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## Regulations Governing Prescribing Opioids and Buprenorphine

The Board's Emergency Regulations Governing Prescribing Opioids and Buprenorphine became effective on March 15, 2017. In their wake, the Board received many comments from physicians, patients and advocates regarding various aspects of the regulations. Top on the list was the lack of an exemption for those in treatment for addiction with mono-product who had a documented intolerance to naloxone. To review the issues mentioned in all the comments, the Board reconvened the Regulatory Advisory Panel on May 15, 2017. There were several amendments recommended by the Panel that were sent to the Legislative Committee on May 19, 2017, and ultimately the full Board on June 22, 2017. The amended Emergency Regulations were swiftly handled by the Executive Branch, and after all required reviews, they were signed into effect by Governor McAuliffe on August 24, 2017. They do include an exemption for naloxone intolerance.

Here is the link to the current Regulations on Prescribing Opioids and Buprenorphine.

[https://www.dhp.virginia.gov/medicine/leg/EmergencyText\\_082417.docx](https://www.dhp.virginia.gov/medicine/leg/EmergencyText_082417.docx)

## Virginia Board of Medicine

### Frequently Asked Questions about the Prescribing of Buprenorphine for Addiction

#### 1. Can I continue to prescribe mono-product for my patients that have a demonstrated intolerance to naloxone –containing products?

The amended emergency regulations that became effective August 24, 2017 read as follows: For patients who have a demonstrated intolerance to naloxone; such prescriptions for the mono-product shall not exceed 3% of the total prescriptions for buprenorphine written by the prescriber, and the exception shall be clearly documented in the patient's medical record. So 3% of buprenorphine prescriptions can be for mono-product, and the rest must be for naloxone-containing products.

#### 2. What alternatives to buprenorphine mono-product are there that contain no or low-dose naloxone?

This is not an endorsement for a particular medication, and there may be other alternatives unknown to the Board at this time. The only other mono-product currently FDA-approved for the treatment of addiction are the Probuphine implant and Sublocade extended-release injection. Formulations with low-dose naloxone include Zubsolv sublingual tablets and Bunavail buccal film. Methadone and Vivitrol are also options.

**3. Is there a grace period for switching patients to a naloxone-containing product?**

It is lawful to prescribe up to 7 days of mono-product in the switching of a patient from methadone to a naloxone-containing product or for 7 days in switching a patient from the mono-product to a naloxone-containing product.

**4. Is there a grace period for tapering patients off the mono-product if they choose not to take a naloxone-containing product?**

There is no grace period in the regulations, other than what is stated above. The Board does expect that sound medical judgement and safety of the patient will be paramount in the tapering process.

**5. Are buprenorphine and naloxone safe for mothers and their breastfeeding infants?**

The American Society of Addiction Medicine National Practice Guideline adopted June 2015 stated, "It was shown that the amount of buprenorphine metabolites secreted in breastmilk are so low that they pose little risk to breastfeeding infants." In the May 11, 2016 issue of the ASAM Magazine, a question about breastfeeding was addressed by a Providers' Clinical Support System expert, "While buprenorphine levels transfer to breastmilk in very low levels, naloxone is even much less detectable, if at all." An August 2016 article from the Journal of Human Lactation confirmed that infant plasma levels were low or undetectable. A consultant to the Board, an OB-GYN who provides MAT, opines that naloxone-containing products prescribed to the mother can be considered safe for breastfeeding infants.

**6. Is the prescribing of tramadol subject to these regulations?**

YES, tramadol is an opioid and is therefore subject to these regulations.

**7. Can I use the mono-product for induction and then switch to the naloxone-containing product?**

The regulations do not speak to induction with the mono-product and then switching to a naloxone-containing product. The regulations state that 7 days of mono-product can be written in the switching from mono-product to a naloxone containing product.

**8. Can a pharmacist dispense a prescription of the mono-product for a non-pregnant individual after March 15, 2017?**

A pharmacist should dispense mono-product in keeping with the 3% rule for prescribers described in #1.

**9. Can my staff see the patient during the induction phase?**

The regulations require that the patient be seen “by the prescriber” at least once a week during induction.

**10. Does the Board have a list of “sedative hypnotics”?**

No.

**11. Can I continue to prescribe benzodiazepines with buprenorphine?**

The regulations allow for benzodiazepines in the lowest effective dose required for the treatment of co-morbid conditions. Extenuating circumstances must be documented in the medical record to support the prescriber’s rationale.

**12. Is there an exception for financial hardship that allows a patient to take Subutex instead of Suboxone?**

NO. There is no such exception in the regulations. However, the Medical Society of Virginia has developed the following list of resources for patients that may need help with the expenses of treatment with naloxone-containing products.  
[https://www.msv.org/sites/default/files/patient\\_assistance\\_resources.pdf](https://www.msv.org/sites/default/files/patient_assistance_resources.pdf)

## Virginia Board of Medicine

### Frequently Asked Questions about the Prescribing of Opioids for Pain

**1. Do I need to refer a patient being treated for chronic pain to a pain management specialist before exceeding 120 MME/day?**

The regulations require the prescriber to document the reasonable justification for the increase OR refer to or consult with a pain management specialist.

**2. If a patient being treated for chronic pain admits to occasional marijuana use or has a positive screen, what should I do?**

This issue is not addressed in the regulations. The Board of Medicine expects physicians to use good judgement in their care of patients and fully document what you do and why in the chart.

**3. If a patient I am treating for chronic pain is on a benzodiazepine from another provider, must I prescribe naloxone?**

YES. The regulations are meant to save lives. There would need to be coordination with the other practitioner so that you are on the same page. Controlled substances from more than one prescriber could lead to an inadvertent overdose. There is a provision for "extenuating circumstances" in the regulations, in case the benzo is absolutely essential to the patient's well-being.

**4. What if the benzodiazepine is only PRN?**

The Board of Medicine cannot recommend deviation from the regulations.

**5. What formulation of naloxone do I prescribe?**

The prescribing of naloxone required by these regulations is intended to rescue those who are in the midst of an overdose or anticipated to be in overdose. The regulations do not require a specific formulation. Here are the options in the Pharmacy guidance document. <http://www.dhp.virginia.gov/Pharmacy/guidelines/110-44.docx>

**6. Do I have to ensure that a patient fills the prescription for naloxone?**

NO, the prescriber's responsibility is to prescribe the naloxone, but the regulations do not require that the prescriber ensures that the patient gets it filled. However, a prescriber may wish to revisit the dose of opioid prescribed, if warranted.

**7. Can a pharmacist fill an opioid prescription exceeding 120 MME/day, or with concomitant benzodiazepine, if a patient does not present a naloxone prescription?**

The answer is YES, but it would be within your discretion to call the prescriber to ask if that is what he/she intended.

**8. Must naloxone be prescribed for lower doses of opioids in the presence of benzodiazepines?**

YES, the regulations state that is the case.

**9. Must I drug screen all patients that I will be putting on opioids for chronic pain?**

YES, that is what is required by the regulations.

**10. What is the Board's policy on PRN pain medications?**

The regulations require drug screens for patients on chronic opioid medications. The Board cannot recommend deviation from the regulations. The Board would make the determination about the standard of care in such a case, based upon the documentation of the treatment.

**11. Is it true that I can only prescribe 1 week of opioid for acute pain?**

Prescribing is limited to a 7-day supply unless "extenuating circumstances are clearly documented in the medical record."

**12. Can I write for more than 14 days for post-operative pain?**

Prescribing is limited to a 14-day supply unless "extenuating circumstances are clearly documented in the medical record."

**13. Is tramadol an opioid?**

YES. It is an opioid and a Schedule IV drug.

**14. Is tramadol subject to these regulations?**

YES.

**15. How can a pharmacist determine that a physician is prescribing for acute pain, post-op pain, or chronic pain?**

It has been suggested that prescribers put a notation on the prescription as to whether the drug is for acute pain, post-op pain, or chronic pain. The Board sees this as an excellent communication between professionals involved in the patient's care.

**16. Does the Board of Medicine have a list of "sedative hypnotics"?**

NO

**17. Must patients that have been stable on their current dose of opioid analgesic for a long time be drug tested?**

YES, the regulations require testing every 3 months during the first year of treatment and every 6 months thereafter.

**18. Can I use Subutex and Suboxone off-label for the treatment of pain?**

The amended emergency regulations that became effective August 24, 2017 allow Suboxone, or any naloxone-containing tablet, to be used to treat chronic pain. Subutex cannot be used for chronic pain. Buprenorphine products are not indicated for acute pain.

**19. Does the physician have to see pain patients every 3 months or can a nurse practitioner or a physician assistant see a patient, assess the opioid therapy, evaluate for opioid use disorder and document findings in the medical record?**

The regulations use the term "practitioner" and state these issues need to be addressed every 3 months. Nurse practitioners and physician assistants can perform acts of medicine through a practice agreement with a physician. As long as the NP and PA are trained and competent to accomplish the assessments required, and the physician maintains responsibility for patient care, it would appear that the requirements of the law would be met.

**20. If a patient is held in the ED or other part of the hospital for 24-48 hours, do the regulations apply?**

The regulations do not apply to pain treated during an inpatient hospital admission. Observation is an administrative status for a patient that is under clinical watch and care within the hospital, therefore the regulations would not apply. However, when the patient is discharged, the regulations would apply in regards to the 7-day limit of opioid or more if extenuating circumstances are documented.

## **U**nlicensed Practice

Practicing a profession without a license is prohibited by law. Just finishing training does not authorize an individual to fully practice the statutory scope of his/her profession. To engage in the full scope of practice, one needs a license. The Board sees confusion regarding unlicensed practice from graduates and employers alike. Not until an individual holds a Virginia license to practice the profession can he/she perform discretionary acts of the profession, not even under an employer's supervision. What may be confusing about this is that during training, under supervision of faculty, students can be allowed to perform discretionary acts as they became more and more knowledgeable and proficient in their skills. However, once they graduate, they are no longer students and become unlicensed individuals. Until a license is issued, graduates must remain in the role of an unlicensed individual, not engaging in discretionary acts. The Board believes that some of this confusion could be remedied by establishing a License Applicant exemption for all the Advisory Board professions. This exemption could be modeled after that of Occupational Therapy. A License Applicant exemption would allow practice by a

graduate of his/her training program for 6 months or until he/she receives a failing score on the credentialing examination, whichever comes first. Clearly, the goal is for the graduate to pass the examination in the 6-month period and be granted a full license. This License Applicant approach, which would require legislation, will be discussed with all the Advisory Boards in October. Until there is an amendment to the law, applicants and employers should be careful about the professional tasks they perform or delegate.

## **L**icensure by Endorsement

Several years ago, the Federation of State Medical Boards established an effort to create an Interstate Medical Licensure Compact that would reduce barriers to multi-state licensure and expedite the issuance of licenses. The Virginia Board of Medicine considered the impact of joining the Compact upon the Board, its licensees, and license applicants. Rather than join the Compact at this time, the Board chose to use an existing law to develop regulations for licensure by endorsement as a way to expedite licensure. The Board adopted proposed regulations that are under Executive Branch review, currently at the Secretary of Health and Human Resources' office.

## **30** Days to Release Medical Records

For many years, by law, a practitioner had 15 days to produce a properly requested medical record or provide a statutory reason why it was not produced. Legislation was passed by the 2017 General Assembly and signed into law by Governor McAuliffe that extends the time to produce a record to 30 days. Here is an excerpt from Section 32.1-127.1:03(E) of the Code of Virginia.

Within 30 days of receipt of a request for copies of or electronic access to health records, the health care entity shall do one of the following: (1) furnish such copies of or allow electronic access to the requested health records to any requester authorized to receive them in electronic format if so requested; (2) inform the requester if the information does not exist or cannot be found; (3) if the health care entity does not maintain a record of the information, so inform the requester and provide the name and address, if known, of the health care entity who maintains the record; or (4) deny the request (A) under subsection F, (B) on the grounds that the requester has not established his authority to receive such health records or proof of his identity, or (C) as otherwise provided by law. Procedures set forth in this section shall apply only to requests for health records not specifically governed by other provisions of state law.



## **C**hiropractic Students in Virginia

For years, students in chiropractic schools have rotated in electives with Virginia chiropractors in an observer status only. Now chiropractic students may practice during their rotations in Virginia under a licensed chiropractor who is appointed as faculty at a chiropractic school. Here is the law found in Section 54.1-2959(B) of the code of Virginia.

B. Students enrolled in chiropractic schools may (i) participate in preceptorship programs that are a part of the training program of the chiropractic school or (ii) practice in clinics, hospitals, educational institutions, private medical offices, or other health facilities, in a program approved by the school, under the direct tutorial supervision of a licensed chiropractor who holds an appointment on the faculty of a chiropractic school approved by the Board.

## **C**hiropractic Authority to Perform Commercial Driver's License Examinations

As of July 1, 2017, chiropractors that hold a medical examiner certificate from the Federal Motor Carrier Safety Administration (FMCSA) and is registered with the National Registry of Certified Medical Examiners may perform Commercial Driver's License examinations. For comprehensive information on FMCSA Medical Examiner Certification, go to: [https://nationalregistry.fmcsa.dot.gov/NRPublicUI/documents/Complete\\_Guide\\_to\\_ME\\_Certification.pdf](https://nationalregistry.fmcsa.dot.gov/NRPublicUI/documents/Complete_Guide_to_ME_Certification.pdf)

## **D**efinition of Telemedicine

As a reminder to those who practice telemedicine in Virginia and into Virginia, here is the definition in the law and in the Board's Guidance Document. The definition is found in Section 38.2-3418.16(B) of the Code of Virginia, which is referenced in Section 54.1-3303(A).

B. As used in this section, "telemedicine services," as it pertains to the delivery of health care services, means the use of electronic technology or media, including interactive audio or video, for the purpose of diagnosing or treating a patient or consulting with other health care providers regarding a patient's diagnosis or treatment. "Telemedicine services" does not include an audio-only telephone, electronic mail message, facsimile transmission, or online questionnaire.

And here is the link to the Board's Guidance Document on Telemedicine.

<https://www.dhp.virginia.gov/medicine/guidelines/85-12.docx>

## **G**race Period for Genetic Counselors and More

Regulations for the licensure and regulation of Genetic Counselors became effective June 14, 2017 authorizing the Board to issue licenses. It has been customary that the Board authorizes a 1-year grace period for new professions during which applicants will not be charged with unlicensed practice. The Board did so for Genetic Counselors at its June 22, 2017 meeting.

Also, law became effective July 1, 2017 granting an extension until December 31, 2018 for those individuals who have at least 20 years of documented work experience practicing genetic counseling and meet other certain requirements to receive a waiver from the Board of Medicine of the requirements for a master's degree and American Board of Genetic Counseling or American Board of Medical Genetics certification for licensure.

And to ensure that those genetic counselors that graduated from programs prior to the establishment of the Accreditation Council of Genetic Counseling (ACGC), the Board of Medicine voted to initiate legislation to authorize the Board to accept programs accredited by predecessor organizations of ACGC.

## **O**ccupational Therapy Continuing Education Defined in the Law and Regulations

Here is the law that was passed in the 2017 Session of the General Assembly. These provisions have been incorporated into regulation by an exempt action, which is used to conform a regulation to the law.

- 1. That the Board of Medicine shall amend regulations governing licensure of occupational therapists to provide that Type 1 continuing learning activities that shall be completed by the practitioner prior to renewal of a license shall consist of an organized program of study, classroom experience, or similar educational experience that is related to a licensee's current or anticipated roles and responsibilities in occupational therapy and approved or provided by one of the following organizations or any of its components: the Virginia Occupational Therapy Association; the American Occupational Therapy Association; the National Board for Certification in Occupational Therapy; a local, state, or federal government agency; a regionally accredited college or university; or a health care organization accredited by a national accrediting organization granted authority by the Centers for Medicare and Medicaid Services to assure compliance with Medicare conditions of participation. Such regulations shall also provide that Type 1 continuing learning activities may also include an American Medical Association Category 1 Continuing Medical Education program.*

- 2. That the Board of Medicine shall not deem maintenance of any certification provided by the Virginia Occupational Therapy Association; the American Occupational Therapy Association; the National Board for Certification in Occupational Therapy; a local, state, or federal government agency; a regionally accredited college or university; or a health care organization accredited by a national accrediting organization granted authority by the Centers for Medicare and Medicaid Services to assure compliance with Medicare conditions of participation as sufficient to fulfill continuing learning requirements for occupational therapists.*

## **Reminder from the Advisory Board on Athletic Training**

At its June 8, 2017 meeting, the Advisory Board discussed athletic trainers working at Virginia events. It was noted that an exemption to licensure exists for out-of-state athletic trainers in good standing with the regulatory board in their home state. The out-of-state athletic trainer may accompany a team or a specific athlete for the duration of the athletic tournament, game or event in which the team or athlete is competing. If an out-of-state athletic trainer is hired by the sponsor as staff at such an event, this exemption to licensure would not apply.

## **Physician Assistant Invasive Procedure Forms**

Last year, the regulations were amended to no longer require that practice agreements be submitted to the Board for approval, but rather be fully documented and kept by the parties to the agreement. However, invasive procedure forms did not get included in the amendment last year. As of July 1, 2017, invasive procedure forms no longer need to be submitted to the Board for approval. Similar to practice agreements, invasive procedure forms are to be fully documented and kept by the parties. Both the practice agreement and invasive procedure forms are to be made available to the Board upon request.

## **New Midwifery Guidance Document**

Within the last year, the Advisory Board on Midwifery discussed the issue that some midwives were being asked by labs to provide evidence that they had the authority to order tests and studies. The Board's response to this issue was to create a guidance document that could be shared with entities that needed affirmation that ordering tests was within midwifery's scope. The document was approved by the Board on June 22, 2017. Here is the link to Guidance Document 85-28 Authority of Licensed Midwives to Order Tests. <https://www.dhp.virginia.gov/medicine/guidelines/85-28.docx>

## **P**olysomnographic Technologist Legislative Proposal

At its June 9, 2017 meeting, the Advisory Board on Polysomnographic Technology discussed an issue that affected graduates of programs significantly. The examination required for licensure is administered by the Board of Registered Polysomnographic Technologists. A candidate may have passed the examination, but it may take 6-8 weeks for the score to be reported. Individuals that graduate must forego practice until the score is reported. This can have a significant vocational impact. It was suggested that a License Applicant exemption be established in the law to allow a graduate to practice for up to 6 months or until he/she receives a failing grade, whichever comes earlier. Such an exemption currently exists for occupational therapists. Also, it was discussed that a student exemption, as currently exists for respiratory care, be requested for polysomnographic technology. At its June 22, 2017 meeting, the full Board approved a legislative proposal to create both exemptions.

## **N**urse Practitioner Regulations on Prescribing Opioids and Buprenorphine

At its June 22, 2017 meeting, the Board of Medicine approved the emergency regulations for nurse practitioners with amendments. The regulations mirror those of the Board of Medicine. They were reviewed and approved by the Board of Nursing on July 18, 2017. Governor McAuliffe signed them into effect on August 24, 2017.

[https://www.dhp.virginia.gov/nursing/leg/EmergencyText\\_Opioid\\_082417.docx](https://www.dhp.virginia.gov/nursing/leg/EmergencyText_Opioid_082417.docx)

## **P**rocess to Promulgate Regulations on Laser Hair Removal Begins

At its June 22, 2017 meeting, the Board of Medicine approved a Notice of Intended Regulatory Action to implement House Bill 2119 that addresses the practice of laser hair removal. Section 54.1-2973.1 of the Code of Virginia reads as follows:

*The practice of laser hair removal shall be performed by a properly trained person licensed to practice medicine or osteopathic medicine or a physician assistant as authorized pursuant to § [54.1-2952](#) or a nurse practitioner as authorized pursuant to § [54.1-2957](#) or by a properly trained person under the direction and supervision of a licensed doctor of medicine or osteopathic medicine or a physician assistant as authorized pursuant to § [54.1-2952](#) or a nurse practitioner as authorized pursuant to § [54.1-2957](#) who may delegate such practice in accordance with subdivision A 6 of § [54.1-2901](#).*

In the development of its regulations, the Board will need to define “properly trained person” and “direction and supervision.” You can follow this regulatory process on Regulatory Town Hall, click on Regulatory Activity and select Board of Medicine. Public comment will be accepted during the designated period for comment.

For all that are interested in the regulations that will be developed to clarify and implement Supervision and Direction for Laser Hair Removal, the public comment period will begin October 2, 2017 and end on November 1, 2017. You can make public comment at <http://townhall.virginia.gov/um/toc.cfm>

## **R**eduction in Renewal Fees for the Next Biennium

Last biennium, due to a projected surplus in funds, the Board of Medicine reduced its renewal fees by approximately 14% for all professions. This biennium it reduced renewal fees again by 20%. Given the projections for revenue and expenditures, the Board will reduce renewal fees for the next biennium as well. The amount of the reduction has not yet been determined.

## **H**ealthcare Workforce Data Center (HWDC) 2016 Physician Survey

The HWDC, led by Elizabeth Carter, PhD, does excellent work in collecting and analyzing data from the healthcare professions licensed by the Virginia Department of Health Professions. The 2016 Physician Workforce report is now available and is very much worth your time to review. It can be found at:

<https://www.dhp.virginia.gov/hwdc/docs/Medicine/0101Physician2016.pdf>

## **S**elf-Care Month

The General Assembly (GA) wishes all interested parties to be aware of its stance on self-care to create a healthy lifestyle and reduce spending on healthcare. The GA has designated February of each year as Self-Care Month in Virginia. Here is the link to House Joint Resolution 780:

<http://lis.virginia.gov/cgi-bin/legp604.exe?171+ful+HJ780ER>

## **F**ree Online Opioid CME

For your convenience, here is the information that was in the May 2017 Board Briefs.

<http://www.dhp.virginia.gov/medicine/docs/OpioidCMECourses.pdf>

## **H**azardous Drugs FAQ's

For those of you who handle hazardous drugs in your practice/office, here is the link to the Frequently Asked Questions regarding USP chapter 800 for your review.

<http://www.usp.org/frequently-asked-questions/hazardous-drugs-handling-healthcare-settings>

# Want to be a Medical Examiner?

## JOIN the Virginia Office of the Chief Medical Examiner Become a LOCAL MEDICAL EXAMINER

As a licensed Virginia Physician, Physician Assistant or Nurse Practitioner, you have the opportunity to enter the real world of medicolegal death investigation by performing a valuable community service and assisting law enforcement within your locality while receiving monetary compensation.

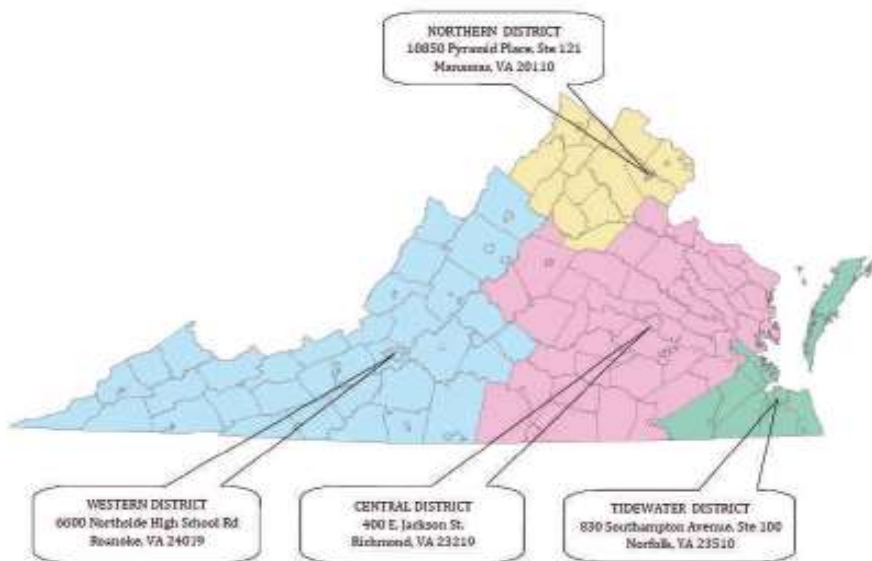
Serving the citizens of Virginia as a Local Medical Examiner (LME) is not only rewarding but extremely interesting as it allows you to enter the intriguing and restricted world of medicolegal death investigation and maintaining your full-time profession.

As a Virginia LME, you will work within a nationally recognized, statewide medicolegal death investigation system with a team of forensic pathologists and medicolegal death investigators who are always available to assist you.

### LOCAL MEDICAL EXAMINER PROGRAM AT A GLANCE

- As an agent of the Commonwealth of Virginia, you will be compensated \$150 for each external examination you perform under the jurisdiction of the Office of the Chief Medical Examiner. You may earn an additional \$50 for every non-hospital death scene visit as well.
- Performing your LME duties will not require any additional malpractice coverage.
- You will be eligible to attend biannual LME training which typically awards 8 hours of LME credits at each program.
- Your LME duties provide a critical community service by ensuring those who die a violent or unnatural death have their cases properly investigated and their deaths appropriately certified.
- You will expand your professional acquaintances through your partnerships with local law enforcement and Commonwealth's Attorneys.

### VIRGINIA OFFICE OF THE CHIEF MEDICAL EXAMINER BY DISTRICT



### INTERESTED IN BECOMING A LOCAL MEDICAL EXAMINER? DO YOU HAVE QUESTIONS?

**Contact:**  
Keshia Strouse  
State Project Manager & LME Coordinator  
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## BOARD DECISIONS

The following list contains decisions from March 2017 to July 2017. You may access these decisions at [www.dhp.virginia.gov](http://www.dhp.virginia.gov) (select “License Lookup”) or at [www.vahealthprovider.com](http://www.vahealthprovider.com) for most MDs, DOs and DPMs. You may also contact the Board Office at (804) 367-4505 to request a copy.

NAME AND LICENSE NO.	DATE OF ACTION	March 2017 THRU July 2017 ACTIONS
Ally, Ryan I., M.D. 0101-255366 Burke, VA	3/15/17	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 regulation relating to the practice of medicine and surgery in the Commonwealth.
Payling-Wright, Charles R., M.D. 0101-036016 Herndon, VA	3/15/17	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 regulation relating to the practice of medicine and surgery in the Commonwealth.
Bailor, Fred R., Jr., D.O. 0102-024807 Easton, MD	3/20/17  3/20/17	Mandatory suspension based on action by the Pennsylvania Board of Osteopathic Medicine.  Reinstated to full and unrestricted status.
Blume, James H., D.O. 0102-203216 Forest Hill, WV	3/23/17	Mandatory suspension based on action by the West Virginia Osteopathic Medical Board.
Bright, George M., M.D. 0101-019411 Midlothian, VA	3/31/17	Compliance with the Board’s Order entered 4/8/16; terms terminated and license restored to full and unrestricted status.
Cemerlic, Senad, M.D. 0101-249012 Dover, DE	3/15/17	Mandatory suspension based on a felony conviction in the Superior Court of Kent County, DE, to wit: One (1) count of healthcare fraud.
Compton, Kyle D., M.D. 0101-251589 Midlothian, VA	3/28/17	Mandatory suspension based on a felony conviction in the Circuit Court of Chesterfield County, Virginia, to wit: conspiracy to violate the Drug Control Act.



Conklin, Jeffery B., M.D. 0101-248660 Fairfax, VA	3/3/17	Reprimand; indefinite probation with terms and conditions based on multiple patient cases of inappropriate prescribing.
Conner, Byron F., M.D. 0101-233088 Richland Hills, TX	3/24/17	Mandatory suspension based on action by the Texas Medical Board.
Hayek, Craig S., M.D. 0101-056480 Chesapeake, VA	3/1/17	Suspended; suspension stayed based on HPMP entry and continued compliance.
Nichols, Allen B., M.D. 0101-036628 Newport News, VA	3/2/17  3/2/17	Mandatory suspension based on action by the New York Board for Professional Medical Conduct.  Reinstated to full and unrestricted status.
Phelan-Adams, Anne L., M.D. 0101-038008 Blacksburg, VA	3/24/17	Mandatory suspension based on action by the Ohio State Medical Board.
Stanley, Vernon R., M.D. 0101-025649 Fayetteville, WV	3/16/17	Reprimand; prohibited from chronic pain treatment/management based on aiding and abetting the unlicensed practice of medicine; and multiple patient cases of inappropriate prescribing.
Stern, Bernard H., M.D. 0101-242476 Hollywood, FL	3/21/17	Reprimand; prohibited from treating female patients based on action by the Florida Department of Health.
Thomas, Justin G., D.O. 0102-202107 Cape Coral, FL	3/1/17	Prior to practicing in Virginia, must provide 30 days written notice to the Board of his intention to resume practice in Virginia.
Wander, Jagdeep S., M.D. 0101-253074 Salem, VA	3/24/17	Compliance with the Board's Order entered 01/06/17; license reflects current active status, shall continue to comply with HPMP contract.
Mengesha, Simret T., R.T. 0122-002410 Henrico, VA	3/13/17	Compliance with the Board's Order entered 1/3/17; license reflects current active status, shall continue to comply with HPMP contract.
Akoda, Charles J., M.D. 0101-250081 Bowie, MD	4/25/17	Mandatory suspension based on a felony conviction in the US District Court, District of MD, to wit: One (1) Count of Social Security Account Number Fraud.
Campbell, Debra L., P.A. 0110-003998 Forest, VA	3/29/17	Reprimand; license subject to terms and conditions based on aiding and abetting the unlicensed practice of medicine and multiple patient cases of inappropriate prescribing.

Drummond, Charles S., III, M.D. 0101-053510 Tullahoma, TN	4/24/17	Reprimand; license subject to terms and conditions based on action by the Tennessee Board of medical Examiners.
Hawkins, Hillary S., M.D. 0101-046529 Mechanicsville, VA	3/29/17	Reprimand; license subject to terms and conditions based on multiple patient cases of inappropriate prescribing.
Hollis, Joseph B., M.D. 0101-028352 Portsmouth, VA	4/5/17	Permanently restricted from performing invasive procedures based on a failed colonoscopy.
Nairn, Todd H., M.D. 0101-056013 Abingdon, VA	3/29/17	Reprimand; license subject to terms and conditions based on failure to maintain timely, accurate and complete medical records and multiple patient cases of inappropriate prescribing.
Palumbo, Patrick W., M.D. 0101-044923 Vienna, VA	4/24/17	Reprimand based on purchase of non-FDA approved medication; and failure to stock medications in a safe and sanitary manner.
Pijanowski, Jan A., M.D. 0101-223435 Galax, VA	4/5/17  4/5/17	Mandatory suspension based on action by the New York Board for Professional Medical Conduct.  Reinstated to full and unrestricted status.
Powers, Pius J.A., M.D. 0101-053742 Kingsport, TN	4/24/17	License subject to terms and conditions based on action by the NY State Medical Board.
Sinclair, Mary B., M.D. 0101-238218 Lexington, VA	3/17/17	License subject to terms and conditions based on inability to practice safely due to illness and/or substance abuse.
Hedrick Jerry A., D.C. 0104-555725 Virginia Beach, VA	4/24/17	License revoked based on sexual contact or conduct with multiple patients.
Ward, Misty D., LM 0129-000054 Harrisonburg, VA	4/24/17	Compliance with the Board's Order entered 10/26/16; terms terminated and license restored to full and unrestricted status.
Allen, Valerie, A.T. 0126-002759 Richmond, VA	4/20/17	License issued with a reprimand and monetary penalty of \$250 based on practicing without a license.
Feola, John P., M.D. 0101-050870 Falls Church, VA	5/23/17	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 regulation

		relating to the practice of medicine and surgery in the Commonwealth.
White, Kimberly N., Rad. Tech 0120-001684 Winchester, VA	5/23/17	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 regulation relating to the practice of medicine and surgery in the Commonwealth.
Abrenio, Jose K., M.D. 0101-037259 Richmond, VA	5/17/17	Voluntary permanent surrender of license based on retirement.
Ally, Ryan I., M.D. 0101-255366 Burke, VA	5/17/17	Continued on suspension based on inability to practice with reasonable skill and safety due to illness.
Lacy, Patricia E., P.A. 0110-005367 Chester, VA	5/2/17  5/25/17	Required to enter HPMP based on inability to practice with reasonable skill and safety due to illness. Compliance with the Board's Order entered 5/2/17; license reflects current active status, shall continue to comply with HPMP contract.
Merchia, Pankaj, M.D. 0101-244136 Boca Raton, FL	5/26/1	Reprimand; license subject to terms and conditions based on failure to provide patient records.
Nairn, Todd H., M.D. 0101-056013 Abingdon, VA	5/11/17	Compliance with the Board's Order entered 3/29/17; terms terminated and license restored to full and unrestricted status.
Pitman, John M., III, M.D. 0101-052484 Williamsburg, VA	5/2/17	Reprimand; \$1,500 monetary penalty; license subject to terms and conditions based on aiding and abetting the unlicensed practice of medicine; failure to ensure appropriate post-operative care; and multiple cases of failure to maintain timely patient records.
Warth, Gregory J., M.D. 0101-027564 Virginia Beach, VA	5/10/17	Reprimand based on multiple patient cases of inappropriate prescribing.
Young, Ericka S., D.O. 0102-201811 Chester, VA	4/7/17	License reinstated subject to terms and conditions.
Yount, Anthony R., D.O. 0102-204177 Johnson City, TN	5/3/17	Compliance with the Board's Order entered 10/19/16.
Jensen, Brian D., D.C. 0104-556776 Bent Mountain, VA 24059	5/11/17	Reprimand; \$1000 monetary penalty based on practicing chiropractic without holding a valid license.

Ally, Ryan I., M.D. 0101-255366 Burke, VA	6/1/17	Compliance with the Board's Order entered 5/17/17; Suspension stayed, comply with HPMP.
Cates, Robert J., M.D. 0101-026295 Fairfax Station, VA	6/15/17	Compliance with the Board's Order entered 01/04/17; terms terminated and license restored to full and unrestricted status.
Delashaw, Johnny B., Jr., M.D. 0101-038611 Issaquah, WA	6/12/17	Mandatory suspension based on action by Washington State Medical Quality Assurance Commission.
Encarnacion, Maria D., M.D. 0101-043241 Willis, VA	5/15/17	Order of 2/9/15 modified; prescribing restriction lifted; license restored to full and unrestricted status.
Gibbs, John E., M.D. 0101-243092 North Chesterfield, VA	6/1/17	Mandatory suspension based on a felony conviction in the Circuit Court of Chesterfield County, Virginia, to wit: Child Neglect.
Glauser, Frederick L., M.D. 0101-028854 Richmond, VA	6/12/17	Reprimand based on one patient case of inappropriate standard of care.
Khan, Mansoor A., M.D. 0101-228937 Hopewell, VA	5/8/17	Reinstatement denied.
Martinez, Carlos J., M.D. 0101-245937 Burke, VA	6/5/17	Compliance with the Board's Order entered 05/31/12; license restored to full and unrestricted status.
McCormick, Robert S., M.D. 0101-223719 Harrisonburg, VA	6/5/17	Voluntary surrender for indefinite suspension of license based on patient abandonment and multiple patient cases of failing to provide requested medical records.
Morgan, Courtney R., M.D. 0101-255072 Victoria, TX	6/1/17	Mandatory suspension based on action by the TX Medical Board.
Payling-Wright, Charles R., M.D. 0101-036016 McLean, VA	6/23/17	Indefinite suspension based on multiple patient cases of inappropriate prescribing and pain management.
Rampona, Douglas M., M.D. 0101-020148 Virginia Beach, VA	6/12/17	Voluntary permanent surrender of license.
Rao, Nagbhushan S., M.D. 0101-032775 Columbia, MD	6/6/17  6/21/17	Mandatory suspension based on action by the NY State Board for Professional Medical Conduct.  Reinstated.
Seepe, Carolyn S., M.D. 0101-056595 Danville, VA	6/22/17	Compliance with the Board's Order entered 12/9/16; terms terminated and license restored to full and unrestricted status.

Veluri, Ravi K., M.D. 0101-045674 Annandale, VA	5/4/17	Reinstatement denied.
Yakes, Wayne F., M.D. 0101-046905 Englewood, CO	6/7/17	License subject to terms and conditions based on action by the Colorado Medical Board.
Zarins, Silvestris U., D.O. 0102-037161 Port Saint Lucie, FL	6/12/17	Mandatory suspension based on action by the Michigan Board of Osteopathic Medicine and Surgery.
White, Kimberly N., LRT 0120-001684 Yorktown, VA	6/16/17	Indefinite suspension based on inability to practice with reasonable skill and safety due to illness and /or substance abuse.
Reynolds, Meghan Odom, O.T. 0119-006565 Richmond, VA	6/21/17	Reprimand based on falsifying patient records.
Trepiccione, Audrey A., L.M. 0129-000016 Garner, NC	5/4/17	Reinstated with terms and conditions; prohibited from accepting multiple gestation patients or a patient presenting with non-vertex position fetus.
DuPont, Claudine N., D.P.M. 0103-300971 Fredericksburg, VA	8/2/17	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 regulation relating to the practice of medicine and surgery in the Commonwealth.
Brownstein, Richard, M.D. 0101-255319 Columbus, MS	7/6/17	Violation; no sanction imposed based on compliance with the Mississippi State Board of Medical Licensure.
Derdeyn, Amalie S., M.D. 0101-241359 Charlottesville, VA	7/26/17	Reprimand and to remain in HPMP based on inability to practice with reasonable skill and safety due to illness and/or substance abuse; inappropriate prescribing; and failure to keep timely and accurate medical records.
Garada, Hazem, M.D. 0101-053186 Fairfax Station, VA	7/21/17	Reinstatement denied.
Gerlach, David C., M.D. 0101-260820 Raleigh, NC	7/10/17	Mandatory suspension based on action by the North Carolina Medical Board.
Hartwell, Melissa L., P.A. 0110-002632 Marion, VA	7/20/17	Mandatory suspension based on 42 felony convictions in the US District Court of the Western District of Virginia.
Jenkins, David R., M.D. 0101-046371 Chesapeake, VA	7/6/17	Compliance with the Board's Order entered 03/18/2011; license restored to full and unrestricted status.
Orlino, Robert J., M.D. 0101-037181 Newport News, VA	7/17/17	Reprimand based on inappropriate prescribing.
Raja, Jogesh C., M.D. 0101-058402 Salem, VA	7/6/17	Voluntary permanent surrender of license based on inability to practice with reasonable skill and safety due to illness.

Taintor, Nicholas B., M.D. 0101-255825 Washington, DC	7/31/17	Suspended; suspension stayed upon entry into HPMP and compliance based on inability to practice with reasonable skill and safety due to illness and/or substance abuse.
Jensen, Brian D., D.C. 0104-556776 Bent Mountain, VA	7/13/17	Compliance with the Board’s Order entered 5/11/17; License restored to full and unrestricted status.
Mirza, Rehman T., D.C. 0104-555921 Woodbridge, VA	7/17/17	License reinstatement granted, license placed on indefinite probation with terms and conditions.
Srebalus, Joseph A., Rad Tech 0120-006439 Herndon, VA	7/7/17	Compliance with the Board’s Order entered 7/22/15; terms terminated and license restored to full and unrestricted status.

**Limited (“Limited”), Respiratory Care Practitioners, Occupational Therapists, Athletic Trainers, Behavioral Analyst or Polysomnographic Technologists were issued a license and a reprimand, or violation with no sanction, based upon practicing without a license for a period of time:**

Cabral, Robert, Poly Tech	4/24/17
Carlson, Christy B., A.T.	4/20/17
Feldman, Warren, A.T.	4/3/17
Rutherford, Chasity S., Rad. Tech.	5/4/17
Escoto, Alfred, Poly Tech	5/18/17
Hughes, Brett Eugene, Poly Tech	5/18/17
Swall, Christopher B., Poly Tech	6/9/17
Quigley, Rebecca J., Rad. Tech.	7/12/17
Dudley, Morgan C., A.T.	7/21/17
Fonteyne, Adam, Poly Tech	7/6/17

**Virginia Board of Medicine  
Board Members 2016-2017**

<b>Syed Salman Ali, MD</b> 2nd Term Expires June 2020 District: 11 – Vienna	<b>Jane Hickey, JD</b> 1st Term Expires June 2019 Citizen Member – Richmond
<b>Barbara Allison-Bryan, MD, President</b> 2nd Term Expires June 2020 District: 1 - North	<b>Isaac Koziol, MD</b> 1st Term Expires June 2020 District: 7 - Manakin Sabot
<b>David Archer, MD</b> 1st Term Expires June 2020 District: 2 - Norfolk	<b>Maxine M. Lee, MD</b> 1st Term Expires June 2018 District: 6 - Roanoke
<b>J. Randolph Clements, DPM</b> 2nd Term Expires June 2018 Podiatrist - Roanoke	<b>Kevin O’Connor, MD, Vice-President</b> 2nd Term Expires June 2020 District: 10 – Leesburg
<b>Lori D. Conklin, MD</b> 2nd Term Expires June 2021 District: 5 – Charlottesville	<b>Wayne Reynolds, DO</b> 2nd Term Expires June 2016 Osteopath - Gloucester Point
<b>Deborah DeMoss Fonseca</b> 1st Term Expires June 2017 Citizen Member - Springfield	<b>David Taminger, MD</b> 1st Term Expires June 2019 District: 4 - Midlothian
<b>Alvin Edwards, PhD</b> 1st Term Expires June 2019 Citizen Member - Charlottesville	<b>Svinder Toor, MD</b> 1st Term Expires June 2019 District: 3 – Norfolk
<b>David C. Giammittorio, MD</b> 2nd Term Expires June 2020 District: 8 - Lorton	<b>Nathaniel Ray Tuck, Jr., DC, Secretary-Treasurer</b> 2nd Term Expires June 2021 Chiropractor - Blacksburg
<b>The Honorable Jasmine Gore</b> Unexpired Term Expires June 2017 Citizen Member – Hopewell	<b>Kenneth J. Walker, MD</b> 2nd Term Expires June 2020 District 9 - Pearisburg

**Applying for a Position** - The majority of board/commission seats come due on June 30 each year. While applications are taken year round, we strongly recommend having your application submitted online by March 15 to be fully considered for the upcoming round of appointments. <https://commonwealth.virginia.gov/va-government/gubernatorial-appointments>

**Advisory Boards**

Acupuncture	Athletic Trainers	Behavior Analysis	Genetic Counseling
<b>Lynn Almloff, L.Ac.,</b> Chair	<b>Deborah B. Corbatto,</b> AT	<b>Keri S. Bethune, BA,</b> Chair	<b>Heather A. Creswick,</b> CGC, VC
<b>Janet L. Borges, L.Ac.,</b> VC	<b>Michael J. Puglia, AT,</b> Chair	<b>Amanda A. Kusterer,</b> ABA	<b>Marilyn Jerome Foust, MD</b>
<b>Sharon Crowell, L.Ac.</b> <b>Leslie Rubio - Citizen</b>	<b>Jeffrey B. Roberts, MD</b> <b>Sara L. Whiteside, AT,</b> VC	<b>Kate Lewis, BA, VC</b> <b>Asha Patton Smith, MD</b>	<b>John M. Quillin, PhD,</b> MPH, MS
<b>Chheany W. Ung, MD</b>	<b>Trilizsa Trent - Citizen</b>	<b>Gary M. Fletcher -</b> Citizen	<b>Lori Swain - Citizen</b> <b>Matthew J. Thomas,</b> ScM, CGC, Chair
Midwifery	Occupational Therapy	Physician Assistants	Polysomnographic Technology
<b>Maya Hawthorn, CPM</b> <b>Natasha Jones -</b> Citizen	<b>Breshae Bedward, OT,</b> VC	<b>Rachel Carlson, PA-C</b> <b>Thomas Parish, PA-C,</b> Chair	<b>Debbie Akers, RPSGT,</b> VC
<b>Ami Keatts, MD</b> <b>Kim Pekin, CPM, Chair</b>	<b>Karen Lebo - Citizen</b> <b>Eugenio Monasterio,</b> MD	<b>James Potter, MD</b> <b>Portia Tomlinson, PA-</b> C, VC	<b>Johnathan Clark,</b> RPSGT, Chair
<b>Mayanne Zielinski,</b> CPM, VC	<b>Kathryn Skibek, OT,</b> Chair <b>Dwayne Pitre, OT</b>	<b>VACANT -Citizen</b>	<b>Marie Quinn - Citizen</b> <b>Anna Rodriguez,</b> RPSGT <b>Robert Vorona, MD</b>
Radiological Technologist	Respiratory Therapists	Interested in serving on an advisory board?	
<b>Jan Gillespie Clark, RT</b> <b>Joyce O. Hawkins, RT,</b> Chair	<b>Sherry Compton, RRT</b> <b>Hollee Freeman, PhD-</b> citizen	<p><b>Applying for a Position -</b> <i>The majority of board/commission seats come due on June 30 each year. While applications are taken year round, we strongly recommend having your application submitted online by March 15 to be fully considered for the upcoming round of appointments.</i></p> <p><a href="https://commonwealth.virginia.gov/va-government/gubernatorial-appointments">https://commonwealth.virginia.gov/va-government/gubernatorial-appointments</a></p>	
<b>Patti S. Hershey, RT</b> <b>Margaret E. Toxopeus,</b> MD	<b>Lois Rowland, RRT, VC</b> <b>Daniel Rowley, RRT,</b> Chair		
<b>VACANT - citizen</b>	<b>Bruce K. Rubin, MD</b>		



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OCTOBER 2017						
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## Upcoming Meetings

- **October 2-6 - Advisory Boards**
- **October 9<sup>th</sup> – Office closed for Columbus Day**
- **October 26<sup>th</sup> – Full Board**
- **November 10<sup>th</sup> - Office closed for Veterans Day**
- **November 22<sup>nd</sup> – Office closes at Noon for Thanksgiving**
- **November 23-24 - Office closed for Thanksgiving**
- **December 1<sup>st</sup> – Executive**
- **December 22<sup>nd</sup> - Office closed for Holiday**
- **December 25-26<sup>th</sup> – Office closed for Holiday**

DECEMBER 2017						
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