complainant.

SECOND: Vice-President Maitem

Mr. Landau and Vice-President Maitem withdrew their motion to allow the licensee an opportunity to make a statement before the Board proceeded to a vote. Dr. Cipolla stated that the patient continued to see him for three years after the initial treatment and he referred the Board members to his September 4th letter.

MOTION: Mr. Landau moved for the Board to continue the case review to its September 2021 meeting and return this matter for further investigation to re-interview the complainant.

SECOND: Vice-President Maitem

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

6. REVIEW, DISCUSSION AND ACTION ON INVESTIGATIVE HEARINGS PURSUANT TO A.R.S. § 32-1855(E).

A. DO-20-0073A, Robert Roy Orr, DO, LIC. #2378

This item was continued to the Board's next meeting.

B. <u>DO-20-0033A</u>, Keith Allen Winder, DO, LIC. #006608

The Board considered this item in conjunction with Agenda Item No. 8E and noted that the physician signed a Consent Agreement to resolve this matter.

Board staff summarized that Dr. Winder performed anesthesia for care of a tubular fibular fracture in 2016. Dr. Winder was unable to obtain intravenous access due to the patient's history of heroin use and scarred veins. There were no apparent complications with that procedure; however, Dr. Winder failed to obtain a chest x-ray after the procedure was finished. The patient returned to the emergency room one year later with chest pain where a chest CT scan showed an introducer wire in the right atrium. The patient required an open procedure to remove the wire and the malpractice case resulted in settlement.

Executive Director Bohall reported that Dr. Winder requested settlement of this matter and was offered a disciplinary Consent Agreement for Administrative Warning and \$500 Civil Penalty for failure to take an appropriate chest x-ray. The Board noted that this case did not involve an Arizona patient and that it was unclear whether the Utah Board has reviewed or made any findings on the matter.

MOTION: Mr. Landau moved for the Board to accept the proposed Consent Agreement in this matter.

SECOND: Vice-President Maitem

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

C. DO-20-0177A, James William Kellershabrokh, DO, LIC. #007012

Dr. Kellershabrokh and Attorney Rick Delo participated in the virtual meeting during the Board's consideration of this matter. Dr. Kellershabrokh reported that he has been practicing in Arizona since 2016 and currently practices comprehensive pain management.

Board staff summarized that the Board received a complaint from Aurora Behavioral Health alleging that Dr. Kellershabrokh overprescribed short acting opioids to a patient who then overdosed. The Medical Consultant found that Dr. Kellershabrokh deviated from the standard of care in that during the time period of 2017-2020, only two urinary drug screens ("UDS") were performed and on both occurrences, the results were negative for the opioids that were prescribed to the patient. The patient called the office on numerous occasions and received refills without being seen in the office or via telemedicine. Board staff reported that Dr. Kellershabrokh noted that the patient's opioid levels were higher than desirable in April of 2020, but did not consider stopping or weaning the patient off of opioids. Board staff noted that the patient had a psychiatric disorder and that the intentional overdose did not involve opioids.

Dr. Kellershabrokh explained that he inherited the patient from a prior colleague around 2017,

that he typically sees patients every one to two months, and that he has instituted changes in his practice relating to UDS and documentation. Dr. Kellershabrokh also pointed out that he continues to treat this individual.

Vice-President Maitem questioned how this patient's treatment has changed, whether other modalities had been sought and whether the physician attempted to decrease the Morphine Equivalent Dose ("MED"). Dr. Kellershabrokh stated that the patient has presented for trigger point injections, that most interactions have taken place via telemedicine, that he sees her monthly and does not provide refills without first being seen, and that his documentation has improved in relation to UDS notes. Dr. Kellershabrokh stated that the patient's current MED is 80 and has stayed the same, and that interventional procedures are done to try and decrease the patient's pain. In response to President Erbstoesser's questioning, Dr. Kellershabrokh stated that he prescribed long-acting opioids on one occasion and that the patient either could not afford the medication or did not like the side effects. Dr. Kellershabrokh also reported that he referred the patient to a surgeon for her neck and she returned to him for treatment after she was found to not be a surgical candidate.

Dr. Cunningham stated his concerns regarding Dr. Kellershabrokh's care of this patient relating to UDS frequency and abnormal results, possible diversion, the filling of opioids out of state that cannot be monitored, and the physician's inability to see the seriousness of this case. Dr. Cunningham noted that the patient had an issue with alcohol and that her UDS at the time of her hospital admission was negative for opioids. Dr. Cunningham stated he was also concerned regarding Dr. Kellershabrokh's training and education, and he noted that the physician did not mention whether or not he attempted to wean the patient off of her medications. Dr. Kellershabrokh stated that he was trying to follow the care that was being provided by the patient's previous provider that the patient had a history of alcohol abuse but was not actively consuming alcohol. He stated that given this patient's circumstances, he did not feel monthly repeat UDS were necessary. Dr. Kellershabrokh stated he did not think weaning the patient off her medications was warranted, that he did not know increasing the frequency of UDS eliminates the possibility of a bad outcome and that he felt drug testing every six months was reasonable for an individual that he is actively watching unless the situation suggests otherwise.

President Erbstoesser pointed out that the patient overdosed on medications and stated that this should have raised a red flag for the physician to monitor this patient more closely and perform more frequent UDS. Dr. Kellershabrokh reported that the patient was filling her medications on a monthly basis and that he was not sure why she tested negative for opioids when she presented to the ER. Mr. Landau questioned the physician regarding the frequency with which he had seen the patient over the course of the four years he had been treating her. Dr. Kellershabrokh reported that he began treating the patient in 2017 and saw her six times that year, nine times in 2018, at least a dozen times in 2020 and that the visits have been a combination of in-person and virtual. Mr. Landau noted that only two UDS were obtained over the course of the patient's treatment and questioned how she was monitored for medication compliance. Dr. Kellershabrokh stated that most of the patient's prescriptions were filled in Arizona, the CSPMP was queried when she requested refills, and that he found her consistency with filling medications and follow up seemed appropriate. Mr. Landau stated his concerns regarding the lack of a plan on the prescriptions and the lack of medication monitoring despite indications of possible improper use.

Mr. Delo stated that the physician takes this matter very seriously as well as the care and treatment of this patient. He stated Dr. Kellershabrokh has practiced since 2015, has not been before the Board previously, and had been fully cooperative and forthright with the Board and staff during the investigation. Mr. Delo stated the physician developed a good relationship with the patient and that during the time that Dr. Kellershabrokh treated her, he recommended additional injections and ablations as well as long lasting medications. He stated that the patient's suicide attempt was not related to her use of opioids, that the Medical Consultant was not critical of Dr. Kellershabrokh's use of opioids or the amount used to treat the patient, and that the patient refilled her medications on a consistent basis without early refills. Mr. Delo reported that the physician has implemented changes in his practice relating to UDS frequency and documentation, and he requested the Board dismiss the case.

Mr. Landau commented that while the licensee may have been prescribing within the state limits, he was not following this patient who had a number of red flags for non-compliance. Mr. Landau spoke in favor of issuing a Letter of Concern and Order for Non-Disciplinary CE in prescribing practices. Mr. Landau also stated his concerns that the treatment goals were not clear. Dr.

Cunningham stated that he agreed with Mr. Landau's comments, he suggested issuing an Interim Order for PACE to evaluate the physician's fund of knowledge for prescribing and stated his concerns that the physician continues to treat the patient. Mr. Landau stated that he agreed with the consideration of a PACE evaluation. President Erbstoesser questioned whether a chart review was warranted to determine whether there was a trend in the physician's prescribing practices. Mr. Landau stated that he believed the Board had sufficient information to proceed in this matter on the issue of prescribing.

MOTION: Mr. Landau moved for the Board to continue the investigative hearing to the Board's October 2021 meeting and issue an Interim Order for the physician to complete PACE for the limited purpose of analyzing his knowledge and practices in opioid prescribing. Dr. Kellershabrokh shall contact PACE no later than July 1st.

SECOND: Dr. Cunningham

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent. MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

The Board recessed from 9:48 a.m. to 9:56 a.m.

D. <u>DO-20-0161A</u>, David Berg Nilsen, DO, LIC. #005533

Dr. Nilsen and Attorney John Checkett participated in the virtual meeting during the Board's consideration of this matter. Dr. Nilsen reported that he has been practicing in Arizona since 2010 and currently works with a private orthopedic group.

Board staff summarized that Dr. Nilsen. Performed arthroscopic decompression of a synovial cyst in the left knee for a 15 year-old patient in 2019. During the procedure, the sciatic nerve was transected and nerve repair was attempted by a neurosurgeon. The Medical Consultant found that Dr. Nilsen deviated from the standard of care by performing the procedure without direct visualization, particularly where major neurovascular structures reside.

Dr. Nilsen stated that during surgery, he inspected the knee and debrided the area of the cyst that was seen on MRI. He explained that he encountered the distal aspect of the sciatic nerve when he advanced instruments after making the intraoperative decision to do so due to concerns that the cyst may have grown posteriorly. Dr. Nilsen stated that he followed the patient closely after surgery and was in constant contact that the patient returned to the emergency room the following day without a change in symptoms and that radiology was not sure as to what the damage was from reviewing immediate studies. Repeat studies were obtained a few days later that showed the nerve was transected during surgery, and Dr. Nilsen stated that he kept in close contact with the patient and found the surgeon to repair the nerve. He stated that in retrospect, he should have visualized the cyst directly and that he should have repeated the MRI shortly before surgery.

President Erbstoesser questioned the licensee regarding the patient's symptoms that warranted surgery. Dr. Nilsen stated that he offered the patient surgery as an option after she failed other methods of treatment including physical therapy, anti-inflammatories and a brace. He stated that the patient reported the day before surgery that her symptoms had improved and she elected to proceed with the procedure to try to prevent a future occurrence. Vice-President Maitem recognized the bad outcome in this case and spoke in favor of issuing a non-disciplinary Letter of Concern in light of the physician's educated response for what went wrong and what could be

done in the future to prevent a similar occurrence.

MOTION: Vice-President Maitem moved for the Board to issue a Non-Disciplinary Letter of Concern for injury that was avoidable during an arthroscopic procedure. SECOND: Dr. Walker

Mr. Landau spoke in favor of dismissal, stated that he believed the malpractice settlement resolved the issue, and noted that the physician clarified that this was an elective procedure and explained what he would do in the future. Dr. Cunningham spoke in favor of the motion. Mr. Checkett stated that he appreciated the Board members' comments, that the physician did everything he could to make sure the issue was resolved, and that Dr. Nilsen has no prior Board history. He asked the Board to consider dismissing the case. Vice-President Maitem spoke for his motion and stated that the sanction was warranted for the injury that could have been avoided had Dr. Nilsen exposed the area to get proper visualization and prevent advancement of the instrumentation outside of the target area. He stated that the recommendation for PACE or CE would be warranted had the physician not been forthcoming, and that he believed Dr. Nilsen adequately fulfilled this on his own.

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent. **MOTION PASSED.**

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

7. CONSIDERATION AND ACTION ON PROPOSED CONSENT AGENDA FOR DISMISSAL OR OTHER ACTION.

A. DO-20-0023A, Lionel Holden Lee, DO, LIC. #008292

Dr. Lee participated in the virtual meeting during the Board's consideration of this matter. The Board observed that there was a request to pull this matter due to lack of information. The Board also noted that the underlying incident took place in California where it was reviewed by the California Board and dismissed. Mr. Landau clarified that he requested the case be pulled due to the California Board's brief summary. Mr. Landau recognized that Dr. Lee was in attendances of today's proceeding and requested that he provide a brief statement to help clarify what took place.

Dr. Lee stated that he inadvertently answered in the negative to the application question relating to settlements and that he subsequently was reminded by his chief to disclose his arbitration. Dr. Lee explained that he was not aware that he was required to disclose it and that he immediately contacted the Board and has been transparent. He stated that this was his first application for licensure outside of California and that he was not familiar with the process. In response to Mr. Landau's questioning, Dr. Lee explained that the underlying case involved a patient who presented for flank pain and was found to have a retained stone. He stated that he discussed the case with the urologist who recommended to withhold antibiotics until culture results were obtained. The patient later returned with a septic stone.

MOTION: Vice-President Maitem moved for dismissal.

SECOND: Mr. Bura

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Х	Χ	Χ	Χ	Χ
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

B. DO-19-0050A, Michael Woodworth Fredrick, DO, LIC. #3679

MOTION: Mr. Landau moved to approve the Consent Agenda.

SECOND: Dr. Walker

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Х	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

C. DO-20-0167A, Scott Patrick Markham, DO, LIC. #4498 A request for continuance was granted in this matter.

8. CONSIDERATION AND ACTION ON PROPOSED CONSENT AGREEMENTS, COMPLIANCE WITH TERMS OF BOARD ORDERS, AND REQUESTS TO MODIFY OR TERMINATE ORDERS

A. DO-17-0066A, Kevin Michael McKeown, DO, LIC. #N/A

Dr. McKeown participated in the virtual meeting during the Board's consideration of this matter.

Board staff summarized that Dr. McKeown was found to have forged another physician's name and wrote prescriptions for both himself and his wife for several years after moving to Arizona. In October of 2017, Dr. McKeown's license was suspended for a period of twelve with the ability to request that it be lifted early after six months, thereafter placing the license on probation for a period of five years in addition to the issuance of a Decree of Censure. In April of 2018, the Board ordered lifting of the suspension in order for Dr. McKeown to sit for his board exams in emergency medicine. In October of 2018, Dr. McKeown appeared before the Board and reported that he had not passed his boards and that they were rescheduled for March of 2019. In February of 2019, Dr. McKeown was convicted of a class six felony for criminal possession of a forgery device. In June of 2019, Dr. McKeown appeared before the Board reporting that he was advised to not take the emergency medicine boards until after his felony charge was reduced to a misdemeanor. In November of 2020, Board staff became aware that Dr. McKeown had been in Africa providing medical care through a charity and the last report from his physician was in March of 2021.

Dr. McKeown reported that he currently works as a company physician, that his clinic was not active at this time, and that he had been spending time with family and recently moved. President

Erbstoesser questioned whether the licensee was eligible to sit for his board exams. Dr. McKeown stated that due to his felony charge he was excluded from Medicare and Medicaid for a minimum of five years and that he would not be eligible for the emergency medicine boards for another 3.5 years. In response to Mr. Landau's questioning, Dr. McKeown confirmed that he was no longer under court-ordered probation and that it was his understanding the charge remained a class six undesignated felony. Mr. Landau pointed out that based on his experience, the charge is designated at the time that probation is terminated, and he encouraged the physician to further research this issue. Board staff reported that Dr. McKeown was not currently participating in a monitoring program and clarified that his current Board Order would be resolved in 2023. Dr. Cunningham stated that he was glad to see the physician was doing well and questioned him regarding the services he provided in Africa. Dr. McKeown stated that he was asked by a charity witch which his mother was affiliated if he would go to Africa and provide health care. Dr. Cunningham stated it was a great thing that he did, and that he thinks the physician is a good doctor and encouraged him to continue on his current path. The Board thanked the physician for appearing, congratulated him on his progress and stated that he should return in one year for another update.

The Board recessed from 12:26 p.m. to 12:46 p.m.

B. <u>DO-19-0145A</u>, <u>DO-19-0005A</u>, Anthony Christopher Pozun, DO, LIC. #3684

Dr. Pozun participated in the virtual meeting during the Board's consideration of this matter.

Board staff summarized that Dr. Pozun was originally issued a Board Order for Two Year Probation in May of 2019 after he tested positive for THC at his place of employment. On July 4, 2019, Dr. Pozun consumed alcohol in violation of his Probation. He subsequently completed an intensive outpatient program in August of 2019 and entered into a Consent Agreement for Five Year Probation on September 23, 2019. The probationary terms included a work hour restriction of 40 hours per week and was increased to 52 hours by the Board in January of 2020, and PHP participation. Dr. Pozun appeared before the Board in August of 2020 and his request to convert his PHP participation to confidential status was denied at that time. Board staff reported that Dr. Pozun has been compliant with the terms of his Board Order and his UDS have been consistently negative.

MOTION: Mr. Landau moved for the Board to enter into Executive Session to discuss confidential health information and to obtain legal advice pursuant to A.R.S. §38-431.03(A)(2) and (3).

SECOND: President Erbstoesser

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

The Board entered into Executive Session at 12:50 p.m.

The Board returned to Open Session at 1:05 p.m.

No legal action was taken by the Board during Executive Session.

MOTION: Mr. Landau moved for the Board to terminate the Probation and proceed as discussed in Executive Session.

SECOND: Mr. Burg

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

President Erbstoesser noted that PHP reports to the Board regarding the physician's participation, encouraged the physician to keep up the good work and stated that the Board would like to see him again soon.

C. DO-19-0012A, Leslie Diane Edison, DO, LIC. #2491

Dr. Edison participated in the virtual meeting during the Board's consideration of this matter.

Board staff reported that the case stemmed from a complaint alleging that Dr. Edison prescribed controlled substances to her sister-in-law despite knowing that she had a drug and alcohol problem. Board staff clarified that the patient did not qualify as Dr. Edison's "immediate family member" in that she was married to Dr. Edison's brother. Dr. Edison first began treating the patient in January of 2016 and over the years, prescribed Tramadol, Oxycodone, Xanax and Librium. During the course of treatment, Dr. Edison did refer the patient to specialists, she saw the patient at her home on several occasions, and the patient was also being seen and receiving prescriptions from Dr. Edison's nurse practitioners in her office. On April 4, 2017, the patient was prescribed valium for her increased stress and anxiety, and it was noted that her husband would be dispensing the medications for her. The following day, the patient was seen by the nurse at Dr. Edison's office and requested switching the Tramadol to Oxycodone. The nurse prescribed Oxycodone and instructed the patient to discontinue Tramadol. Later that evening, the patient was found down at her home by her husband, EMS was called and transported the patient to the ER. She was admitted to the ICU and noted to be in liver failure, was found to have anoxic brain injury, and the family elected to withdraw life support. Dr. Edison appeared before the Board in May of 2020 and was placed on Two Year Probation with a Civil Penalty of \$1,000 and required to complete 25 CE hours in controlled substance prescribing. Board staff reported that Dr. Edison has complied with the terms of her Order and has requested termination.

Dr. Edison clarified that the patient did not have any suicidal ideation, that her family had been under a lot of financial stress and the patient could not afford her co-pays or see specialists. Dr. Edison stated that she was not comfortable treating the patient and that she does not practice chronic pain management. She stated that she was not familiar with the guidelines and standards of pain specialists as she does not practice chronic pain management. She assured the Board that she would not see someone as close to her again, reported that she completed a course in prescribing and that she feels more educated on the topic. The Board observed that Dr. Edison was 15 months into her two-year probation. Dr. Cunningham stated that he was satisfied with the physician's statements and stated that it appeared she has learned from this matter. Mr. Burg cautioned Dr. Edison with regard to waiving co-pays.

MOTION: Dr. Cunningham moved for the Board to terminate the Probation.

SECOND: Dr. Walker

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

The Board thanked Dr. Edison for appearing and wished her luck on her future endeavors.

D. DO-20-0050A, Stephan Stellmacher, DO, LIC. #3828

Dr. Stellmacher participated in the virtual meeting during the Board's consideration of this matter.

MOTION: Mr. Burg moved for the Board to enter into Executive Session to discuss confidential health information and to obtain legal advice pursuant to A.R.S. § 38-431.03(A)(2) and (3).

SECOND: Dr. Walker

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Х	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

The Board entered into Executive Session at 11:58 a.m.

The Board returned to Open Session at 12:24 p.m.

No legal action was taken by the Board during Executive Session.

MOTION: Mr. Landau moved for the Board to grant the request as discussed in Executive Session and to schedule the matter to return to the Board at its December 2021 meeting. SECOND: Vice-President Maitem

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent. MOTION PASSED.

Cunningham Erbstoesser Maitem Mr. Landau Dr. Walker Mr. Burg Ota VOTE Ξ. Ω. Ω. Χ Χ Χ Χ Χ Χ Yay: 0 Nay: Abstain/ Recuse:

Absent:	0				
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•				

E. DO-20-0033A, Keith Allen Winder, DO, LIC. #008608

The Board considered this matter in conjunction with Agenda Item No. 6B and voted to accept the proposed Consent Agreement. Please see the discussion captured under Agenda Item No. 6B for further details.

- 9. REVIEW, CONSIDERATION, AND ACTION ON APPLICATIONS FOR LICENSURE PURSUANT TO A.R.S. § 32-1822; PERMITS PURSUANT TO A.R.S. § 32-1829; AND RENEWALS OF LICENSES PURSUANT TO A.R.S. § 32-1825 (C-D) AND A.A.C. R4-22-207.
 - A. DO-21-0032A, Kenneth Finkelstein, LIC. #N/A

Dr. Finkelstein participated in the virtual meeting during the Board's consideration of this matter.

Board staff summarized that Dr. Finkelstein answered in the affirmative to application questions relating to malpractice cases. He disclosed a malpractice case that occurred in 2002 and involved allegations of failure to perform resuscitative efforts when a 31 year-old female became hypoxic during tubal ligation resulting in the patient's death. Dr. Finkelstein disclosed another malpractice case that occurred in 2003 and involved perforation of the uterus during the performance of hysteroscopy that resulted in hysterectomy. Dr. Finkelstein disclosed an additional malpractice case that occurred in 2011 and involved a 45 year-old female that died of sepsis three days after laparoscopic removal of an ovarian cyst and salpingoophorectomy who developed abdominal pain after discharge. Dr. Finkelstein allegedly failed to give appropriate instructions regarding antibiotics preoperatively to treat the patient's UTI.

Dr. Finkelstein reported that during the tubal ligation procedure, he witnessed the anesthesiologist performing one-handed chest compression and when he inquired, she indicated that the patient was not ventilating appropriately. He stated that he terminated the procedure, the patient coded and was sent to the hospital. Dr. Finkelstein explained that the hysteroscopy case involved a patient who had an inadvertent perforation of the uterus that was not identified and the patient was stable at the time of discharge from the surgical center. He stated the patient presented to the hospital with an infection that was treated with antibiotics and after three days of not resolving, he proceed with hysterectomy where he found the undetected perforation. In response to the 2011 case, Dr. Finkelstein explained that he proceeded with cyst removal and encountered scar tissue, but that he felt the removal was well achieved. He stated that he was not aware that the patient had not taken her antibiotics, that there was no evidence of injury that could explain the peritonitis, and the patient went into septic shock and never recovered.

In response to Mr. Landau's line of questioning, Dr. Finkelstein stated that he completed a residency in Michigan, practiced in Illinois for a period of time and then returned to Michigan to do some moonlighting. He stated that at one point he considered expanding his practice into Indiana, but never practiced in Indiana. He reported that he was in the process of selling his practice and relocating to Arizona. In response to Vice-President Maitem's questions regarding the 2002 malpractice case, Dr. Finkelstein stated that the anesthesiologist did not communicate with him and that it was unclear what had taken place. Vice-President Maitem recognized that Dr. Finkelstein participated in resuscitative efforts. In response to questions relating to the 2011 case, Dr. Finkelstein clarified that the patient's chart noted that she was prescribed antibiotics and it was later discovered that she never picked them up. Vice-President Maitem commented that the physician was responsible for ensuring that the patient been treated for infection.

Dr. Finkelstein reported that his practice has changed since having gone through these experiences, including ensuring patients have taken their antibiotics and is very strict regarding urinalysis. Dr. Cunningham cautioned the applicant with regard the terminology used when describing the resolutions to the malpractice cases, noting that he previously stated he was dropped from one, another was dismissed, and that he was dropped from the third. Dr. Cunningham clarified that the applicant was not dropped from the cases and

encouraged him to correct the terminology used in his correspondences. In response to President Erbstoesser's questioning, Dr. Finkelstein stated that the resident performed the history and physical in the 2011 case and that the PCP notes were not available the day of surgery. He stated that he now obtains medical clearance on all patients and that this problem has been rectified.

MOTION: Vice-President Maitem moved for the Board to grant an unrestricted license.

SECOND: Dr. Ota

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Х	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

B. <u>DO-20-0202A</u>, Jeffrey Harrison Rayl, LIC. #N/A

Dr. Rayl participated in the virtual meeting during the Board's consideration of this matter.

Board staff summarized that Dr. Rayl responded in the affirmative to a number of questions on his license application. Dr. Rayl disclosed that he was arrested for possession of marijuana in 1980, had adverse actions taken against his Minnesota medical license in 2003, 2010 and 2020; and, that he entered into a diversion program for evaluation, treatment and monitoring by the Minnesota Board in 2003 and 2010. Board staff reported that Dr. Rayl admitted to having a dependency problem, history of inappropriate prescribing and previous participation in a diversion program on two separate occasions. Board staff additionally reported that a more recent concern involved Dr. Rayl giving a patient one of his own personal suboxone strips and the patient died two days later. According to Dr. Rayl, the patient's death was unrelated to the suboxone strips.

MOTION: Mr. Landau moved for the Board to enter into Executive Session to discuss confidential health information and to obtain legal advice pursuant to A.R.S. § 38-431.03(A)(2) and (3).

SECOND: Vice-President Maitem

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Χ	Χ
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

The Board entered into Executive Session at 11:02 a.m.

The Board returned to Open Session at 11:25 a.m. No legal action was taken by the Board during Executive Session.

Mr. Landau stated his concerns regarding the 2003 and 2009 incidents and proposed that the Board require completion of a physical exam and psychiatric evaluation prior to making a determination in this matter.

MOTION: Mr. Landau moved for the Board to issue an Interim Order for completion of a physical exam and psychiatric evaluation, and return to the Board at its September 2021 meeting.

SECOND: Dr. Cunningham

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Х	Х	Х	Χ	Х	Х	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

C. DO-21-0014A, Philemon Parker Bailey, LIC. #008791

Dr. Bailey participated in the virtual meeting during the Board's consideration of this matter.

Board staff summarized that Dr. Bailey applied for licensure in September of 2020, meets the education and examination requirements, and that the applicant disclosed a 2009 DUI that occurred in Maryland. The Board observed that Dr. Bailey currently holds licensure in Illinois, New York, Delaware, Kansas, Michigan and New Hampshire. Dr. Bailey explained that in 2009 he pled guilty to a charge of driving while impaired by alcohol and the remaining three charges were dismissed. He stated that he did not receive a conviction as he served one year of unsupervised probation before the judgement charge was dismissed.

Mr. Landau questioned the applicant as to whether he has had any subsequent instances similar to the 2009 matter. Dr. Bailey stated that he had no issues prior to or after the 2009 charge, that he rarely drinks after not drinking for a number of years, and that the experience has changed the way he thinks and approaches life.

MOTION: Vice-President Maitem moved for the Board to grant an unrestricted license.

SECOND: Dr. Ota

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Х	Х	Х	Х	Х	Х	Х
Nay:	0							

Abstain/	0				
Recuse:	0				
Absent:	0				

D. <u>DO-21-0019A</u>, Sean Michael Tierney, LIC. #N/A

The Board noted that this application was withdrawn.

E. <u>DO-21-0080A</u>, Bagrielle Ann Bruzda, LIC. #N/A

Dr. Bruzda participated in the virtual meeting during the Board's consideration of this matter.

Board staff summarized that Dr. Bruzda has been accepted into the internship residency fellowship program at the University of Tucson and has applied for a postgraduate training permit for July 2021 to June 2022. Board staff reported that Dr. Bruzda was arrested for DWI in August of 2017 and was placed on medical college behavioral probation as a result. Dr. Bruzda stated that she was a bar with some colleagues in 2017, underestimated how much alcohol she had consumed, drove home and was pulled over after swerving. She stated that it was a very humbling experience and has taken the opportunity to grow from it. Dr. Bruzda explained that she was placed on behavioral probation as a direct result, attended a number of alcohol education courses, was placed on probation in Virginia in addition to other requirements from the military.

In response to Mr. Landau's questioning, Dr. Bruzda stated that her blood alcohol content was 0.11 at the time, that she just recently completed her transitional internship year and will be training in anesthesia. She also informed the Board that she was released from the Navy to complete civilian training, and then would be returning to the Navy for seven years. In response to Dr. Cunningham's questions, Dr. Bruzda stated that she rarely drinks now. The Board thanked her for her service.

MOTION: Dr. Cunningham moved for the Board to grant the postgraduate training permit.

SECOND: Dr. Ota

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Х	Х	Х	Х	Х	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

F. DO-21-0081A, Zainab Ali Jafri, LIC. #N/A

Dr. Jafri participated in the virtual meeting during the Board's consideration of this matter.

Board staff summarized that Dr. Jafri applied for a postgraduate training permit for June 28, 2021 to June 2022, and has been accepted into a program at Abrazo in Goodyear, Arizona. Dr. Jafri was arrested and convicted for DUI in 2015. Dr. Jafri stated that she takes full responsibility for making the decision to drive after being out with friends and that this incident occurred during her first year of medical school. She stated that she subsequently pled guilty to the charge, was confined to tent city and was later granted an at-home monitoring system. Dr. Jafri reported that she had no other issues prior to or after the 2015 matter.

In response to Dr. Cunningham's questions, Dr. Jafri stated that the experience was life changing and described for the Board the challenges she has encountered as a consequence of her mistake.

MOTION: Dr. Cunningham oved for the Board to grant the postgraduate training permit.

SECOND: Vice-President Maitem

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

10. QUESTION AND ANSWER SESSION BETWEEN THE MEDICAL STUDENTS AND MEMBERS OF THE BOARD AND DISCUSSION RELATING TO ISSUES SURROUNDING THE PRACTICE OF OSTEOPATHIC MEDICINE.

The Board met the medical students participating in the virtual meeting and discussed current issues surrounding the practice of osteopathic medicine.

11. REVIEW, DISCUSSION AND ACTION ON THE FOLLOWING MISC. ITEMS

A. Presentation by Donald Oliva from CE Broker

Mr. Oliva participated in the virtual meeting during the Board's consideration of this matter. He presented to the Board via shared screen an overview of CE Broker to demonstrate the work they do with other boards in Arizona. He reported that CE Broker generates 90% of its revenue from optional subscriptions from license holders and that there is no cost to the Agency. Executive Director Bohall reported that utilizing this service would improve the CE auditing process and that there are also features that would benefit licensees. He asked the Board to consider whether to pursue this option. Mr. Landau stated that he had some legal questions and suggested agendizing this topic at a future meeting for further discussion. President Erbstoesser thanked Mr. Oliva for his presentation. He questioned how the Board and staff could benefit from utilizing this service. Mr. Landau stated that his concerns related to RFP and procurement.

B. Review and Approval of Draft Exempt Rulemaking in Accordance with HB2454, Section 24

Executive Director Bohall reported that HB2454 passed and was signed into law by the Governor, and became immediately effective. He stated the telehealth registry applied to physicians licensed in other states to practice telemedicine in this State. He stated that the Attorney General's Office would be providing legal advice relating to the interpretation of this new law and the process. Executive Director Bohall stated that the Board needed to establish a fee schedule for the telehealth registration process and that rulemaking exemption was provided in the statute. He asked the Board to review and approve the proposed draft exempt rulemaking in accordance with HB2454, Section 24. He clarified that the addition of the registration fee of \$250 was the only changed made to the proposed draft.

MOTION: Mr. Landau moved for the Board to approve the draft exempt rulemaking in accordance with HB2454, Section 24, establishing a telehealth registration fee of \$250. SECOND: Vice-President Maitem

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent. MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Х	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

C. Review, discussion and possible action regarding the Annual Performance Review of the Board's Executive Director

MOTION: Vice-President Maitem moved for the Board to enter into Executive Session to discuss confidential personnel matters pursuant to A.R.S. § 38-431.03(A)(1).

SECOND: Mr. Burg

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Х	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

The Board entered into Executive Session at 2:18 p.m.

The Board returned to Open Session at 2:31 p.m.

No legal action was taken by the Board during Executive Session.

MOTION: Mr. Burg moved for the Board to approve a 5% increase in the Executive Director's salary, retroactive to January of 2021.

SECOND: Mr. Landau

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

Mr. Landau suggested revisiting this topic in January of 2022. President Erbstoesser stated that forming a committee to make recommendations to the Board would be helpful. The Board congratulated the Executive Director and stated that it was well deserved.

D. Discussion on the Return to In-Person / Hybrid Meetings beginning in September

Executive Director Bohall reported that staff had been working with the Medical Board to upgrade the boardroom technology to allow for appropriate social distancing in order to resume in-person sessions. He stated that starting September, the Board can meet in person and that a virtual option will remain available for those wishing to attend remotely.

12. REVIEW, CONSIDERATION AND ACTION ON REPORTS FROM EXECUTIVE DIRECTOR.

A. Report from Board Members

B. Legislative Update

1. HB2454, SB1278, HB2433, SB1271, SB1001, SB1017, HB2067, HB2266, HB2267, HB2084, HB2128, SB1149 and HB2319

Executive Director Bohall reported that the general appropriations act has not had a final vote. He stated the Agency received the funds requested in the budget bills for the upcoming Fiscal Year. Mr. Landau reported that a budget had not yet been agreed upon and that there has been discussions of passing a skinny budget.

C. Executive Director Report

1. Financial Report

Executive Director Bohall reported that 96% of the current Fiscal Year has lapsed and that the Board has received 100% of its estimated revenue. He stated the Board has expended 93% of its appropriation thus far and was on track as planned.

2. Licensing and Investigations Update

Executive Director Bohall reported that the Board has received a total of 502 applications this year and that the staff and deficient timeframes remain consistent. He stated that staff tries their best to process applications as quickly as they can, noted that the Board was in the midst of postgraduate season and reported that a total of 483 postgraduate training permits have been issued for this year, including initial and renewal. Additionally, Board staff issued a total of 129 emergency COVID licenses.

Executive Director Bohall provided an update on the pending investigations with the Board.

The Board's next meeting is scheduled for September 11, 2021 and will be held in a hybrid format.

3. Current Events that Affect the Board

Executive Director Bohall stated his appreciation for the Board members and their hard work over the past year despite the many challenges encountered during that time while transitioning to working remotely. He also stated his appreciation for Board staff for their hard work and efforts. The Board also thanked staff for their hard work. President Erbstoesser thanked the Board and staff for their assistance. Mr. Landau and Dr. Cunningham recognized the Board's President for doing great work.

4. Report on Director Dismissed Complaints

Executive Director Bohall reported that 17 cases were dismissed since the Board's last

12. ADJOURNMENT

MOTION: Vice-President Maitem moved for the Board to adjourn.

SECOND: Dr. Cunningham

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 0-absent. MOTION PASSED.

	VOTE	Mr. Landau	Dr. Erbstoesser	Dr. Cunningham	Dr. Maitem	Mr. Burg	Dr. Walker	Dr. Ota
Yay:	7	Χ	Χ	Χ	Χ	Χ	Χ	Х
Nay:	0							
Abstain/ Recuse:	0							
Absent:	0							

The Board's meeting adjourned at 2:42 p.m.

Justin Bohall, Executive Director