

Virginia Board of Medicine BOARD BRIEFS

Newsletter #74
December 2013

Table of Contents

Renewal Fees Decreased	2
REMS Training	2
New Guidance Document on the use of Opioid Analgesics in the Treatments of Chronic Pain.....	2
Physician Assistant Fluoroscopy Regulations	3
Midwifery Disclosure Regulations	3
Behavior Analysis Regulations	6
Guidance Document 90-56.....	7
Prescription Monitoring Program (PMP)	8
Electronic Death Certificates	8
Board Meeting Minutes	9
License Counts as Of December 13, 2013.....	21
Virginia Board of Medicine Board Members 2013-2014.....	22
Advisory Board Members.....	23
Advisory Board Meeting Minutes and Regulations	25
Board Decisions	27

RENEWAL FEES DECREASED

The Board's biennial budgeting process has led to enough reserve dollars to afford a one-time decrease in renewal fees for 2014 & 2015. The decrease will be approximately 14% for all licensees of the Board, regardless of profession. This decrease will be reflected in the fee asked when you renew, whether in 2014 or 2015, and whether online or by paper.

REMS TRAINING

As you may be aware, the Food and Drug Administration (FDA) has developed training for prescribers on the safe and appropriate use of extended-release, long-acting opioid analgesics. The Medical Society of Virginia has received grant funds to make this training available to Virginia prescribers. There are three programs scheduled as you will note below. You are encouraged to attend one of them; doing so will make you a safer and more knowledgeable prescriber. You can sign up for the program of your choice by clicking on the links.

February 1: Martha Washington Inn, Abingdon

8AM Breakfast and registration

9AM to 12 noon – 3 hour CME presented by Mary McMasters, MD, FASAM and Sarah Melton, PharmD, BCPP, BCACP, CGP, FASCP Associate Professor of Pharmacy Practice Gatton College of Pharmacy at ETSU , faculty

(box lunch provided)

<https://cmetracker.net/ETSUCME/Login?FormName=RegLoginLive&Eventid=17291>

February 8: Augusta Health, Fishersville

ACC Conference Rooms 2/3

8-12 Educational Forum on Prescription Drug Abuse

12-12:30 lunch provided

12:30-3:30 - Opioid presentation presented by Mary McMasters and Sarah Melton, faculty

<https://cmetracker.net/ETSUCME/Login?FormName=RegLoginLive&Eventid=17427>

February 18: Richmond (Hilton Garden Inn immediately following WhiteCoatsOnCall)

12:30 buffet lunch served

1PM – 4PM 3 hour CME presented by Mary McMasters and Sarah Melton, faculty

<https://cmetracker.net/ETSUCME/Login?FormName=RegLoginLive&Eventid=17428>

NEW GUIDANCE DOCUMENT ON THE USE OF OPIOID ANALGESICS IN THE TREATMENT OF CHRONIC PAIN

In 2004, the Board adopted the Federation of State Medical Boards' Model Policy for the Use of Controlled Substances for the Treatment of Pain as its Guidance Document 85-24. The Federation has revisited its 2004 Model Policy in light of data and developments in the care of chronic pain over the last decade. A revised Model Policy for the Use of Opioid Analgesics in the Treatment of Chronic Pain was issued in July 2013. It is more comprehensive than the 2004 version and offers excellent guidance to all who treat chronic pain. The Board members received the document in advance of the October 24, 2013 full Board meeting. After discussion, the Board voted unanimously to adopt the 2013 Model Policy as Board of Medicine Guidance Document 85-24, replacing the 2004 version. You can read the entire document at: <http://www.dhp.virginia.gov/medicine/guidelines/85-24.pdf>

PHYSICIAN ASSISTANT FLUOROSCOPY REGULATIONS

On November 12, 2013, the emergency regulations pursuant to legislation from the 2012 Session of the General Assembly facilitating fluoroscopy by physician assistants became effective. The regulations prescribe the education and examination necessary for a physician assistant to perform fluoroscopy. Here are the emergency regulations in their entirety:

18VAC85-50-117. Authorization to use fluoroscopy.

A physician assistant working under the supervision of a licensed doctor of medicine or osteopathy specializing in the field of radiology is authorized to use fluoroscopy for guidance of diagnostic and therapeutic procedures provided such activity is specified in his protocol and he has met the following qualifications:

1. Completion of at least 40 hours of structured didactic educational instruction and at least 40 hours of supervised clinical experience as set forth in the Fluoroscopy Educational Framework for the Physician Assistant created by the American Academy of Physician Assistants (AAPA) and the American Society of Radiologic Technologists (ASRT); and
2. Successful passage of the American Registry of Radiologic Technologists (ARRT) Fluoroscopy Examination.

MIDWIFERY DISCLOSURE REGULATIONS

The 2009 Session of the General Assembly passed a law that required midwives to disclose information about certain high risk conditions to their clients. Regulations developed pursuant to the law have been approved and will be in effect as of December 18, 2013. At this time, the information to be given to clients has not been finalized. An ad hoc Work Group of Advisory Board on Midwifery members and Board of Medicine members met on November 22, 2013 to review and discuss information prepared by members of the Advisory Board. It is anticipated that the Work Group will have draft documents for review by the Advisory Board on Midwifery on February 7, 2014. The Advisory Board can then refer the informational documents to the full Board of Medicine for review and approval at its meeting on February 20, 2014. Here are the regulations for which the Work Group is developing informational documents:

18VAC85-130-80

Part III

Practice Standards

18VAC85-130-80. ~~Disclosure~~ General disclosure requirements.

A licensed midwife shall provide written disclosures to any client seeking midwifery care. The licensed midwife shall review each disclosure item and obtain the client's signature as evidence that the disclosures have been received and explained. Such disclosures shall include:

1. A description of the licensed midwife's qualifications, experience, and training;
2. A written protocol for medical emergencies, including hospital transport, particular to each client;
3. A statement as to whether the licensed midwife has hospital privileges;

4. A statement that a licensed midwife is prohibited from prescribing, possessing or administering controlled substances;
5. A description of the midwife's model of care;
6. A copy of the regulations governing the practice of midwifery;
7. A statement as to whether the licensed midwife carries malpractice or liability insurance coverage and, if so, the extent of that coverage;
8. An explanation of the Virginia Birth-Related Neurological Injury Compensation Fund and a statement that licensed midwives are currently not covered by the fund; and
9. A description of the right to file a complaint with the Board of Medicine and with NARM and the procedures and contact information for filing such complaint.

18VAC85-130-81

18VAC85-130-81. Disclosures on health risks.

A. Upon initiation of care, a midwife shall review the client's medical history in order to identify pre-existing conditions or indicators that require disclosure of risk for home birth. The midwife shall offer standard tests and screenings for evaluating risks and shall document client response to such recommendations. The midwife shall also continually assess the pregnant woman and baby in order to recognize conditions that may arise during the course of care that require disclosure of risk for birth outside of a hospital or birthing center.

B. If any of the following conditions or risk factors are presented, the midwife shall request and review the client's medical history, including records of the current or previous pregnancies; disclose to the client the risks associated with a birth outside of a hospital or birthing center; and provide options for consultation and referral. If the client is under the care of a physician for any of the following medical conditions or risk factors, the midwife shall consult with or request documentation from the physician as part of the risk assessment for birth outside of a hospital or birthing center.

1. Antepartum risks:

Conditions requiring ongoing medical supervision or ongoing use of medications;

Active cancer;

Cardiac disease;

Severe renal disease -- active or chronic;

Severe liver disease -- active or chronic;

HIV positive status with AIDS;

Uncontrolled hyperthyroidism;

Chronic obstructive pulmonary disease;

Seizure disorder requiring prescriptive medication;

Psychiatric disorders;

Current substance abuse known to cause adverse effects;

Essential chronic hypertension over 140/90;

Significant glucose intolerance;

Genital herpes;

Inappropriate fetal size for gestation;

Significant 2nd or 3rd trimester bleeding;

Incomplete spontaneous abortion;

Abnormal fetal cardiac rate or rhythm;

Uterine anomaly;

Platelet count less than 120,000;

Previous uterine incision and/or myomectomy with review of surgical records and/or subsequent birth history;

Isoimmunization to blood factors;

Body mass index (BMI) equal to or greater than 30;

History of hemoglobinopathies;

Acute or chronic thrombophlebitis;

Anemia (hematocrit less than 30 or hemoglobin less than 10 at term);

Blood coagulation defect;

Pre-eclampsia/eclampsia;

Uterine ablation;

Placental abruption;

Placenta previa at onset of labor;

Persistent severe abnormal quantity of amniotic fluid;

Suspected chorioamnionitis;

Ectopic pregnancy;

Pregnancy lasting longer than 42 completed weeks with an abnormal nonstress test;

Any pregnancy with abnormal fetal surveillance tests;

Rupture of membranes 24 hours before the onset of labor;

Position presentation other than vertex at term or while in labor; or

Multiple gestation.

2. Intrapartum risks:

Current substance abuse;

Documented intrauterine growth retardation (IUGR)/small for gestational age (SGA) at term;

Suspected uterine rupture;

Active herpes lesion in an unprotectable area;

Prolapsed cord or cord presentation;

Suspected complete or partial placental abruption;

Suspected placental previa;

Suspected chorioamnionitis;

Pre-eclampsia/eclampsia;

Thick meconium stained amniotic fluid without reassuring fetal heart tones and birth is not imminent;

Position presentation other than vertex at term or while in labor;

Abnormal auscultated fetal heart rate pattern unresponsive to treatment or inability to auscultate fetal heart tones;

Excessive vomiting, dehydration, or exhaustion unresponsive to treatment;

Blood pressure greater than 140/90 that persists or rises and birth is not imminent;

Maternal fever equal to or greater than 100.4°F; or

Labor or premature rupture of membrane (PROM) less than 37 weeks according to due date.

3. If a risk factor first develops when birth is imminent, the individual midwife must use judgment taking into account the health and condition of the mother and baby in determining whether to proceed with a home birth or arrange transportation to a hospital.

C. If the risks factors or criteria have been identified that may indicate health risks associated with birth of a child outside of a hospital or birthing center, the midwife shall provide evidence-based information on such risks. Such information shall be specified by the board in guidance documents and shall include evidence-based research and clinical expertise from both the medical and midwifery models of care.

D. The midwife shall document in the client record the assessment of all health risks that pose a potential for a high risk pregnancy and, if appropriate, the provision of disclosures and evidence-based information.

BEHAVIOR ANALYSIS REGULATIONS

Emergency regulations authorizing the Board to license and regulate behavior analysts and assistant behavior analysts became effective September 18, 2012. Initial regulations to replace the emergency regulations were to be developed by September 18, 2013. As it appeared that the initial regulations would not be done by that date, the Board of Medicine and DHP requested an extension of the emergency regulations. They will now be in effect until March 20, 2014. The public comment period for the proposed initial regulations closed on December 6, 2013. A large number of comments have been received, both online and at the October 24, 2013 public hearing to take public comment on this matter. The original ad hoc Work Group to develop the emergency regulations will be meeting on Thursday, December 19, 2013 to review all comment, make revisions to the proposed regulations if

necessary, and refer them to the Executive Committee of the Board of Medicine for review and action at its December 27, 2013 meeting in Richmond. The ad hoc Work Group will not take public comment at its meeting, as the period for public comment has closed.

GUIDANCE DOCUMENT 90-56

The Board of Medicine has received inquiries about whether this guidance document, which addresses practice agreement requirements for Licensed Nurse Practitioners working with Collaborating Patient Care Team Physicians, has been updated. It has not; this is the current version approved by the Committee of the Joint Boards of Nursing and Medicine, the Board of Nursing and the Board of Medicine. If you collaborate or anticipate collaborating with nurse practitioners, this document gives you guidance on how to jointly develop the necessary practice agreements.

Practice Agreement Requirements for Licensed Nurse Practitioners

Adopted by the Board of Nursing – July 17, 2012
Adopted by the Board of Medicine – August 3, 2012

In the *Regulations Governing the Licensure of Nurse Practitioners, 18VAC 90-30-10 et seq.*, “Practice agreement” is defined as:

“a written or electronic statement, jointly developed by the collaborating patient care team physician(s) and the licensed nurse practitioner(s), that describes the procedures to be followed and the acts appropriate to the specialty practice area to be performed by the licensed nurse practitioner(s) in the care and management of patients. The practice agreement also describes the prescriptive authority of the nurse practitioner, if applicable.”

The practice agreement should include:

- A description of the procedures that the licensed nurse practitioner (LNP) will perform in accordance with his or her specialty training.
- Provisions for the periodic review of patient charts or electronic patient records by a patient care team physician and may include provisions for visits to the site where health care is delivered in the manner and at the frequency determined by the patient care team;
- Provisions for appropriate physician input in complex clinical cases and patient emergencies and for referrals; and
- Categories of drugs and devices that may be prescribed.
- Guidelines for availability and ongoing communications that provide for and define consultation among the collaborating parties and the patient that address, at a minimum, the availability of the collaborating physician proportionate to such factors as practice setting, acuity, and geography.
- Provisions for periodic joint evaluation of services provided and review of patient care outcomes.
- Provisions for periodic review and revision of the practice agreement.
- Authorization for the LNP’s for signatures, certifications, stamps, verifications, affidavits and endorsements consistent with 18VAC90-30-122.
- Authorization to refer patients for physical therapy in accordance with § 54.1-3482.
- Authorization to write DNR orders.
- Written or electronic signature of the LNP(s) and the physician(s).

The LNP is required to:

- Maintain the practice agreement.
- Make the practice agreement available for review by the Board of Nursing.
- Have a practice agreement with a patient care team physician that includes the setting or settings in which the nurse practitioner is actively practicing.

It is not a requirement that a copy of the practice agreement be submitted to the Board of Nursing to obtain or renew the professional license.

PRESCRIPTION MONITORING PROGRAM (PMP)

The PMP has proven itself to be a critical tool in the Board of Medicine's mission to protect the public. Presently, there are over 18,000 users signed up. If you have not signed up to use the PMP, you are encouraged to do so. It is not just for those prescribers that treat chronic pain or write opioid analgesics for shorter periods of time. The PMP captures Schedule II-IV controlled substances, so it is useful in primary care and many different specialties. To sign up, just go to: <https://www.pmp.dhp.virginia.gov/VAPMPWebCenter/login.aspx> and click on "Not a member? Register" to begin the process.

ELECTRONIC DEATH CERTIFICATES

The Virginia Department of Health Division of Vital Records is gearing up to have the filing of death certificates accomplished online. In October 2014, it will be possible for the entire process to be accomplished online, including all necessary communications between funeral directors, hospitals, physicians, and others. It promises efficiencies for all. If you are looking for an educational module on how to fill out death certificates, you can access it at: <https://covkc.agencies.virginia.gov/vdh/courses/Clinicians/deathcertificationcourse/player.html>

BOARD MEETING MINUTES

DRAFT

VIRGINIA BOARD OF MEDICINE FULL BOARD MINUTES

Thursday, October 24, 2013

Department of Health Professions

Henrico, VA

PUBLIC HEARING

At 8:51 AM, Dr. Mackler called to order a hearing to receive public comment on proposed regulations 18VAC85-150-10 et seq. – Regulations Governing the Practice of Behavior Analysis.

Bethany Marcus, Ph.D. expressed her support for the regulations and also her concern about the oversight and supervision of assistants and technicians, billing practices, and composition of an advisory board were one to be established. Dr. Marcus also provided the Board her written comments.

Michael Chiglinsky, Ph.D. spoke on behalf of the Virginia Academy of Clinical Psychologists and advised that it fully endorses the comments and concerns identified by Dr. Marcus. Additionally, he requested that consideration be given to: 1) specifying the number of assistants that can be supervised simultaneously; 2) establishing a minimum of face-to-face time that each supervisor must spend with each patient; and 3) setting on-site requirements during delivery of professional services. Dr. Chiglinsky also provided the Board his written comments.

James Monroe, Ph.D. expressed concern about the proposed regulations. Dr. Monroe remarked that the BACB stated that the practice of behavior analysis does not appear to appropriately fall within the mandates of the Board of Medicine and that perhaps this charge should fall under the Department of Education. Dr. Monroe provided the Board his written comments.

After all signed up had spoken, Dr. Mackler stated that the comment period would close on December 6, 2013. Any additional written comments should be forwarded to Dr. Harp or posted on the Virginia Regulatory Townhall website.

The public hearing on the proposed regulations concluded at 9:15 AM.

CALL TO ORDER: Dr. Mackler called the meeting of the Board to order at 9:16 AM.

ROLL CALL

MEMBERS PRESENT: Stuart Mackler, MD, President
Wayne Reynolds, DO, Vice-President
Kenneth Walker, MD, Secretary-Treasurer
Syed Ali, MD

Randy Clements, DPM
Siobhan Dunnavant, MD
Irina Farquhar, PhD
Deborah DeMoss Fonseca
David Giammittorio, MD
Stephen Heretick, JD
Robert Hickman, MD
Valerie Hoffman, DC
William Hutchens, MD

MEMBERS ABSENT: Barbara Allison-Bryan, MD
Lori Conklin, MD
Kamlesh Dave, MD
Jane Maddux

STAFF PRESENT: William L. Harp, MD, Executive Director
Jennifer Deschenes, JD, Deputy Executive Director, Discipline
Barbara Matusiak, MD, Medical Review Coordinator
Alan Heaberlin, Deputy Executive Director, Licensing
Colanthia Morton Opher, Operations Manager
Pam Smith, Licensing Specialist
Dianne Reynolds-Cane, MD, DHP Director
Arne Owens, DHP Chief Deputy Director
Elaine Yeatts, DHP Senior Policy Analyst

OTHERS PRESENT: Tyler Cox, MSV
Jerry Canaan, HDJN
Bethany Marcus, Ph.D.
Michael Chiglinksy, Ph.D., VACP
Lindsay Walton, VOTA
Bo Kenney, VACP
James Pickral, VPhA

EMERGENCY EGRESS PROCEDURES

Dr. Reynolds read the emergency egress procedures for Conference Room 2.

APPROVAL OF THE JUNE 20, 2013 MINUTES

Dr. O'Connor moved to accept the minutes of June 20, 2013. The motion was seconded and carried unanimously.

ADOPTION OF AGENDA

Dr. Reynolds moved to adopt the agenda as presented. The motion was seconded and carried unanimously.

INTRODUCTION OF NEW BOARD MEMBERS

The Board welcomed newly-appointed Board members Syed Ali, MD, Deborah DeMoss Fonseca, and David Giammittorio, MD. Each gave a brief self-introduction.

PUBLIC COMMENT ON AGENDA ITEMS

Dr. Mackler acknowledged and welcomed the guests that were present.

There was no public comment on the agenda items.

NEW BUSINESS

DHP DIRECTOR'S REPORT

Dr. Cane advised that DHP had submitted a legislative plan to the Governor's Office for inclusion in the 2014 General Assembly packet and is waiting on a determination as to whether it will be introduced. She also informed the members that DHP was one of six entities chosen by the National Governors' Association to be awarded funding to develop a licensure plan for military families transitioning to civilian life. Dr. Cane noted that this plan is currently geared towards the LPN, EMT and PTA professions. She also advised that she will be addressing the Virginia Senate about Medicare mapping in the next couple of weeks.

PLAQUE PRESENTATIONS

After Dr. Cane's report, Mr. Heretick eloquently praised Dr. Cane and presented her with a service plaque from the Board of Medicine expressing its appreciation for her first four years of service as DHP Director. She thanked everyone for their thoughtfulness and consideration.

Mr. Heretick also presented a service plaque to Howard Casway, Sr., Attorney General in absentia, acknowledging his 30+ years of exceptional service with DHP.

Dr. Hoffman presented Dr. Mackler a gavel plaque commemorating his current position as President of the Virginia Board of Medicine.

REPORT OF OFFICERS AND EXECUTIVE DIRECTOR

PRESIDENT'S REPORT

Dr. Mackler had no report.

VICE-PRESIDENT'S REPORT

Dr. Reynolds reported that the USMLE program has determined that each exam step will be limited to six attempts and that USMLE is committed to working on security issues at non-American testing sites. Dr. Reynolds advised that a formal report will follow. He also acknowledged the good work of the staff in keeping the Board's expenses under control. He further stated that with a healthy surplus, the Board would be voting on a fee reduction for its licensees a little later on the agenda.

SECRETARY-TREASURER'S REPORT

Dr. Walker had no report.

EXECUTIVE DIRECTOR'S REPORT

- Revenue and Expenditures Report

Dr. Harp reported that the Board is solvent with a cash balance of \$6,904,251 as of September 30, 2013. Dr. Harp also noted that there will be a 14% decrease in renewal fees across the board for one renewal cycle beginning in January 2014.

- Health Practitioners Monitoring Program Statistics

Dr. Harp noted the total number of Medicine participants in the program to be 103 with 71 MDs. This report was for informational purposes only. No action was required.

- New Law allowing Electronic Meetings under FOIA

Dr. Harp informed the Board that **§2.2-3708. Electronic communication meetings; applicability; physical quorum required; exceptions; notice; report** will allow advisory boards to hold an electronic meeting when a physical quorum is not able to be established. However, members may need to open their homes to the public, the meeting would need to be taped, and the tape preserved to meet FOIA requirements.

- FY2014 First Quarter Key Performance Measures

For the benefit of new Board members, Dr. Harp explained the components of the key performance measures highlighting the rise and fall of the Board's case closure numbers. Dr. Harp acknowledged the hard work by Dr. Matusiak and the Board members for their time and effort in probable cause review which has the Board at a 100% clearance rate.

- Update on the Virginia Prescription Monitoring Program

Dr. Harp briefly reviewed the statistics provided by Ralph Orr, Director, Prescription Monitoring Program, and noted that they expect to process greater than 1.2 million requests for calendar year 2013. Dr. Harp also pointed out that the program added over 3,000 registered users at the beginning of 2013 due in part to the inclusion of Tennessee pharmacists. Dr. Harp stated that Mr. Orr is working diligently to partner with more states with which to reciprocate access to data.

This report was for informational purposes only and did not require any action.

- Trust for America's Health (TFAH) article on Prescription Drug Abuse

Dr. Harp pointed out that prescription drug abuse has become a top public health concern of the TFAH, and that according to the report, prescription drug-related deaths now outnumber illicit drug deaths. Dr. Harp also noted that Virginia ranked 48th out of 51 jurisdictions in the rate of drug overdose deaths at 6.8 per 100,000. Only Nebraska, North Dakota and South Dakota had lower rates.

- Medicaid Workforce Maps

Dr. Cane had referred to these in her presentation.

- Consensus Principles for an Interstate Compact for Medical Licensure

Dr. Harp advised that Congress is currently looking for a way to facilitate telemedicine across state lines; state boards of medicine are seen as somewhat of an impediment. HR3077 has just been introduced. It would authorize a Medicare provider to provide care to a Medicare beneficiary regardless of whether the provider is licensed in the patient's state or not. Dr. Harp said the Federation of State Medical Boards has been proactive in regards to telemedicine and license portability for years. FSMB is currently working to get an interstate compact solution to this matter rather than have Congress pass legislation that would dramatically change the landscape of medical regulation in the United States.

Mr. Heretick advised that the concept of using an interstate compact is the oldest form of government we have. He said that each state would be allowed to judge for itself whether or not to join with another state; one size does not fit all. He also said that the physician would be subject to disciplinary action from the states in which the patient resides. He further noted that FSMB asked for and got a meeting with Representative Charles Boustany, Chair of the Health Subcommittee of House Ways and Means in the middle of budget negotiations to discuss this model. Mr. Heretick noted that this issue is evolving at a rapid rate.

The chair called for a break and the meeting reconvened at 10:17 a.m.

- Board Member/Staff Participation at FSMB

Dr. Harp reviewed the service contributions of Board members and staff to the Federation of State Medical Boards. Dr. Harp stated that staff will begin sending out notices about upcoming webinars for interested Board members.

- FSMB Call for Elected Positions

Dr. Harp encouraged anyone interested in serving on the FSMB Board of Directors or Nominating Committee to apply. He reminded the Board members of their status as a Fellow of FSMB while on the Virginia Board of Medicine and for 3 years after they rotate off the Board.

- FSMB Call for Appointed Positions

Dr. Harp suggested for those not interested in an elected position to consider serving on one of FSMB's committees. He noted that Dr. Reynolds is currently active on the Bylaws, Audit, and

Editorial committees. Dr. Reynolds added that it is a great opportunity without too much meeting time, and it keeps Virginia visible at the national level.

- Letter of Comment on Maintenance of Licensure from Jerome M. Parsons, MD

Dr. Harp pointed to the correspondence from Dr. Parsons in which he asks how the Maintenance of Licensure pilot will improve the quality of care provided by a practitioner. Dr. Harp reminded the Board that it had agreed to help out with the FSMB pilot process by 1) helping to figure out how to integrate MOL into the license renewal process, 2) by taking a readiness survey, and 3) by reviewing outreach material prepared for the public, the medical community and others. So far, only the second item has been accomplished.

Committee and Advisory Board Reports

Dr. Harp reviewed the updated Committee assignments and asked that any questions or concerns be addressed to him or Dr. Mackler.

Ms. Barrett asked that minor changes be made to the August 2, 2013 draft Executive Committee minutes.

Dr. Reynolds moved to accept the committee reports en bloc with the suggested change to the Executive Committee meeting minutes. The motion was seconded and carried unanimously.

Other Reports

Assistant Attorney General

Ms. Barrett provided an update on legal matters concerning Dr. Vuyyuru, Dr. Petrie, and Dr. Clowdis.

No action was required by the Board.

Board of Health Professions

Dr. Farquhar had no report.

Podiatry Report

Dr. Clements advised that the American Board of Lower Extremity Surgery (ABLES) is approaching the General Assembly to request having their certification added to the list of certifying bodies for podiatrists. Dr. Clements noted that the ABLES certification process appears to be as rigorous as the other board certifications currently accepted.

Chiropractic Report

Dr. Hoffman had no report.

Joint Board of Nursing and Medicine

Dr. Hickman had no report.

Regulatory and Legislative Issues

- **Chart of Regulatory Actions**

Ms. Yeatts provided an update on the status of pending regulations. She advised that we are still awaiting approval for a few; however a number have been approved, including the Regulations Governing the Practice of Midwifery - Disclosure Requirements for High-Risk Pregnancies. Ms. Yeatts stated that what remains to be done is the development of a joint statement that represents both the medicine and midwifery communities. Ms. Yeatts then advised that the proposed draft document will be presented at the Executive Committee on December 27, 2013 for adoption.

Ms. Yeatts informed the Board that the emergency regulations for Behavior Analysts were extended until March 20, 2014. With the comment period closing December 6th, the meeting of the Executive Committee has been moved to the 27th to accommodate the regulatory process.

Ms. Yeatts also pointed out that the law establishing the Practice of Behavior Analysts was passed without establishing an advisory board. Therefore, once comments have been received, the ad hoc committee that helped developed the regulations may need to reconvene to review the comments prior to the Board's Executive Committee meeting December 27th.

- **Response to Petition for Rulemaking**

Ms. Yeatts acknowledged the Petition for Rulemaking received from Melody Cartwright in which she requests consideration be given to requiring chiropractors to use digital x-rays when treating and diagnosing curvature of the spine. Ms. Yeatts pointed out that the comment period on this petition was open from July 29-August 28, 2013, and there were no comments received.

After discussion the Board agreed to decline the petition based on there being no evidence to support an improved outcome from using digital x-rays instead of film x-rays, no evidence that the recommendation would enhance the standard of care expected of all members of the profession, and that regulations should not be written in a disease-specific fashion. Dr. Hickman officially offered the motion and it was seconded and carried unanimously.

- **Adoption of Regulations for Collaborative Practice Agreements**

Ms. Yeatts informed the Board that the proposed regulations were jointly promulgated by an ad hoc committee constituted from the Boards of Pharmacy and Medicine on August 20, 2013. Ms. Yeatts stated that the recommended amendments to 18VAC110-40-10 et seq. simply conform the regulations to the changes in the statute.

Dr. Hoffman moved to adopt the amendments to 18VAC110-140-10 et seq., Regulations Governing Collaborative Practice Agreements by an action exempt from the provisions of the Administrative Process Act. The motion was seconded and carried unanimously.

- **Virginia Board of Medicine and Accommodations for USMLE Testing**

Dr. Harp presented the Executive Committee's recommendation from its meeting on April 5, 2013 to allow requests for testing accommodations on USMLE Step exams to be handled by the Federation of State Medical Boards.

After a brief discussion, Dr. Reynolds moved to accept the recommendation of the Executive Committee as presented. The motion was seconded and carried.

- Consideration of Proposed Guidance Document

Dr. Harp reminded the Board that at its February 21, 2013 meeting, it voted to accept the USMLE program's new policy that attempts at Step 3 be limited to six with an allowance for one additional attempt if approved by an interested board of medicine. Ms. Yeatts had suggested that a guidance document be drafted to that effect. Dr. Harp presented a proposed guidance document that stated the Board's policy would be to grant no additional attempts on any of the USMLE Step Exams. Dr. Hoffman moved to accept the guidance document as presented. The motion was seconded and carried unanimously.

- Updated FSMB Model Policy on the Use of Opioid Analgesics in the Treatment of Chronic Pain

Dr. Harp presented the updated FSMB Model Policy and asked the Board to consider adoption or referral to the Legislative Committee for review and recommendation. Dr. Harp added that there are two other model policies on the use of social media and telemedicine that will be reviewed at the January Legislative Committee.

Dr. Hoffman moved to accept the updated policy as new Guidance Document 85-24, that it be published on the Board's website, and its existence be communicated to the public. The motion was seconded.

After further discussion, Dr. Dunnivant asked about partnering with MSV to have the Guidance Document communicated to its membership.

After discussion, the motion was accepted unanimously.

Licensing Report

Mr. Heaberlin provided the license count as of October 16th and reviewed the licensing statistics, highlighting the number of licenses issued by the Board between the dates of October 2012 to September 2013.

Mr. Heaberlin then presented the data gathered at the request of the Executive Committee regarding late renewals for the purpose of determining if further action is required.

After discussion, the Board decided to take no action.

Mr. Heaberlin informed the Board that the grace period for licensing behavior analysts and assistant behavior analysts expired September 18, 2013, so anyone applying now that has been practicing in Virginia without a license will be issued a consent order for unlicensed practice.

Mr. Heaberlin reported that the Federation of State Medical Boards has requested that the Board begin accepting FCVS packets for physician assistants. He reminded the Board that it currently accepts FCVS packets for applicants in medicine and surgery and osteopathic medicine and surgery.

After discussion, Dr. Hickman moved to accept, but not require, the use of FCVS packets for physician assistants. The motion was seconded and carried unanimously.

Discipline Report

Ms. Deschenes provided an overview of the case review process and case statistics.

This report was for informational purposes only and did not require any action.

Announcements

Dr. Dunnivant requested that Board members be provided with Board member bios. Dr. Harp suggested this be a project for the agency's communication officer, Diane Powers. Dr. Harp will contact Ms. Powers regarding this request.

Credentials Committee Recommendations

Mr. Heaberlin provided a copy of the Credentials Committee's recommendation for review. Dr. Hutchens moved to accept the recommendation as presented. The motion was seconded. The final vote was 8 to five to ratify.

Adjournment: With no other business to conduct, the meeting adjourned at 11:50 a.m.

VIRGINIA BOARD OF MEDICINE
High-Risk Pregnancy Disclosure Work Group

Friday, November 22, 2013

Department of Health Professions

Henrico, VA

CALL TO ORDER: Dr. Dunnivant called the meeting to order at 1:15 p.m.

ROLL CALL

MEMBERS PRESENT: Siobhan Dunnivant, MD, Chair
Christian Chisholm, MD
Kim Lane, CPM
Kim Pekin, CPM
Bettie Sheets, CPM

MEMBERS ABSENT: David Giammittorio, MD

STAFF PRESENT: William L. Harp, MD, Executive Director
Jennifer Deschenes, JD, Deputy Executive Director, Discipline
Colanthia Morton Opher, Operations Manager
Elaine Yeatts, DHP Policy Analyst

OTHERS PRESENT: Ann Hughes, MSV
Glena Turner, CPM, LM, CMA
Marinda Shindler, CMA
Rebecca Cox, CMA
Becky Bowers-Lanier, CMA

EMERGENCY EGRESS INSTRUCTIONS

After Dr. Harp provided the emergency egress instructions, Dr. Dunnivant welcomed the members of the Work Group and the public.

ROLL CALL

The roll was called and a quorum declared.

APPROVAL OF THE AGENDA

The Work Group approved the agenda as presented.

CHARGE OF THE COMMITTEE

After the members of the Work Group introduced themselves, Ms. Yeatts addressed its charge of developing a guidance document that will provide evidence-based information on the health risks associated with births outside of a hospital or birthing center, including, but not limited to, risks associated with vaginal births after a prior cesarean section, breech births, births by women experiencing high-risk pregnancies, and births involving multiple gestation.

PUBLIC COMMENT

Dr. Dunnivant opened the floor for public comment; there was no comment.

DISCUSSION OF INFORMATIONAL DOCUMENTS

Dr. Dunnivant thanked Ms. Pekin, Ms. Sheets and Ms. Lane for the draft documents prepared by the midwifery community on the high-risk conditions identified in the regulations. The Work Group went through all 40 documents, commented, discussed and assigned the documents to members for further research and refinement to ensure that the best evidence-based information from both the medical and midwifery models would be made available to midwives and their clients.

The following is a list of the high-risk conditions identified for disclosure in the regulations and the Work Group member that will be conducting additional research and further refining the good work done by the midwifery members of the Advisory Board.

Intrapartum Risk Factors - Ms. Sheets and Ms. Lane

Conditions requiring ongoing medical supervision or ongoing use of medications - Dr. Harp

Active cancer - Dr. Chisholm

Cardiac disease – the Work Group agreed that this section is acceptable as documented.

Severe renal disease - active or chronic - Dr. Chisholm

Severe liver disease -- active or chronic - Dr. Chisholm

HIV positive status with AIDS - Dr. Chisholm

Uncontrolled hyperthyroidism – the Work Group agreed that this section is acceptable as documented.

Chronic obstructive pulmonary disease - Dr. Dunnivant

Seizure disorder requiring prescriptive medication - Dr. Chisholm

Psychiatric disorders - Dr. Harp & Ms. Sheets

Current substance abuse known to cause adverse effects – the Work Group agreed that this section is acceptable as documented.

Essential chronic hypertension over 140/90 - Dr. Dunnivant

Significant glucose intolerance - Dr. Chisholm

Genital herpes - Ms. Lane

Inappropriate fetal size for gestation - Dr. Chisholm and Ms. Lane

Significant 2nd or 3rd trimester bleeding - Ms. Sheets

Incomplete spontaneous abortion - Dr. Dunnivant

Abnormal fetal cardiac rate or rhythm - Dr. Chisholm

Uterine anomaly - Ms. Pekin

Platelet count less than 120,000 - Dr. Dunnivant

Previous uterine incision and/or myomectomy with review of surgical records and/or subsequent birth history - Dr. Chisholm, Dr. Dunnivant, Ms. Lane and Ms. Sheets

Isoimmunization to blood factors - Ms. Lane

Body Mass Index (BMI) equal to or greater than 30 - Dr. Dunnivant

History of hemoglobinopathies - Dr. Chisholm

Acute or chronic thrombophlebitis - Dr. Chisholm

Anemia (hematocrit less than 30 or hemoglobin less than 10 at term) - Ms. Lane

Blood coagulation defect - Dr. Chisholm

Pre-eclampsia/eclampsia - Ms. Sheets

Uterine ablation - Ms. Sheets

Placental abruption - Dr. Dunnivant

Placenta previa at onset of labor – the Work Group agreed that this was covered in Intrapartum Risk Factors

Persistent severe abnormal quantity of amniotic fluid - Dr. Chisholm

Suspected chorioamnionitis - the Work Group agreed that this was covered in Intrapartum Risk Factors

Ectopic pregnancy - Dr. Dunnivant

Pregnancy lasting longer than 42 completed weeks with an abnormal non-stress test - Ms. Sheets

Any pregnancy with abnormal fetal surveillance tests - Ms. Sheets

Rupture of membranes 24 hours before the onset of labor - Dr. Dunnivant

Position presentation other than vertex at term or while in labor - Dr. Dunnivant & Ms. Sheets

Multiple gestation - Dr. Chisholm

Dr. Chisholm suggested that it would be a good idea to include an interval for review and updating of the guidance document, given the evolution of medical knowledge and practice.

NEXT STEPS

The Work Group will meet again in a number of weeks to refine the recommended language for the guidance document. The Advisory Board on Midwifery will review the recommended guidance document on Friday, February 7, 2014. The Advisory can refer it to the full Board for its review at the Thursday, February 20, 2014 Board meeting.

Although the Disclosure regulations go into effect December 18, 2013, Ms. Deschenes commented that there will be no violation by the midwife licensee that continues to practice after that date and is unable to distribute disclosure information. Ms. Deschenes stated that the licensee cannot be charged for failing to provide something that the Board has not yet developed for distribution.

ANNOUNCEMENTS

None

ADJOURNMENT

With no other business to conduct, the meeting adjourned at approximately 3:17 p.m.

NEXT SCHEDULED MEETING: TBA

License Counts as of December 13, 2013

Occupation	Count
Assistant Behavior Analyst	57
Athletic Trainer	1,184
Behavior Analyst	356
Chiropractor	1,752
Interns & Residents	3,020
Licensed Acupuncturist	454
Licensed Midwife	73
Limited Radiologic Technologist	666
Medicine & Surgery	36,219
Occupational Therapist	3,461
Occupational Therapy Assistant	1,129
Osteopathy & Surgery	2,523
Physician Assistant	2,678
Podiatry	496
Radiologic Technologist	3,694
Radiologist Assistant	8
Respiratory Care Practitioner	3,739
Restricted Volunteer	69
University Limited License	19
Volunteer Registration	2
TOTAL	61,599

Virginia Board of Medicine
Board Members 2013-2014

<p>Syed Salman Ali, MD 1st Term Expires June 2017 District: 11 – Vienna</p>	<p>Stephen E. Heretick, JD 2nd Term Expires 2011 Citizen Member - Portsmouth</p>
<p>Barbara Allison-Bryan, MD 1st Term Expires June 2016 District: 1 - North</p>	<p>Robert Hickman, MD 1st Term Expires June 2014 District: 6 - Lynchburg</p>
<p>J. Randolph Clements, DPM 1st Term Expires June 2014 Podiatrist - Roanoke</p>	<p>Valerie Lowe Hoffman, DC 2nd Term Expires June 2013 Chiropractor - Danville</p>
<p>Lori D. Conklin, MD 1st Term Expires June 2017 District: 5 – Charlottesville</p>	<p>VACANT 1st Term Expires June 2015 District: 3 – Norfolk</p>
<p>Kamlesh Dave, MD 1st Term Expires June 2015 District: 4 - Chester</p>	<p>Stuart F. Mackler, MD, President 2nd Term Expires June 2016 District: 2 - Franktown</p>
<p>Siobhan S. Dunnavant, MD 1st Term Expires June 2016 District: 7 – Henrico</p>	<p>Jane Sheffield Maddux 1st Term Expires June 2017 Citizen Member - Charlottesville</p>
<p>Irina Farquhar, Ph.D 1st Term Expires June 2015 Citizen Member - Burke</p>	<p>Kevin O’Connor, MD 1st Term Expires June 2016 District: 10 – Leesburg</p>
<p>Deborah DeMoss Fonseca 1st Term Expires June 2017 Citizen Member - Springfield</p>	<p>Wayne Reynolds, DO, Vice- President 2nd Term Expires June 2016 Osteopath - Gloucester Point</p>
<p>David C. Giammittorio, MD 1st Term Expires June 2016 District: 8 - Lorton</p>	<p>Kenneth J. Walker, MD, Secretary-Treasurer 1st Term Expires June 2016 District 9 - Pearisburg</p>

ADVISORY BOARD MEMBERS

Advisory Board on Acupuncture

Lynn Almloff, L.Ac., Vice-Chair
Virginia Beach
Term: 7/1/10 to 6/30/14

Mari K. Eder
Springfield
Term: 7/1/10 to 6/30/14

Floyd M. Herdrich, L.Ac.
Richmond
Term: 7/1/10 to 6/30/14

Elaine Komarow, L.Ac, Chair
Vienna
Term: 7/1/10 to 6/30/14

Chheany W. Ung, MD
Roanoke
Term: 7/1/10 to 6/30/14

Advisory Board on Athletic Training

Jon Almquist, ATC
Vienna
Term: 7/1/03 – 6/30/11

Mitchell Callis, ATC
Chesapeake
Term Date: 7/1/11 - 6/30/14

Brent L. Arnold, AT, Chair
Goochland
Term Date: 7/1/10 - 6/30/14

Reg E. Roland
Richmond
Term: 7/1/03-6/30/11

Cynthia Su, MD, Vice-Chair
Chesapeake
Term: 7/1/07-6/30/15

Advisory Board on Midwifery

Christian A. Chisholm, MD
Charlottesville
Term: 7/1/11 to 6/30/13

Kim Lane, CPM
Charlottesville
Term: 7/1/13 to 6/30/17

Deb McPherson
Lynchburg
Term: 7/1/11-6/30/15

Kim Pekin, CPM
Purcellville
Term: 7/1/11 to 6/30/15

Bettie Sheets, CPM
Gloucester
Term: 7/1/12 to 6/30/16

Advisory Board on Occupational Therapy

Jean A. Hearst, OT
Virginia Beach
Term: 7/1/2004-6/30/12

Mitch Lovinger, OT, Vice-Chair
Bridgewater
Term: 7/1/11-6/30/15

Eugenio Monasterio, MD, Chair
Mechanicsville
Term Expires 6/30/13

Kathleen C. Smith, OT
McLean
Term: 7/1/11-6/30/15

VACANT

Advisory Board on Physician Assistants

Rachel A. Carlson, MSDS, PA-C, Chair
Winchester
Term: 7/1/10 to 6/30/14

Paul Marino, PA-C
Reston
Term: 7/1/10 to 6/30/14

Thomas Parish, PA-C, Vice-Chair
Virginia Beach
Term: 7/1/10 to 6/30/14

James Potter, MD
Wise
Term: 7/1/10 to 6/30/14

Kishore Thota
McLean
Term: 7/1/10 to 6/30/14

Advisory Board on Polysomnographic Technology

Debbie Akers, RPSGT - Chair
Virginia Beach
Term: 7/1/10 to 6/30/14

Marie Quinn
Bon Air
Term: 7/1/10 to 6/30/14

Anna Rodriguez, RPSGT
Henrico
Term: 7/1/10 to 6/30/14

Michelle Sartelle, RPSGT, RRT
Henrico
Term: 7/1/10 to 6/30/14

Robert Vorona, MD, Vice-Chair
Virginia Beach
Term: 7/1/10 to 6/30/14

Advisory Board on Radiological Technology

Renee Hess, RT
Richmond
First Term: 7/1/10 to 6/30/14

Rebecca Keith, RT, Vice Chair
Springfield
First Term: 7/1/10 to 6/30/14

Karsten Konerding, MD
Henrico
First Term: 7/01/10 to 6/30/14

Elizabeth L. Meixner, RT, Chair
Richmond
Second Term: 10/12/04 to 6/30/14

VACANT

Advisory Board on Respiratory Care

Michael Blumberg, MD, Vice-Chair
Richmond
Term: 7/1/10 to 6/30/14

Damie Carter
Jonesville
Term: 7/1/10 to 6/30/14

Stan Holland, RRT
Harrisonburg
Term: 7/1/10 to 6/30/14

Wes Mullins, RRT
Big Stone Gap, VA 24219
Unexpired Term: - to 6/30/14

Daniel Rowley, RRT, Chair
Charlottesville
Term: 7/1/10 to 6/30/14

ADVISORY BOARD MEETING MINUTES AND REGULATIONS

Advisory Board on Acupuncture

http://townhall.virginia.gov/L/GetFile.cfm?File=C:\TownHall\docroot\meeting\26\19140\Minutes_DHP_19140_v1.pdf

Regulations: http://www.dhp.virginia.gov/medicine/medicine_laws_regs.htm#Reg

Advisory Board on Athletic Training

http://townhall.virginia.gov/L/GetFile.cfm?File=C:\TownHall\docroot\Meeting\26\19144\Minutes_DHP_19144_v1.pdf

Regulations: http://www.dhp.virginia.gov/medicine/medicine_laws_regs.htm#Reg

Advisory Board on Midwifery

http://townhall.virginia.gov/L/GetFile.cfm?File=C:\TownHall\docroot\meeting\26\19151\Minutes_DHP_19151_v1.pdf

Regulations: http://www.dhp.virginia.gov/medicine/medicine_laws_regs.htm#Reg

Advisory Board on Occupational Therapy

http://townhall.virginia.gov/L/GetFile.cfm?File=C:\TownHall\docroot\meeting\26\19134\Minutes_DHP_19134_v1.pdf

Regulations: http://www.dhp.virginia.gov/medicine/medicine_laws_regs.htm#Reg

Advisory Board on Physician Assistants

http://townhall.virginia.gov/L/GetFile.cfm?File=C:\TownHall\docroot\Meeting\26\19147\Minutes_DHP_19147_v1.pdf

Regulations: http://www.dhp.virginia.gov/medicine/medicine_laws_regs.htm#Reg

Advisory Board on Polysomnographic Technology

http://townhall.virginia.gov/L/GetFile.cfm?File=C:\TownHall\docroot\Meeting\26\19155\Minutes_DHP_19155_v1.pdf

Regulations: http://www.dhp.virginia.gov/medicine/medicine_laws_regs.htm#Reg

Advisory Board on Radiological Technology

http://townhall.virginia.gov/L/GetFile.cfm?File=C:\TownHall\docroot\Meeting\26\19141\Minutes_DHP_19141_v1.pdf

Regulations: http://www.dhp.virginia.gov/medicine/medicine_laws_regs.htm#Reg

Advisory Board on Respiratory Care

http://townhall.virginia.gov/L/GetFile.cfm?File=C:\TownHall\docroot\meeting\26\19136\Minutes_DHP_19136_v1.pdf

Regulations: http://www.dhp.virginia.gov/medicine/medicine_laws_regs.htm#Reg

BOARD DECISIONS

The following list contains decisions from August 2013 thru November 2013. You may access these decisions at www.dhp.virginia.gov (select "License Lookup") or at www.vahealthprovider.com for most MDs, DOs and DPM's. You may also contact the Board Office at (804) 662-7693 to request a copy.

NAME AND LICENSE NO.	DATE OF ACTION	August 2013 THRU November 2013 ACTIONS
Adams, Scott B., MD 0101-054652 Forest, VA	08/05/13 11/20/13	Reprimand, license subject to terms and conditions based on one patient case of prescribing controlled substances without obtaining a complete patient history and past treatment for chronic pain or psychiatric conditions, failure to order drug urine/serum screen, conduct pill counts, or take other appropriate measures to determine medications were being taken properly, prescribed medications notwithstanding awareness of drug seeking behavior and information that should have indicated patient was abusing medications, and failure to coordinate care with practitioners providing prenatal care although prescribing multiple medications that could affect said patient's pregnancy. Compliance with the Board's Order entered 08/05/2013; terms and conditions terminated, license reflects full and unrestricted status.
Allen, Dustin B., PA 0110-003605 Princeton, WV	09/20/13 10/17/13	Reprimand, license subject to terms and conditions based on being convicted in Mecklenburg County Circuit Court of one count of misdemeanor assault and battery; pleading guilty in Mecklenburg County Circuit Court to two counts of possession of a controlled substance (Schedule III) relating to needles and syringes filled with testosterone; prescribing on several occasions controlled substances to individuals with whom there was not a bona-fide practitioner-patient relationship; and failure to answer question on North Carolina Medical Board application truthfully. Compliance with the Board's Order entered 09/20/2013; license reflects full and unrestricted status.
Allen, Earl B., Jr., DC 0104-000489 Bristol, VA	09/09/13	Reprimand based on providing services that exceed the scope of practice for chiropractic including performing comprehensive physical examinations and laser tattoo removal treatments.
Allingham, David, MD 0101-046274 Oakton, VA	08/01/13	Continued on indefinite probation, license subject to terms and conditions based on PACE evaluation revealing multiple areas of concern and unsatisfactory performance; significant history of violating Board statutes and regulations by engaging in negligent and dangerous practice over the course of more than a decade; and one patient case of failure to obtain or documents an adequate medical history, failure to recommend or document consideration of referral of said patient and failure to document follow up lithium levels.
Alvarado, Jacinto C., MD 0101-053159 Bristol, VA	10/08/13	Mandatory suspension of privilege to renew based on action taken by the New York Board for Professional Medical Conduct.

Baum, Victor C., MD 0101-051903 Charlottesville, VA	10/08/13	Reprimand, license subject to terms and conditions based on engaging in unprofessional and disruptive conduct in a health care setting.
Bermudez, Michael M., MD 0101-241235 Livingston, TX	09/12/13	Violation no sanction based on action taken by New York State Board for Professional Medical Conduct.
Blatstein, Marc J., DPM 0103-000665 Potomac, MD	11/20/13	Compliance with the Board's Order entered 04/26/2010; terms and conditions terminated, license reflects full and unrestricted status.
Boone, Caesar A., DPM 0103-301097 Fort Washington, MD	08/07/13	License granted with terms and conditions based on not engaging in active practice of podiatry since June 2008.
Buchanan, Brian D., MD 0101-032060 Bedford, VA	10/17/13 11/20/13	Reprimand, monetary penalty (\$750.00), license subject to terms and conditions based on, while serving as Medical director at a facility, providing approximately 20 pre-signed prescription blanks to director of nursing to use in medical emergencies for patients, director of nursing used pre-signed blank to prescribe a controlled substance to an individual who was not physician's patient. Compliance with the Board's Order entered 10/17/2013; terms and conditions terminated, license reflects full and unrestricted status.
Chellappan, Anandababu, MD 0101-035017 Richmond, VA	10/25/13	License revoked based on multiple patient cases of engaging in sexual contact concurrent with and by virtue of the practitioner-patient relationship, and/or otherwise engaging during the course of the practitioner-patient relationship in conduct of a sexual nature that a reasonable patient would consider lewd and offensive and failure to take appropriate responsive action when becoming aware of a patient's prescription monitoring program profile that said patient may have been engaging in drug seeking or doctor-shopping behavior with respect to narcotic medications.
Collins, David E., MD 0101-232542 Pikeville, KY	10/21/13	License reinstated.
Creef, Michael S., MD 0101-043479 Chesapeake, VA	09/26/13 <i>nunc pro tunc</i> 03/12/13	Reinstatement denied, continued on indefinite suspension, shall not petition for reinstatement until presents satisfactory written verification to Board of results of comprehensive clinical competency assessment.
Davis, Scott M., MD 0101-255326 Gainesville, VA	11/01/13	License granted, subject to terms and conditions, and prohibited from practicing pain management based on action by the State of Maine Board of Licensure and failure to disclose or materially misrepresented facts on licensure application.
Erskine, Alistair R., MD 0101-232383 Lewisburg, PA	08/19/13	License reinstated.
Flood, Jill T., MD 0101-039530 Virginia Beach, VA	08/05/13	Reprimand based on two patient cases of failure to properly monitor said patients during hysteroscopic surgeries.
French, Kathleen B., MD 0101-042074 Fairfax, VA	09/24/13	Compliance with the Board's Order entered 02/20/2013; terms and conditions terminated, license reflects full and unrestricted status.
Gehman, John E., MD 0101-016882 Richmond, VA	09/11/13	Reprimand, probation, license subject to terms and conditions, permanently restricted from prescribing, administering or dispensing Schedule II and III controlled substances based on prescribing narcotics in escalating doses without obtaining prior medical records

		from other treatment providers, failure to obtain adequate medical history prior to initiating narcotic therapy, failure to obtain patient's prior mental/psychiatric health history, failure to properly evaluate said patient for or attempt non-narcotic therapies; failure to consult or confer with or coordinate treatment with patient's other treating physicians, failure to order or perform any object tests to establish or confirm patient's conditions, failure to develop comprehensive treatment plan and/or review for efficacy of treatment, and failure to order any drug/urine screens.
Geneva, Edward F., MD 0101-037866 Haymarket, VA	10/09/13	Summary suspension based on the Board's finding that continued practice by this individual constitutes a substantial danger to the public health or safety, after receipt of information indicating that the practitioner may have violated certain laws and regulations relating to the practice of medicine and surgery in the Commonwealth.
Gresinger, Thomas, MD 0101-018451 Falls Church, VA	09/18/13	Compliance with the Board's Order entered 08/15/2013; terms and conditions terminated, license reflects full and unrestricted status.
Gumberts, Robert D., DO 0102-201989 Williamsville, NY	11/18/13 <i>nunc pro tunc</i> 10/29/13	Suspension of license stayed, Board in receipt of verification of entrance into HPMP contract as required by Board Order entered 01/30/2012; license reflects current active status, shall continue to comply with HPMP contract.
Jennings, Torino R., MD 0101-235681 Mechanicsville, VA	10/09/13	Compliance with the Board's Order entered 06/24/2011; probation and terms terminated, license reflects full and unrestricted status.
Kelly, Peter C., RCP 0117-004641 Arlington, VA	11/05/13	Continued on suspension, suspension shall be stayed and license reinstated upon verification of entrance in HPMP, shall fully comply with terms and conditions of HPMP contract.
Kump, Leila I., MD 0101-243155 Gaithersburg, MD	10/18/13	Mandatory suspension based on action taken by the Maryland State Board of Physicians.
Lee, John J., MD 0101-022064 Norfolk, VA	09/12/13	Reprimand based on one patient case of failure to inform or discuss with minor patient's parents the prescription of Ambien that was prescribed.
Lightner, Jeffrey K., MD 0101-039318 Fredericksburg, VA	11/01/13	Suspension of the privilege to renew based on multiple psychiatric patient cases of failure to screen for substance abuse, follow up and monitor progress and respond in timely and appropriate manner to changes in clinical presentation; routinely prescribed and/or authorized early refills of medications; failure to cancel prescriptions that were discontinued; prescribed Schedule II and IV controlled substances to patients who exhibited drug-seeking behavior; routinely failed to document dosage, quantity and instructions for taking medications; failure to maintain adequate progress or treatment records; and failure to obtain complete patient history prior to prescribing controlled substances.
Lin, Michael T., MD 0101-102494 Warrenton, VA	11/20/13	Compliance with the Board's Order entered 06/04/2013; terms and conditions terminated, license reflects full and unrestricted status.
Maung, Thein, MD 0101-238242	09/30/13	License revoked based on failure to comply with terms

Midlothian, VA		of Consent Order entered 08/27/2012 including failure to submit any evaluation or assessment of medical knowledge, competency and clinical skills as required and failure to provide information to Board or its representatives as requested or required.
Meinig, Martin L., MD 0101-233239 Klamath Falls, OR	10/18/13	Reprimand based on action taken by the Oregon Medical Board.
Mohanty, Nibedita, MD 0101-045978 Stafford, VA	09/25/13	Voluntary surrender for suspension for a period not less than thirty-six (36) months from entry of Consent Order based on multiple patient cases of prescribing controlled substances without adequate medical indication or diagnostic testing to support diagnoses; prescribing controlled substances to multiple patients notwithstanding awareness of drug seeking behavior and information that should have indicated patients were abusing medications and /or medications were being used for illegal purposes; prescribing controlled substances without performing a proper physical examination, evaluation, assessment and without documenting record of prescriptions prescribed; failure to order any drug urine/serum screens, conduct pill counts, or take other appropriate measures; prescribing controlled substances without obtaining complete patient histories; failure to request or obtain comprehensive treatment records from prior treating physicians; failure to develop a comprehensive treatment plan and/or reviewing and monitoring efficacy of treatment; and providing post dated prescriptions.
Murphy, Katrina G., MD 0101-237299 Lynchburg, VA	10/29/13	License indefinitely suspended, suspension stayed, license subject to terms and conditions based on being unable to practice medicine and surgery with reasonable skill and safety due to substance abuse.
Panos, Spyros N., MD 0101-250540 Hopewell Junction, NY	09/30/13	Mandatory suspension based on action taken by the New York Board for Professional Medical Conduct.
Piazza, Joseph F., MD 0101-236962 Fort Lauderdale, FL	11/01/13	Mandatory suspension based on action taken by the State of Florida Board of Medicine.
Pole, Shriharsh L., MD 0101-048251 Woodbridge, VA	09/13/13	Voluntary surrender for suspension for a period not less than twenty-four (24) months effective 10/12/2013 based on multiple patient cases of failure to properly prescribe benzodiazepines and/or opiates for chronic pain patients; failure to monitor patients' medication usage; prescribing controlled substances without adequate medical indication or diagnostic testing to support diagnoses; prescribing controlled substances to multiple patients notwithstanding awareness of drug seeking behavior; and represents a danger to the health and welfare of patients and public.
Rak, Ramin, MD 0101-240737 Commack, NY	10/04/13	Reprimand based on action taken by the New York Board for Professional Medical Conduct.
Ricciardi, Laura A., MD 0101-228406 Charlottesville, VA	09/09/13	Indefinite suspension based on being unable to safely practice medicine due to significant impairing physical and mental health conditions.
Rogers, Julia A., RCP 0117-004145 Portsmouth, VA	10/25/13	Voluntary surrender of the privilege to renew license based on being unable to practice as a respiratory therapist with reasonable skill and safety due to illness

		and substance abuse/dependence.
Scotti, Stephen D., MD 0101-248252 Edina, MN	09/17/13 09/26/13	Summary suspension based on the Board's finding that continued practice by this individual constitutes a substantial danger to the public health or safety, after receipt of information indicating that the practitioner may have violated certain laws and regulations relating to the practice of medicine and surgery in the Commonwealth. Voluntary surrender for indefinite suspension, shall not petition reinstatement for a period of eighteen (18) months from date of entry of Order based on being unfit and unable to practice with reasonable skill and safety to patients and the public due to mental illness and substance abuse and based on action taken by the North Carolina Board of Medicine.
Scranage, Clarence, Jr., MD 0101-038398 King George, VA	09/11/13 10/08/13	Reprimand, license subject to terms and conditions based on two patient cases of prescribing phentermine for weight loss without reviewing laboratory results; one patient case of prescribing phentermine for weight loss without performing an ECG; one patient case of dispensing hCG without possessing a license to dispense controlled substances; and several violations noted during an office inspection by an inspector for the Board of Pharmacy. Compliance with the Board's Order entered 09/11/2013; terms and conditions terminated, license reflects full and unrestricted status.
Sharpe, Caroline E., RCP 0117-005649 Prince George, VA	09/17/13 09/24/13	Summary suspension based on the Board's finding that continued practice by this individual constitutes a substantial danger to the public health or safety, after receipt of information indicating that the practitioner may have violated certain laws and regulations relating to the practice of medicine and surgery in the Commonwealth. Continued on indefinite suspension, shall not petition for reinstatement for a period of twenty-four (24) months from date of entry of Order based on diverting oxycodone on two occasions from medication cabinet of employer; unlawfully altered prescription and forged prescribing physician's signature with the intent of obtaining medication prior to authorized fill date; and unable to practice respiratory care with reasonable skill and safety due to substance abuse.
Stanga, William S., DC 0104-001843 Penhook, VA	09/18/13	Stay of suspension of license has been summarily rescinded due to non-compliance or dismissal from HPMP, license placed on continued suspension.
Stonerock, Grace, MD 0101-045665 Manassas, VA	09/26/13	Indefinite probation, license subject to terms and conditions, shall be prohibited from prescribing, administering or dispensing Schedule II-III controlled substances based on multiple patient cases of regularly prescribing narcotics in escalating doses without adequate medical indication or objective evidence for doing so, failure to develop or document comprehensive treatment plans and/or review efficacy of treatment, failure to recommend or prescribe non-narcotic treatment modalities, failure to enforce chronic opioid therapy contracts with patients when they repeatedly were violated, failure to take appropriate

	11/20/13	responsive action when screens or PMP reports were inconsistent, failure to adequately respond to drug-seeking behavior or signs patients were abusing or misusing prescriptions, repeatedly authorized prescriptions and/or refills prior to time such medications should have run out, failure to appropriately coordinate treatment of patients with other healthcare practitioners; one weight loss patient case of failure to review lab work before initiating pharmacotherapy for obesity, failure to prescribe and document a diet and exercise plan, and failure to follow up with patient within 30 days. Compliance with the Board's Order entered 09/26/2013; probation and terms terminated, restriction shall remain in effect.
Van Schaack, Leslie A., MD 0101-240524 Mountain View, VA	10/15/13	Violation no sanction based on action taken by the Medical Board of California.
Vorkpor, Sam G., MD 0101-243487 Bluff City, TN	09/13/13 09/19/13	Reprimand, shall submit written certification to Board that the laws and regulations governing the practice of medicine were reviewed and read based on one patient case of providing pre-signed prescription blanks in absence of physical examination or other appropriate medical evaluation. Compliance with the Board's Order entered 09/13/13; license reflects full and unrestricted status.
Vu, Duyanh T., MD 0101-223071 Centreville, VA	10/17/13	Reprimand based on one patient case of failure to correctly interpret a chest x-ray, specifically failing to see and note a right apical opacity in patient's chest film.
Wiggins, Marlene W., OT 0119-000731 Newport News, VA	09/03/13	Voluntary surrender of license based on being unable to practice with reasonable skill and safety due to impaired vision.
Wiles, Veronica L., OT 0119-000763 Mechanicsville, VA	11/01/13	Probation, license subject to terms and conditions based on falsely documenting home visits.

The following Radiologic Technologists (“Rad-tech”) or Radiologic Technologists-Limited (“Limited”), Respiratory Care Practitioners, Occupational Therapists or Athletic Trainers were issued a license and a reprimand, based upon practicing without a license for a period of time:

Bisnett-Cobb, Eli, AT 0126-001525	10/10/2013
Peters, Rebecca, RT 0120-007723	11/12/2013
Schoen, Leah M., AT 0126-001091	10/09/2013
Sherry, Nora C., RT 0120-007655	09/12/2013
Snyder, Baylie F., AT 0126-002092	10/09/2013

The following individuals were suspended due to submitting a check, money draft, or similar instrument for payment of a fee required by statute or regulation which is not honored by the bank or financial institution named thereon:

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