



# Arizona Medical Board

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## FINAL MINUTES FOR TELECONFERENCE MEETING Held on Tuesday, April 7, 2020

**At: 1740 W. Adams St., Board Room A • Phoenix, Arizona**

### **Board Members**

R. Screven Farmer, M.D., Chair  
James M. Gillard, M.D., M.S., F.A.C.E.P., F.A.A.E.M., Vice-Chair  
Edward G. Paul, M.D., Secretary  
Jodi A. Bain, M.A., J.D., LL.M.  
Bruce A. Bethancourt, M.D., F.A.C.P.  
David C. Beyer, M.D., F.A.C.R., F.A.S.T.R.O.  
Laura Dorrell, M.S.N., R.N.  
Gary R. Figge, M.D.  
Pamela E. Jones  
Lois E. Krahn, M.D.

## **GENERAL BUSINESS**

### **A. CALL TO ORDER**

Chairman Farmer called the Board's meeting to order at 8:12 a.m. and thanked all members of the Board and staff for their efforts in facilitating these proceedings. Chairman Farmer acknowledged the Board's staff for their incredible work in maintaining efficient and effective functions of the Board during the current state of emergency.

### **B. ROLL CALL**

The following Board members participated telephonically: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.

### **ALSO PRESENT**

The following Board staff were present: Kristina Fredericksen, Deputy Director; Michelle Robles, Board Operations Manager; and, Sean Charles, Information Technology. The following Board staff participated telephonically: Patricia McSorley, Executive Director; Carrie Smith, Assistant Attorney General (AAG); Anne Froedge, AAG; Roberto Pulver, AAG; William Wolf, M.D., Chief Medical Consultant; Raquel Rivera, Investigations Manager; and, Andrea Cisneros, Minutes Administrator. Beth Campbell, AAG, participated telephonically to provide the Board with independent legal advice on the hearing matters as referenced herein.

### **C. PUBLIC STATEMENTS REGARDING MATTERS LISTED ON THE AGENDA**

Individuals that addressed the Board during the Public Statements portion of the meeting appear beneath the matter(s) referenced.

### **D. EXECUTIVE DIRECTOR'S REPORT**

- Update of Board Staffing and Agency Processes During the State of Emergency

Executive Director McSorley reported that the majority of the Board's staff has been working from home, and that a limited number of staff continue to report to the office. She thanked the

Board's Information Technology staff and the Deputy Director for their efforts during this less than ideal situation.

- Update on the Statewide Disaster Medical Advisory Committee (DMAC) Meeting

Executive McSorley reported that she attended the most recent DMAC meeting along with Dr. Wolf as a number of the recommendations considered were clinical in nature. Dr. Wolf summarized for the Board the Arizona Crisis Standards of Care Plan, which provides for activation of the DMAC during a particular crisis, and presented to the Board the recommendations made by the Committee involving coordination of patient care, prioritizing patient care, pre-hospital triage guidance, and alternative settings for care.

- Update on the Request to Waive Licensure Requirements During the State of Emergency

Executive Director McSorley informed the Board that waiver requests under the current state of emergency require approval from the ADHS, and that the two waiver requests previously submitted by the Board are currently pending ADHS approval.

- Update on Budget

Executive Director McSorley updated the Board regarding the Governor's approval of the budget, and reported that the Decision Package for funds to procure the salesforce for a new database was not acted on given the current state of emergency.

- Discussion and possible action regarding recent Executive Orders issued by the Governor's Office following the Declaration of Emergency

Executive Director McSorley reported that the Governor has issued a number of Executive Orders that directly impact healthcare. Additional Board discussion regarding this topic was conducted under agenda item #1.

## E. CHAIR'S REPORT

- Discussion of teleconference meeting procedures

Chairman Farmer advised that the Board will convene its Special Teleconference following adjournment of the current meeting.

## F. DISCUSSION REGARDING DEBRIEFING ON BOARD PROCESSES

Chairman Farmer thanked the Board's staff for facilitating today's meeting and thanked the Board's members for their participation. Chairman Farmer recognized Deputy Director Fredericksen for her hard work in facilitating the Board's ability to conduct its meetings via video conferencing.

## G. LEGAL ADVISOR'S REPORT

- Update regarding *Antony T. Murrell Jr., et. al., v. Arizona Medical Board, et. al.*  
AAG Smith provided a brief update regarding this matter.
- Update regarding *Planned Parenthood of Arizona, Inc., et. al., v. Arizona Medical Board et. al.*

**MOTION: Ms. Bain moved for the Board to enter into Executive Session to obtain legal advice and to discuss pending or contemplated litigation pursuant to A.R.S. §§ 38-431.03(A)(3) and (4).**

**SECOND: Dr. Bethancourt**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

The Board entered into Executive Session at 3:20 p.m.

The Board returned to Open Session at 3:36 p.m.

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

**MOTION: Vice-Chairman Gillard moved for the Board to accept the draft stipulation and order dismissing the Board members as defendants.**

**SECOND: Dr. Bethancourt**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

Ms. Bain thanked AAG Smith and staff for their work on this matter.

#### **H. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING TIMELY COMPLETION OF CONTINUING MEDICAL EDUCATION REQUIREMENTS IN LIGHT OF COVID-19.**

The Board discussed deferring CME requirements for license renewal to a future date. Board staff reported that CMEs reported for the current license renewal cycle would have had to be completed prior to the current state of emergency. The Board determined that CME deferment was not warranted at this time.

#### **I. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING REQUEST FOR TEMPORARY WAIVER OF LICENSURE REQUIREMENTS PURSUANT TO ADHS ADMINISTRATIVE ORDER 2020-01.**

Lincoln Hyatt, an Assistant Physician licensed in Missouri, addressed the Board telephonically during the Public Statements portion of the meeting and asked that the Board consider allowing individuals that hold licensure not currently recognized by this Board, such as himself, to obtain Arizona licensure to help during the declared state of emergency.

Executive Director McSorley informed the Board that multiple inquiries have been received regarding this topic. She stated that other states have implemented processes to facilitate reactivation of licensures that were either placed on inactive status or expired. She stated that Arizona has its own set of laws that address the issue of license inactivation, including attesting to no active practice in any state. She stated that in light of the current crisis and while the Board has sanctioned licensees in the past for practicing elsewhere while on inactive status in Arizona, the Board had the ability to consider mitigating circumstances if an inactive licensee were to request reactivation based on practice in another state.

Executive Director McSorley reported that she has been in communications with the Governor's Office, the ADHS, as well as other state boards with regard to retired licensees. The Board noted that the Texas Medical Board is currently granting expedited reactivation of licensure for retirees who have been out of practice for no longer than four years without requiring additional proof of CMEs or competency evaluation in light of the current crisis. Chairman Farmer stated that it is a matter of policy for the Board to consider the number of years that a physician has been out of practice when considering expedited license reactivation. AAG Smith advised the Board that while the policy is a matter for Board discussion, the waiver request would need to be submitted to ADHS for review once the Board determines the threshold for a physician returning to practice. Ms. Jones asked how the Board would verify that the physician has the physical and mental capacity to safely practice medicine. Chairman Farmer proposed requiring the physician to attest to having the ability to practice safely at the time of relicensure.

Dr. Paul noted that there had been several retired physicians inquiring about this who are anxious to re-enter the workforce to respond to the anticipated need for additional healthcare workers to respond to the COVID-19 crisis. AAG Smith noted that the Board previously determined that the duration of temporary licensure issued during the current state of emergency would be 90 days or until the declaration has ended, whichever comes first. Dr. Figge pointed out that retired physicians who have maintained their active licensure status and CMEs had the ability to re-enter the medical field without applying to the Board. He commented that based on the size of Texas compared to Arizona, he would support determining a threshold of four years. Dr. Bethancourt

also spoke in support of the four year threshold. Dr. Beyer asked for further clarification regarding the expiration date of the temporary emergency license. AAG Smith stated that the process for declaring and terminating a state of emergency is outlined in statute, and that the Board's authority to waive licensure requirements and any waivers granted under it terminates at the time that the declaration of emergency is terminated.

**MOTION: Dr. Figge moved for the Board to request waiver of licensure requirements to allow individuals who have retired from the practice of medicine for four years or less and do not have an active license in any state as well as physicians who have had an inactive license for four years or less to apply for the temporary license previously approved by the Board for this emergency. These applicants shall attest to having the knowledge, skill and health to perform in this role.**

**SECOND: Dr. Krahn**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

The Board discussed deferring renewal requirements for licenses that are due to expire between March and September of 2020 for at least six months, in light of the current state of emergency. The Board noted that licensees have the ability to renew their medical licenses via the Board's website.

**MOTION: Dr. Figge moved for the Board to request waiver to defer the requirement to renew medical licenses that have expiration dates between March 1, 2020 and September 1, 2020 by six months.**

**SECOND: Dr. Krahn**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

The Board discussed requesting waiver of licensure requirements for temporary emergency licensure for medical graduates who meet the requirements of A.R.S. §§ 32-1422(A)(1-7) who do not hold licensure in any state.

**MOTION: Dr. Paul moved for the Board to request waiver to allow an applicant who is a recent medical graduate who meets the requirements of A.R.S. §§ 32-1422(A)(1-7) to apply for the temporary license previously approved by the Board for this emergency, and waive the requirement for these applicants to hold an active unrestricted license in another state.**

**SECOND: Dr. Figge**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

## **J. APPROVAL OF MINUTES**

- March 5, 2020 Special Teleconference Meeting, including Executive Session

**MOTION: Ms. Jones moved for the Board to approve the March 5, 2020 Special Teleconference Meeting, including Executive Session.**

**SECOND: Dr. Bethancourt**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

## LEGAL MATTERS

### K. REVIEW, CONSIDERATION AND POSSIBLE ACTION ON PROPOSED BOARD ORDER ARISING FROM ADMINISTRATIVE LAW JUDGE'S RECOMMENDED DECISION

1. MD-18-0302A, CEDRIC W. MCCLINTON, M.D., LIC. #12711

Dr. McClinton was not present during the Board's consideration of this matter. AAG Roberto Pulver appeared on behalf of the State. AAG Elizabeth Campbell was present to provide Independent Legal Advice to the Board.

AAG Pulver summarized that on March 22, 2020, the ALJ recommended the revocation of Dr. McClinton's license based on finding that the physician deviated from the standard of care in treating patient LR. LR was a 22 year-old female when she first established care with Dr. McClinton on February 17, 2015. LR was seen by Dr. McClinton on six additional occasions, with the last encounter on March 1, 2018. Dr. McClinton failed to perform a complete physical examination on multiple occasions, failed to obtain a social history and discuss the risks and benefits of treatment with the patient. Dr. McClinton also failed to appropriately dispense and monitor controlled substances prescribed to LR.

Vice-Chairman Gillard questioned Board staff regarding the manner in which the case was referred to the Office of Administrative Hearings. AAG Campbell advised the Board to consider whether to accept, reject or modify the ALJ's recommended Findings of Fact. Vice-Chairman Gillard requested further clarification regarding the SIRC recommendation and why the case resulted in a Formal Hearing.

**MOTION: Dr. Figge moved for the Board to adopt the ALJ's recommended Findings of Fact.**

**SECOND: Dr. Krahn**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member was absent: Dr. Bethancourt.**

**VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

Vice-Chairman Gillard observed that the case was initiated based on allegations involving the physician's care of a single patient. Vice-Chairman Gillard questioned whether this matter rises to the level of license revocation, and noted that the licensee failed to timely respond to the hearing notice and did not comply with the ALJ's order to submit a written response. The Board noted that Dr. McClinton appeared before the ALJ at the time of the Formal Hearing. Vice-Chairman Gillard asked Board staff to clarify why the case was referred for Formal Hearing. AAG Campbell informed the Board that how this matter moved to Formal Hearing had no bearing on the ALJ's recommended Conclusions of Law.

**MOTION: Dr. Gillard moved for the Board to adopt the ALJ's recommended Conclusions of Law.**

**SECOND: Dr. Krahn**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member was absent: Dr. Bethancourt.**

**VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

Board staff informed the Board that Dr. McClinton was issued a Formal Interview invitation with options to appear before the Board for a Formal Interview, enter into a Consent Agreement for disciplinary action, or proceed to Formal Hearing. Dr. McClinton elected to proceed for Formal Hearing and failed to correspond with the Board further until he appeared for the Formal Hearing. Vice-Chairman Gillard recognized that the

physician failed to timely respond to multiple requests, and stated that he did not believe that the case rises to the level of license revocation based on one consultant's review of one patient's chart. Dr. Beyer observed the physician's prior Board history that involved similar issues, and stated that the physician's failure to engage with the Board in addition to the quality of care concerns warrant discipline in this case. Chairman Farmer stated that in light of the physician's prior Board history, he questioned the licensee's ability to be regulated by this Board. Dr. Figge stated that while the quality of care concerns alone may not warrant revocation of licensure, the physician's ability to be regulated is important to consider when discussing how to resolve this matter.

AAG Pulver informed the Board that during the Formal Hearing, Dr. McClinton informed the ALJ several times that he did not care if his license were revoked as he planned to retire. Chairman Farmer stated that Dr. McClinton's conduct speaks to serious concerns regarding regulability. Dr. Krahn stated that the case could have taken a different direction had the physician engaged with the Board and been more responsive. Dr. Krahn questioned the physician's regulability and stated that she was troubled at the physician's disinterest in following the Board's rules and processes. Vice-Chairman Gillard thanked the Board's staff for their clarification and stated that he would support adopting the ALJ's recommendation to revoke the license.

**MOTION: Dr. Figge moved for the Board to adopt the ALJ's recommended Order for Revocation of Licensure.**

**SECOND: Dr. Paul**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member was absent: Dr. Bethancourt.**

**VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

## **L. MOTION FOR REHEARING/REVIEW (Formal Interview)**

### **1. MD-18-0887A, KATHARINE A. ALTIERI, M.D., LIC. #5079**

Dr. Altieri and Attorney Michael Rusing participated telephonically during the Board's consideration of this matter. Mr. Rusing stated that in addition to the motion for rehearing/review, he also filed another brief requesting that this matter be expedited in light of the current circumstances as it has caused significant employment issues for the physician. Mr. Rusing stated that the Board's case lacked sufficient evidence to support two of the three findings of unprofessional conduct against the physician. He stated that the physician did not violate A.R.S. § 32-1401(27)(f) as the information relating to this allegation was an unsupported assumption that was accepted as fact. He stated that while the physician tested positive for consuming alcohol on two occasions, she was not reporting for work either time. Mr. Rusing commented on the finding that Dr. Altieri violated A.R.S. § 32-1401(27)(r) and stated that there is no evidence that a medical professional found harmful practice in this case. Finally, Mr. Rusing did not dispute the finding that Dr. Altieri violated A.R.S. § 32-1401(27)(s) by consuming alcohol in violation of her Interim Consent Agreement, and stated that this occurred while the physician was on vacation and was not rendering medical care.

Mr. Rusing requested the Board change its Order for Letter of Reprimand and Probation and allow the physician to continue her PHP participation by entering into a confidential Stipulated Rehabilitation Agreement (SRA). He stated that this resolution would continue to promote public safety without detrimentally affecting the physician.

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

**SECOND: Dr. Figge**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member was absent: Dr. Bethancourt.**

**VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

The Board entered into Executive Session at 9:50 a.m.

The Board returned to Open Session at 10:14 a.m.

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

**MOTION: Ms. Bain moved for the Board to grant the motion for review based on R4-16-103(D)(5), regarding insufficient or excessive penalty.**

**SECOND: Dr. Paul**

Dr. Figge recalled the Formal Interview with the physician where the matter was discussed in detail. He stated that Dr. Altieri was offered the opportunity to obtain legal counsel to represent her before the Board at that time and she elected to proceed without legal representation. Dr. Figge stated that it appeared the physician's issues were being minimized, but that he supported granting the motion based on R4-16-103(D)(5). Dr. Krahn recalled Mr. Rusing's comments relating to there not being evidence of a pattern of alcohol use, and stated that Board's evidence supported the finding of a pattern in this case. Dr. Beyer agreed that a pattern was established in this case, and stated that discipline was appropriate given the finding that the physician violated an Interim Agreement by consuming alcohol. He stated that the Board takes these matters very serious and non-compliance is not acceptable.

Ms. Bain discussed the licensee's request to enter into an SRA as an alternative to the Board's Order and questioned whether an SRA would address the issues identified and protect the public in a manner similar to the discipline issued in this case in light of the current state of emergency. Dr. Figge noted that the physician's counsel highlighted minor discrepancies in the Board's findings. Dr. Figge stated that the Board conducted a comprehensive review at the Formal Interview, and that the disciplinary sanction was based on the physician's violation of the Interim Agreement. Dr. Figge stated that the Board's Order in this case is consistent with the Board's adjudication of similar cases in the past that resulted in disciplinary action.

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Beyer, Ms. Dorrell, Dr. Figge, Ms. Jones, and Dr. Paul. The following Board members voted against the motion: Chairman Farmer and Dr. Krahn. The following Board member abstained: Vice-Chairman Gillard. The following Board member was absent: Dr. Bethancourt.**

**VOTE: 6-yay, 2-nay, 1-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

AAG Smith informed the Board that SRAs do not include Findings of Fact. She advised that the Board's discussion should focus on the penalty issued in this case pursuant to the motion for review being granted on that basis.

**MOTION: Dr. Figge moved for the Board to rescind its Order for a Letter of Reprimand and Probation contingent upon the licensee entering into an SRA with terms and conditions for monitoring consistent with the Board's current Order. If signed, the Board shall also issue an Advisory Letter for consuming alcohol in violation of an Interim Consent Agreement for PHP participation. While there is insufficient evidence to support disciplinary action, the Board believes that continuation of the activities that led to the investigation may result in further Board action against the licensee.**

**SECOND: Dr. Paul**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Ms. Jones, and Dr. Paul. The following Board member voted against the motion: Dr. Krahn. The following Board member abstained: Vice-Chairman Gillard. The following Board member was absent: Dr. Bethancourt.**

**VOTE: 7-yay, 1-nay, 1-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

**M. FORMAL INTERVIEWS**

1. THIS CASE WAS PULLED FROM THE AGENDA.
2. MD-18-0033A, JAMES M. DARRAGH, M.D., LIC. #15413

Dr. Darragh and Attorney Kathleen Rogers participated telephonically during the Board's consideration of this matter. Board staff summarized that chart reviews demonstrated issues with the physician's prescribing and the physician complete CME in prescribing. Three additional charts were reviewed to review care rendered by the physician after completion of the CME and deviations from the standard of care were identified in two cases relating to the physician's prescribing. Board staff reported that a review of the Controlled Substance Prescription Monitoring Program (CSPMP) demonstrated a decrease in narcotics prescribed by Dr. Darragh. SIRC recommended discipline with chart review probation to monitor whether the physician is incorporating what he learned from the CME course into his current practice.

Dr. Darragh stated that he took this case very seriously and has completed CME in controlled substances prescribing and professional boundaries, and that he has no plans to treat chronic pain with controlled substances in the future. Ms. Rogers asked the Board to consider issuing an Advisory Letter to resolve this case as the physician's practice has changed and he no longer treats pain management patients. Ms. Rogers stated that Dr. Darragh is willing to fulfill any additional CME requirements that the Board finds are necessary in this case.

The Board observed that the index patient (patient JL) was reviewed by an internal medicine Medical Consultant (MC) who did not find issues with JL's care, with the exception that the physician should have discussed with the patient the high doses of narcotics. In response to Dr. Figge's line of questioning, Dr. Darragh explained that JL was his patient for twenty years and was very difficult. He explained that JL had chronic pain and was miserable, and that he saw him twice weekly and emphasized their discussions regarding addiction versus dependence. Dr. Darragh reported that JL was hospitalized 10-15 times a year, and that the controlled substances noted on the CSPMP from other prescribers were bridge prescriptions that were short supplies until the patient returned to his care.

The Board noted that a second MC reviewed Dr. Darragh's care of three additional patients, and identified concerns regarding patients SL and PO. Dr. Darragh explained that SL was a patient of his for twenty years, and that he attempted to refer her to psychiatry for further treatment. The second MC was concerned that the patient showed signs of substance abuse that were not addressed, including positive toxicology results that were not repeated. Dr. Darragh stated that the positive toxicology screening was done in the hospital and he was not made aware of the results. Dr. Figge questioned the licensee regarding his treatment of patient PO, noting that this patient was co-managed with a pain specialist. Dr. Darragh stated that this was a difficult patient, and that he communicated with the pain specialist multiple times, discussed the risks and benefits of treatment with the patient as well as alternative treatment options. Dr. Darragh informed the Board that under his current role as Chief Medical Officer, he is no longer providing direct patient care unless he is covering for another provider. He stated that placing his license on probation would be detrimental to his current position and pointed out that he serves in a rural community with limited resources.

Dr. Beyer questioned the Board's staff regarding the investigation process and the need for a second MC review of additional patients. Dr. Wolf informed the Board that there were questions raised regarding the first MC's final determinations and a second MC review of additional charts was obtained. Dr. Krahn stated that she found the dialogue with this physician was very helpful and that she appreciated the information provided by the physician in his testimony to the Board. Dr. Figge stated that he found the physician



engaged in unprofessional conduct and spoke in support of sustaining a violation of A.R.S. § 32-1401(27)(r) as proposed by SIRC.

**MOTION: Dr. Figge moved for findings of unprofessional conduct in violation of A.R.S. § 32-1401(27)(r) for reasons as stated by SIRC.**

**SECOND: Vice-Chairman Gillard**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member was absent: Dr. Bethancourt.**

**VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

Dr. Figge stated that after hearing from the physician today, he did not find that this matter rises to the level of discipline. Dr. Figge noted that this case involved multiple mitigating factors and that the physician has demonstrated remediation including completing a prescribing course.

**MOTION: Dr. Figge moved for the Board to issue an Advisory Letter for inappropriately prescribing controlled substances. While there is insufficient evidence to support disciplinary action, the Board believes that continuation of the activities that led to the investigation may result in further Board action against the licensee.**

**SECOND: Vice-Chairman Gillard**

Dr. Beyer spoke in support of the motion and stated that he did not find that discipline was warranted in this case given the testimony heard during today's proceedings.

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member was absent: Dr. Bethancourt.**

**VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

3. MD-19-0007A, AMAR P. SHARMA, M.D., LIC. #40693

Complainant RP addressed the Board telephonically during the Public Statements portion of the meeting. Dr. Sharma and Attorney J. Arthur Eaves participated telephonically during the Board's consideration of this matter.

Board staff summarized that the MC found that Dr. Sharma deviated from the standard of care by failing to ascertain the accuracy of his newly admitted patient's medication list. DK was a 98 year-old female that lived independently in a retirement village and was transported to the hospital by her son with flu-like symptoms including fever, weakness, nausea and dizziness. The ER documentation accurately reflected DK's medication list; however, nursing staff inadvertently included a note in the patient's file that regarded another patient, and included a list of controlled substances for depression and anxiety as well as opioid dependency. When Dr. Sharma saw the patient, he noted that her medications had not be reconciled in the electronic health records system, and instructed the nursing staff to verify the medications prior to administration. Dr. Sharma saw the patient again 1.5 days later, he documented that he reviewed DK's CSPMP report and ordered to discontinue DK's remote telemetry monitoring. Later that evening, DK received the doses for each controlled substance and two hours later, the hospitalist on call was contacted regarding DK's severe bradycardia, hypoxia and altered mental status. The hospitalist documented that DK's CSPMP data did not include narcotic prescriptions, ordered administration of Narcan, and discontinuation of the narcotics. The hospitalist also ordered formal reinstatement of DK's remote telemetry monitoring. Of note, Dr. Sharma's order to discontinue DK's remote telemetry monitoring had not yet been implemented. DK received a total of three Narcan doses, and urgent head CT and EEG found no evidence of new pathology, thought it subsequently appeared that DK may have developed seizures secondary to her overdose event.

In his opening statement, Mr. Eaves stated that the hospital performed a root cause analysis and determined that the admitting nurse accidentally included a transfer sheet from another patient who was also residing in another nursing home facility. Mr. Eaves stated that Dr. Sharma acted appropriately at the time of the patient's admission by refusing to sign off on DK's home medication orders until verified by nursing, and attempted to reach out to DK's son and left him a voicemail message with no response. On day three of DK's hospital admission, Dr. Sharma was on another floor conducting his patient rounds, and received a call from nursing staff requesting that he sign off on DK's medications. Mr. Eaves stated that Dr. Sharma confirmed with nursing staff that the medications were independently verified, and only then did he sign off on DK's medication orders. Mr. Eaves reported that their expert reviewer refuted the MC's findings and that Dr. Sharma was entitled to rely on the nursing staff to verify the patient's at-home medications.

Vice-Chairman Gillard noted that the ER documentation accurately reflected the patient's medications, which did not include the pain medications. Dr. Sharma stated that he does not rely only on the ER documentation, and that he spoke with the patient and nursing staff in his attempts to verify the information. Dr. Sharma added that he had no independent recollection of the events as the incident occurred in 2018. The Board questioned the licensee regarding his communications with DK's family, noting that the family was experienced in the medical field and maintained their own detailed documentation of DK's encounters with her healthcare providers. Dr. Krahn recalled the comments made during the Public Statements, and that the family had indicated they were accessible and willing to provide any information needed to treat DK. Dr. Beyer noted that DK was noted to have improved by the time the narcotics were signed off on and administered, and questioned what her mental status was at the time that Dr. Sharma signed off on the medications. Dr. Sharma reiterated that he had no independent recollection of the case, and that DK may have been experiencing pain for a number of reasons. The Board noted that DK was seen by a different hospitalist on her second day of admission and medications were not ordered until they were signed off on by Dr. Sharma on day three of DK's hospitalization.

In closing, Mr. Eaves stated that Dr. Sharma did check the CSPMP data for this patient as was indicated in the records, and that the physician was correct in requesting that DK's medications be independently verified by nursing staff prior to administration. Mr. Eaves stated that Dr. Sharma did not deviate from the standard of care in this case and requested the Board find that this case does not rise to the level of discipline. Board staff clarified that Dr. Sharma's statements that he saw the patient around midnight on the day of admission were incorrect, as the file included documentation of Dr. Sharma performing a history and physical at 6:45 p.m. that day. Board staff reported that the complainant's notes were extensively detailed, and one family member documented that she spoke with the brother, a physician, who had no record of receiving a phone call or message from Dr. Sharma. Board staff pointed out that Dr. Sharma ordered discontinuation of DK's remote telemetry monitoring approximately six hours prior to DK being administered multiple sedative drugs, and that luckily, this order had not been enacted and detected DK's distress.

Dr. Figge found that Dr. Sharma engaged in unprofessional conduct and spoke in support of sustaining the violation proposed by SIRC.

**MOTION: Vice-Chairman Gillard moved for findings of unprofessional conduct in violation of A.R.S. §§ 32-1401(27)(e) and (r) for reasons as stated by SIRC.**  
**SECOND: Dr. Krahn**

Dr. Krahn noted discrepancies between the documentation in the file and the licensee's testimony, and stated that she was troubled by the difficulty in reconciling the information.

**VOTE: The following Board members voted in favor of the motion: Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member abstained: Dr. Bethancourt. The following Board member was absent: Ms. Bain.**

**VOTE: 8-yay, 0-nay, 1-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

Vice-Chairman Gillard noted that DK's records indicated that her son and caregiver were available and that DK was actively participating in discussions prior to the untoward event. Dr. Krahn commented that it appeared there were several steps that were skipped over in the process of caring for DK, including the appropriateness of methadone in a 98 year-old patient, the family did not recall receiving a message from Dr. Sharma, and information in the ER documentation that was not reviewed by the physician. Dr. Krahn spoke in favor of issuing discipline in this case. Dr. Paul stated that he agreed with Dr. Krahn's comments and stated that this was a potentially life-threatening medication error.

Dr. Paul stated that it appeared the care provided in this case was not centered on the patient, with the exception of the care provided in the ER. Dr. Paul stated that he found this matter rises to the level of discipline. Dr. Beyer stated that this was an avoidable mistake that never should have happened. Dr. Figge stated that he agreed with other members' comments, and that there were some profound discrepancies in some of the physician's testimony when compared to the record. Dr. Figge stated that while it appeared the nursing staff did not do their due diligence in medication reconciliation, it was ultimately the physician's responsibility for signing off on the medication orders. Ms. Dorrell stated that she agreed with Dr. Figge's observations, and that she was concerned that the physician has not learned from what took place in this case. Ms. Dorrell spoke in support of issuing discipline in this case.

**MOTION: Vice-Chairman Gillard moved for draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and Probation. Within 12 months, complete PBI's Medical Ethics & Professionalism course (ME-15-Live). The CME hours shall be in addition to the hours required for license renewal. The Probation shall terminate upon proof of successful completion of the CME coursework, including receipt of an AIR letter from PBI.**

**SECOND: Dr. Krahn**

The Board discussed the timeframe for the licensee to complete the CME course in light of the current state of emergency. Board staff reported that the specific course recommended by SIRC is available in virtual format.

**VOTE: The following Board members voted in favor of the motion: Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member abstained: Dr. Bethancourt. The following Board member was absent: Ms. Bain.**

**VOTE: 8-yay, 0-nay, 1-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

## **N. FORMAL INTERVIEWS**

### **1. MD-19-0233A, STEVEN COHEN, M.D., LIC. #28261**

Dr. Cohen participated telephonically during the Board's consideration of this matter. Board staff summarized that the Board received notification from a Surgery Center reporting that the physician took a professional leave of absence in lieu of suspension of membership and clinical privileges. Due to the concerns outlined in the Surgery Center's correspondence to the Board, Dr. Cohen underwent a Physician Health Program (PHP) assessment pursuant to an Interim Order. The PHP Assessor recommended that the physician undergo drug testing including hair analysis, and that additional information be obtained prior to making a determination regarding safety to practice. Drug testing showed hair analysis results that were positive for cocaine and methamphetamine use.

The PHP Assessor determined that Dr. Cohen was not safe to practice and recommended that he undergo treatment.

On April 9, 2019, Dr. Cohen entered into an Interim Consent Agreement for Practice Restriction (Interim Practice Restriction). Dr. Cohen entered into treatment and two subsequent drug screens were positive for cocaine use. A second PHP assessment found that the physician was not safe to practice. On August 20, 2019 after additional evaluation, Dr. Cohen was found safe to practice provided that he participated in PHP for a period of two years while abstaining from alcohol and mood altering drugs, and continued psychiatric treatment. A Medical Consultant (MC) reviewed the patient care related allegation and found that Dr. Cohen deviated from the standard of care by failing to ensure postoperative care prior to discharging a patient from his practice as well as documentation issues.

Dr. Krahn questioned the licensee regarding his past drug use. Dr. Cohen stated that he had no experience with drug use up until around a year ago, and that he used poor judgment and began experimenting with drugs to self-medicate the increase in his anxiety and mental health issues. He explained that starting January of 2019, a series of events occurred in his life that sent him down a difficult path, including being involved in a severe motor vehicle accident, suffering a myocardial infarction two weeks later that resulted in hospitalization, followed by the loss of his mother. Dr. Cohen stated that rather than seeking help, he continued to use marijuana to alleviate his anxiety with intermittent cocaine use. Dr. Cohen stated that since that time, he has learned from the intensive inpatient program, and that he continues to attend the outpatient program as well as AA and NA, with a sobriety date of April 9, 2019. Dr. Cohen reported that since the motor vehicle accident, he has developed spinal cord compression and severe stenosis in his neck that has affected his right hand. Dr. Cohen stated he determined he was not safe to practice surgery and removed himself from practice in March of 2019, and closed his practice in October of 2019 so as to not place himself or patients at risk.

Dr. Cohen explained the situation involving the patient care-related concerns identified in this case. He stated that patient LZ was referred to him by a colleague to which he had a longstanding professional relationship and refers complicated patients to him. He stated that LZ was seen and elected to proceed to surgery, which was performed and uneventful. Dr. Cohen stated that he saw the patient the following day when he was not feeling well and resulted in longer wait times in the office. He stated he explained to the patient that he had been experiencing issues with his hand as of that morning, and that LZ was upset and thought she was placed at risk during her surgery. Dr. Cohen stated that he did his best to communicate to the patient that he had no concerns with his hand during her surgery the day before. Dr. Cohen added that he was seen by a hand surgeon before LZ's surgery who performed fluoroscopy and examined his hand, and cleared him to proceed. Dr. Cohen stated that he provided LZ with the contact information for three other providers he thought would be excellent to continue her postoperative care, and that he also offered to refer the patient back to the referring physician. Dr. Cohen further explained that the patient's chart was transferred to the referring physician and that he also spoke with the physician to update her on the situation and a follow up appointment was scheduled between LZ and the referring physician.

Dr. Krahn observed the alleged violation of inappropriate direction of a Medical Assistant and requested that the physician expand further on the circumstances surrounding the allegation that the staff produced compounded medications while the physician's license was subject to the Interim Practice Restriction. Dr. Cohen explained that a patient requested a refill of her serum to treat severely dry eyes, but did not pick up the original refill that was authorized. Dr. Cohen stated that the patient called the office after the Interim Practice Restriction became effective and requested that her prescription be transmitted to the compounding pharmacy. Dr. Cohen stated that his staff proceeded to transmit the prescription without consulting him, and that after he became aware of the situation, he began having weekly meetings with his staff. He stated this was an isolated event that did not reoccur.

Dr. Beyer stated that the physician appeared forthright in his testimony to the Board during today's proceedings, and questioned Dr. Cohen as to how he believed the Board should proceed in this matter. Dr. Cohen stated that he had incorporated changes into his practice to better communicate with staff, and that participation in the treatment processes have been beneficial to both his professional and personal life. Dr. Cohen stated in light of the extenuating circumstances that led to his poor decisions and ultimately to a path of removing himself from the medical community despite his love of practicing, he requested the Board allow him the opportunity to enter into an agreement to voluntarily surrender his Arizona medical license.

Dr. Krahn questioned whether it would be appropriate for the Board to pause the Formal Interview at this time to allow the AAG to enter into discussions with the licensee regarding the voluntary surrender of his medical license. AAG Smith proposed that the Board continue the Formal Interview to the next regular meeting to allow her time to discuss with Dr. Cohen the possibility of a voluntary surrender.

**MOTION: Dr. Paul moved for the Board to continue this matter to allow the staff to enter into discussions with the licensee regarding a Consent Agreement for surrender of licensure.**

**SECOND: Dr. Krahn**

**VOTE: The following Board members voted in favor of the motion: Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member was absent: Ms. Bain.**

**VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

The Board thanked Dr. Cohen for participating in today's proceedings and for his heartfelt comments.

2. THIS CASE WAS PULLED FROM THE AGENDA.

## **O. FORMAL INTERVIEWS**

1. THIS CASE WAS MOVED TO AGENDA ITEM L. #3.

## **CONSENT AGENDA**

### **P. CASES RECOMMENDED FOR DISMISSAL**

*Cases one through five were pulled from the agenda.*

### **Q. CASES RECOMMENDED FOR ADVISORY LETTERS**

*Cases one through eleven were pulled from the agenda.*

### **R. CASES RECOMMENDED FOR ADVISORY LETTERS WITH NON-DISCIPLINARY CONTINUING MEDICAL EDUCATION ORDERS**

**MOTION: Vice-Chairman Gillard moved for the Board to issue an Advisory Letter with Non-Disciplinary CME Order in item numbers 2-5.**

**SECOND: Dr. Krahn**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

1. MD-19-0451A, RICHARD M. ERNST, M.D., LIC. #30818

Dr. Beyer observed that this matter involved Dr. Ernst prescribing Ambien to his mother-in-law. He stated that it was clear that a violation occurred in this case, but questioned whether CME in ethics was appropriate. Dr. Beyer spoke in support of issuing the Advisory Letter recommended by SIRC without the Non-Disciplinary CME Order. Dr.

Figge agreed with Dr. Beyer's comments and stated he did not see any value in requiring the licensee to complete CME in ethics.

**MOTION:** Dr. Figge moved for the Board to issue an Advisory Letter for inadequate medical records and for prescribing controlled substances to an immediate family member. While there is insufficient evidence to support disciplinary action, the Board believes that continuation of the activities that led to the investigation may result in further Board action against the licensee.

**SECOND:** Dr. Beyer

**VOTE:** The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.

**VOTE:** 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

**MOTION PASSED.**

2. MD-19-0119A, DANIEL M. BURCHFIELD, M.D., LIC. #26158

Complainant PW and Dr. Burchfield addressed the Board telephonically during the Public Statements portion of the meeting.

**RESOLUTION:** Issue an Advisory Letter and Order for Non-Disciplinary CME for failing to appropriately evaluate and treat an infected arthroplasty; for failing to maintain adequate medical records; and failing to respond to the Board or its staff in a timely manner. While there is insufficient evidence to support disciplinary action, the board believes that continuation of the activities that led to the investigation may result in further board action against the licensee. Within six months, complete no less than 10 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding medical recordkeeping. The CME hours shall be in addition to the hours required for license renewal.

3. MD-19-0358A, JACQUELINE M. CARTER, M.D., LIC. #32951

**RESOLUTION:** Issue an Advisory Letter and Order for Non-Disciplinary CME for failure to appropriately address aberrant utilization of controlled substances during treatment and for inadequate monitoring of medication compliance. While there is insufficient evidence to support disciplinary action, the board believes that continuation of the activities that led to the investigation may result in further board action against the licensee. Within six months, complete no less than 15 hours of Board staff pre-approved Category I CME in an intensive, in-person CME in prescribing controlled substances. The CME hours shall be in addition to the hours required for license renewal.

4. MD-19-0563A, CHINSING WANG, M.D., LIC. #55245

**RESOLUTION:** Issue an Advisory Letter and Order for Non-Disciplinary CME for inadequate performance of a L4-L5 decompression, failure to discuss and document treatment alternatives, and inadequate documentation. While there is insufficient evidence to support disciplinary action, the board believes that continuation of the activities that led to the investigation may result in further board action against the licensee. Within six months, complete no less than 10 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding medical recordkeeping. The CME hours shall be in addition to the hours required for license renewal.

5. MD-19-0347A, BRIAN L. SHAFER, M.D., LIC. #32597

Complainant JC and Dr. Shafer addressed the Board telephonically during the Public Statements portion of the meeting.

**RESOLUTION:** Issue an Advisory Letter and Order for Non-Disciplinary CME for inadequate medical records. While there is insufficient evidence to support disciplinary action, the board believes that continuation of the activities that led to the investigation may result in further board action against the licensee. Within six

months, complete no less than 10 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding medical recordkeeping. The CME hours shall be in addition to the hours required for license renewal.

## **S. REVIEW OF EXECUTIVE DIRECTOR DISMISSALS**

Cases one through six were pulled from the agenda.

## **T. PROPOSED CONSENT AGREEMENTS (Disciplinary)**

**MOTION:** Dr. Figge moved for the Board to accept the proposed Consent Agreement in item numbers 1-3.

**SECOND:** Dr. Paul

**VOTE:** The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.

**VOTE:** 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

**MOTION PASSED.**

1. MD-18-0689B, BARBARA J. VIZE, M.D., LIC. #20591

**RESOLUTION:** Accept the proposed Consent Agreement for a Letter of Reprimand.

2. MD-18-0913A, MADONNA C. MALLARI, M.D., LIC. #33207

Attorney Cody Hall and Dr. Mallari addressed the Board telephonically during the Public Statements portion of the meeting.

**RESOLUTION:** Accept the proposed Consent Agreement for a Letter of Reprimand and Five Year Probation. Dr. Mallari's practice is restricted in that she is prohibited from prescribing controlled substances until she has completed the CME, enters into an agreement for chart reviews, and provides staff with satisfactory proof of compliance with these requirements. Within 12 months, Dr. Mallari shall complete no less than 15 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding prescribing controlled substances, and complete no less than 10 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding medical recordkeeping. The CME hours shall be in addition to the hours required for license renewal. Within 30 days of completion of the CME, Dr. Mallari shall enter into a contract with a Board-approved monitoring company to perform periodic chart reviews at the physician's expense. After three consecutive chart reviews, Dr. Mallari may petition the Board to request Probation termination. Dr. Mallari shall not request early termination without satisfaction of the chart review requirements.

3. MD-19-0497A, ALEXANDER VILLARES, M.D., LIC. #32704

**RESOLUTION:** Accept the proposed Consent Agreement for a Letter of Reprimand and Probation. Within 12 months, Dr. Villares shall complete a minimum of 10 hours of Board staff pre-approved Category I non-disciplinary CME in an intensive, in-person course regarding medical recordkeeping. Within 30 days, Dr. Villares shall register for the intensive, in-person medical recordkeeping program offered by the Center for Personalized Education for Professionals (CPEP), and upon completion, shall provide Board staff with satisfactory proof of attendance in satisfaction of this requirement. Within 30 days of completion of the CME, Dr. Villares shall enroll in the Personalized Implementation Program (PIP) with successful completion. The CME hours shall be in addition to the hours required for license renewal. The Probation shall not terminate until Dr. Villares submits in writing his request for Probation termination and shall demonstrate that he has successfully satisfied all of the terms and conditions of the Board's Order.

## **U. APPROVAL OF DRAFT FINDINGS OF FACT, CONCLUSIONS OF LAW AND ORDER**

**MOTION:** Dr. Figge moved for the Board to approve the draft Findings of Fact, Conclusions of Law and Order for item numbers 2 and 3.

**SECOND: Ms. Jones**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

1. MD-17-0873A, DAVID K. TOM, M.D., LIC. #43118

Attorney Fred Cummings addressed the Board telephonically during the Public Statements portion of the meeting on behalf of Dr. Tom.

AAG Smith stated that there was a typographical error in the Findings of Fact relating to the complaint. AAG Smith explained that the draft referenced that the Board received notification of a medical malpractice settlement in this case, which was incorrect as the Board had received a direct complaint regarding the physician's care of the patient. AAG Smith requested the Board approve the draft Findings of Fact, Conclusions of Law and Order with the revision. Dr. Figge agreed with the revision and stated that counsel's arguments regarding the level of sanction in this case are not appropriate at this juncture. Dr. Figge noted that after the Board's Order is issued, the licensee has the ability to file a motion for rehearing or review, at which time the Board could consider arguments relating to the sanction.

**MOTION: Dr. Figge moved for the Board to approve the draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and Probation, as revised to clarify that the case was initiated after receiving a direct complaint and not by notification of a malpractice settlement. Within six months, Dr. Tom shall complete no less than 10 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding medical recordkeeping; and, complete no less than 5 hours of Category I CME in cervical spine pain procedures. The CME hours shall be in addition to the hours required for license renewal. The Probation shall terminate upon successful completion of the CME coursework.**

**SECOND: Dr. Bethancourt**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

2. MD-18-1151A, PAREED ALIYAR, M.D., LIC. #24775

**RESOLUTION: Accept the draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and Practice Restriction prohibiting Dr. Aliyar from performing invasive or interventional cardiology or vascular procedures.**

3. MD-19-0265A, MIGUEL A. ARENAS, M.D., LIC. #33383

**RESOLUTION: Accept the draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand.**

## **V. LICENSE APPLICATIONS**

### **i. CONSIDERATION AND POSSIBLE ACTION TO APPROVE OR DENY LICENSE APPLICATION, OR TAKE OTHER ACTION**

**MOTION: Dr. Beyer moved for the Board to approve the license application in item numbers 4, 5, 7, 8, and 9.**

**SECOND: Ms. Jones.**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**



1. MD-19-0800A, JACOB W. MOSS, M.D., LIC. #N/A

Board staff summarized that the applicant is currently subject to a probationary license in Idaho, and that staff had been in communication with the Idaho Board. Board staff reported that the applicant had a gap in practice history relating to exiting a postgraduate training program in 2015 to recently receiving an Idaho license in February of 2019 with a corrective action agreement. Idaho Board staff has indicated that upon receipt of their first compliance report, a copy of that report will be forwarded to this Board.

Dr. Figge noted that the physician has not practiced medicine since completing his training in 2015. Chairman Farmer expressed concern regarding the gap in practice. Board staff clarified regarding the physician's recent employment beginning in 2019 that involves limited exams and medication reviews. Dr. Krahn observed that the applicant had referenced an employment opportunity that would allow him to refine his history taking and physical examination skills. Dr. Krahn questioned whether the physician had sufficient experience to warrant licensure in Arizona. Dr. Figge stated that he did not believe the applicant held the appropriate credentials to support the issuance of an Arizona license and ability to care for patients without undergoing some process to prove competency. Dr. Figge encouraged the applicant to withdraw the license application and continue through the Idaho Board process to prove his competence and then potentially reapply for Arizona licensure at a future date

Vice-Chairman Gillard questioned whether there was a mechanism available for the Board to issue a probationary license similar to that of the Idaho Board. AAG Smith stated that the Board's options included offering the applicant a consent agreement for probationary license that could include terms requiring compliance with the Idaho Board's corrective plan. Dr. Figge stated that it would be a disservice to the physician to require the same probationary terms as Idaho, and reiterated his suggestion that the application be withdrawn, that the physician continue with the Idaho corrective plan and potentially reapply for Arizona licensure in the future. Dr. Krahn agreed with Dr. Figge's comments and stated that the physician should resolve the issues in Idaho and then reapply to this Board at a later time. Dr. Paul agreed that given the Board's concerns, the application should be withdrawn at this time. Dr. Bethancourt stated that he agreed with comments from other Board members regarding the withdrawing of the application.

**MOTION: Dr. Figge moved for the Board to allow the applicant an opportunity to withdraw the application in lieu of formal license denial. If the application is not withdrawn within 30 days, the license shall be denied based on A.R.S. § 32-1422(A)(4).**

**SECOND: Dr. Bethancourt**

Dr. Figge requested staff to communicate to the applicant that he has the ability to reapply for Arizona licensure after practicing in Idaho for a period of time and receiving an unrestricted Idaho medical license. AAG Smith informed the Board that a copy of the minutes summarizing today's discussion could be included in the notice letter to the physician. Dr. Beyer questioned whether receipt of an unrestricted Idaho license would qualify the physician for Arizona licensure. AAG Smith commented that the Board had the ability to make that determination at the time of reapplication.

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

2. MD-19-0151A, AARON T. SAUNDERS, M.D., LIC. #N/A

Dr. Krahn recalled the Board's previous discussion on this case and the prior recommendation for a Licensing Interview. Dr. Krahn expressed concern that the

physician is too early in his treatment and has not reached a point where she believes that an unrestricted license could be issued at this time. Dr. Krahn suggested that the physician withdrawal the application and reapply in the future, or enter into an agreement for PHP monitoring. AAG Smith informed the Board that there was confidential information in the file that was available for the Board's review and consideration.

Vice-Chairman Gillard stated that he recalled this case was returned for review at the Board's November 2019 teleconference. He spoke in support of granting licensure in light of the confidential information. Board members discussed the confidential information in the file.

**MOTION: Dr. Figge moved for the Board to grant licensure.  
SECOND: Vice-Chairman Gillard**

Dr. Krahn spoke in support of the motion in light of the confidential information.

**VOTE: The following Board members voted in favor of the motion: Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member voted against the motion: Ms. Bain.**

**VOTE: 9-yay, 1-nay, 0-abstain, 0-recuse, 0-absent.  
MOTION PASSED.**

3. MD-19-1198A, BIJAN MOSSADEGHI, M.D., LIC. #N/A

Dr. Krahn observed that the physician requested that the license be expedited due to financial hardship, and that he had indicated that he planned to use the license to volunteer. Dr. Krahn further noted that the physician moved medical fields from pathology to family medicine, and to general practice. Vice-Chairman Gillard noted that the physician graduated from a US medical school in 2016 and is required to complete at least one year of post graduate training. Vice-Chairman Gillard stated that he found the applicant meets the minimum statutory requirements for Arizona licensure.

Board staff reported that the applicant has no disciplinary history and is not licensed in any jurisdiction at this time. Vice-Chairman Gillard noted that the applicant has completed training in an accredited program. Dr. Figge stated that granting the license is reasonable in light of the minimum requirements being met.

**MOTION: Dr. Krahn moved for the Board to grant licensure.**

**SECOND: Dr. Bethancourt**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.  
MOTION PASSED.**

4. MD-20-0106A, NOEL A. ZWEIG, M.D., LIC. #N/A

**RESOLUTION: Approve the application.**

5. MD-20-0116A, MICHAEL J. MILLER, M.D., LIC. #N/A

**RESOLUTION: Approve the application.**

6. THIS CASE HAS BEEN PULLED FROM THE AGENDA.

7. MD-20-0060A, BRAD A. BOUDREAU, M.D., LIC. #N/A

**RESOLUTION: Approve the application.**

8. MD-20-0134A, JESSE D. MITCHELL, M.D., LIC. #N/A

**RESOLUTION: Approve the application.**

9. MD-20-0117A, MATTHEW J. OBERLEY, M.D., LIC. #N/A

**RESOLUTION: Approve the application.**

ii. **CONSIDERATION AND POSSIBLE ACTION TO APPROVE OR DENY LICENSE APPLICATION, OR TAKE OTHER ACTION WITH STAFF RECOMMENDATION**

1. MD-19-1064A, MOHAMED A. M. SHAABAN, M.D., LIC. #N/A

Attorney Steve Myers addressed the Board telephonically during the Public Statements portion of the meeting on behalf of Dr. Shaaban.

Ms. Jones recalled the comments made during the Public Statements, and stated that the physician appeared remorseful and understanding of the consequences of his actions relating to the incident that occurred seven years ago. Ms. Jones spoke in support of granting licensure.

**MOTION: Ms. Jones moved for the Board to approve the license application.**

**SECOND: Dr. Figge**

Dr. Figge noted that SIRC recommended inviting the applicant to appear before the Board for a Licensing Interview, and that the physician's correspondence clarified the issues. Dr. Figge spoke in support of the motion. Chairman Farmer spoke in support of the motion, noted that the physician has had a good record since the events that occurred seven years ago.

**VOTE: The following Board members voted in favor of the motion: Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member abstained: Ms. Bain.**

**VOTE: 9-yay, 0-nay, 1-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

2. THIS CASE WAS PULLED FROM THE AGENDA.

3. MD-19-0956A, HANI Y. EL-OMRANI, M.D., LIC. #N/A

Dr. El-Omrani addressed the Board telephonically during the Public Statements portion of the meeting.

Board staff reported that Dr. El-Omrani completed a residency program that is ACGME internationally approved. Vice-Chairman Gillard questioned whether the applicant met the minimum statutory standards for licensure. Board staff clarified that the physician served as a clinical professor for 36 months and qualifies for licensure. Chairman Farmer questioned whether a Licensing Interview was warranted. Dr. Figge questioned why the physician has not gained licensure in Washington despite his training and being a faculty member of the University of Washington. Dr. Figge spoke in support of inviting the applicant for a Licensing Interview. Dr. Krahn stated that she believed the Board would benefit from inviting the applicant to appear for a Licensing Interview to further expand on why he is not eligible for licensure in Washington. The Board recalled Dr. El-Omrani's comments during the Public Statements. Ms. Jones noted discrepancies between the physician's comments and the documentation in the Board's file, and spoke in support of a Licensing Interview.

**MOTION: Dr. Figge moved for the Board to invite the physician for a Licensing Interview.**

**SECOND: Ms. Jones**

**VOTE: The following Board members voted in favor of the motion: Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-**

**Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member abstained: Ms. Bain.**

**VOTE: 9-yay, 0-nay, 1-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

4. MD-19-0310A, ELLEN S. PASCH, M.D., LIC. #N/A

Dr. Pasch addressed the Board during the Public Statements portion of the meeting. Vice-Chairman Gillard observed that the applicant graduated from a US medical school in 1995 and completed three years in an emergency medicine residency program in 2000. He also noted that Dr. Pasch completed the SPEX and passed on her second attempt in 2011. Vice-Chairman Gillard recalled the comments made during the Public Statements, and asked whether the applicant was board certified in emergency medicine.

Board staff reported that the applicant has not held board certification in any specialty. Dr. Figge noted that Dr. Pasch's license expired in 2009 and has not practiced medicine since that time. He noted that the applicant refused to undergo a competency evaluation due to the associated costs, and that the physician was previously issued a Letter of Reprimand in 2007. Dr. Figge stated that based on prior discipline, non-practice for the past 11 years, and no proof or documentation of CMEs being maintained during that time, license denial was warranted. Dr. Figge suggested that the applicant be allowed to withdraw her application in lieu of formal license denial.

**MOTION: Dr. Figge moved for the Board to offer the applicant an opportunity to withdraw the license application in lieu of formal license denial. If the application is not withdrawn within 30 days, the license shall be denied based on A.R.S. § 32-1422(A)(4).**

**SECOND: Dr. Krahn**

Dr. Beyer stated that he could not support licensure at this time without the applicant undergoing a competency evaluation. Vice-Chairman Gillard questioned whether there was a mini residency program available for the applicant to attend that would satisfy the Board's concerns before reapplying for Arizona licensure. Dr. Paul stated that there are limited number of courses available around the country that involve a year of rotating internship to prove competency.

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

5. MD-19-1033A, CHRISTOPHER W. SANGDAHL, M.D., LIC. #N/A

Dr. Sangdahl addressed the Board telephonically during the Public Statements portion of the meeting.

Vice-Chairman Gillard observed that the MC reviewed the malpractice case and that there appeared to be a difference in opinion with the physician regarding the medication. Vice-Chairman Gillard stated that the medication was indicated and resulted in an unfortunate complication. Dr. Krahn commented that Lomictil is indicated for Bipolar Disorder in some circumstances, and that the MC was correct in that it is not indicated for acute mania or acute states. Dr. Krahn noted that the MC also expressed concern regarding the titration being done too quickly. Vice-Chairman Gillard commented that the MC's concerns do not limit the Board's ability to grant the license. Dr. Krahn stated that it appeared to be an isolated event as there had been only one malpractice suit reported to the Board. Chairman Farmer noted that the applicant failed to disclose a distant misdemeanor on the license application.

**MOTION: Vice-Chairman Gillard moved to grant the license.**  
**SECOND: Dr. Figge**

Dr. Beyer spoke in support of the motion and stated that a Licensing Interview was not warranted.

**VOTE: The following Board members voted in favor of the motion: Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member abstained: Ms. Bain.**

**VOTE: 9-yay, 0-nay, 1-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

**iii. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING RENEWAL APPLICATION AND PROPOSED CONSENT AGREEMENTS (Disciplinary)**

1. MD-19-0598A, CAROL L. HIPPENMEYER, M.D., LIC. #26801

Dr. Figge spoke in support of granting the license renewal in light of the Consent Agreement signed by the physician.

**MOTION: Dr. Figge moved to grant the license renewal and accept the proposed Consent Agreement for a Letter of Reprimand and Probation. Within 12 months, complete no less than 15 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding controlled substance prescribing; complete no less than 10 hours of Board staff pre-approved Category I CME in an intensive, in-person course regarding medical recordkeeping; and, complete CPEP's ProBE course in ethics. The CME hours shall be in addition to the hours required for license renewal. The Probation shall not terminate except upon affirmative request of the physician and approval by the Board, and the licensee's request for termination shall be accompanied by proof of successful completion of the CME.**

**SECOND: Dr. Paul**

**VOTE: The following Board members voted in favor of the motion: Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul. The following Board member was absent: Ms. Bain.**

**VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 1-absent.**

**MOTION PASSED.**

**iv. CONSIDERATION AND POSSIBLE ACTION TO APPROVE OR DENY LICENSE APPLICATION WITH PROPOSED CONSENT AGREEMENTS (Disciplinary)**

1. MD-19-0444A, LAKSHMINARAYANA GUTTIKONDA, M.D., LIC. #N/A

Vice-Chairman Gillard noted that the physician reported four years of sobriety and that the Board's evaluators were in favor of the physician returning to practice.

**MOTION: Vice-Chairman Gillard moved for the Board approve the application and accept the proposed Consent Agreement for probationary licensure, incorporating the cited return to work recommendations including continued psychiatric treatment with an addiction psychiatrist, and requiring five years of PHP monitoring with terms and conditions consistent with the current private agreement. The physician may petition the Board for Probation termination and to receive full licensure after one year. The physician's request for termination shall be accompanied by letters of support from his treating providers and PHP monitors.**

**SECOND: Dr. Figge**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

**i. CONSIDERATION OF LICENSE APPLICATION WITH RECOMMENDATION FROM THE EXECUTIVE DIRECTOR**

1. CHANDRA M. THIPPANNA, M.D., LIC. #N/A

Vice-Chairman Gillard stated that he found the physician's training to be equivalent to an ACGME accredited program, and noted that the physician currently holds licensure in Ohio.

**MOTION: Chairman Gillard moved for the Board to find that the training is equivalent and grant licensure.**

**SECOND: Dr. Bethancourt**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

**\*\*\*END OF CONSENT AGENDA\*\*\***

**OTHER BUSINESS**

**W. REQUEST FOR TERMINATION OF BOARD ORDER**

1. MD-18-0416A, SADIA B. GHANI, M.D., LIC. #R75135

Dr. Krahn noted that the physician has requested early termination of her Board Order that has only been in effect for one year. Dr. Krahn stated that the physician should continue to comply with the Board's Order for one more year before requesting termination. Vice-Chairman Gillard stated that he agreed with Dr. Krahn's comments and noted that the physician was charged with an extreme DUI.

**MOTION: Dr. Krahn moved for the Board to deny the physician's request to terminate the February 6, 2020 Board Order.**

**SECOND: Vice-Chairman Gillard**

Dr. Figge noted that an independent evaluation has not been completed to provide the Board with a recommendation regarding termination. Dr. Krahn suggested that the physician complete a PHP assessment prior to returning to the Board to request termination.

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

2. MD-15-1223A, CHRISTOPHER A. REYNOLDS, M.D., LIC. #34330

Dr. Figge noted that Dr. Reynolds entered into a Stipulated Health Agreement (SHA) in 2017 that was retroactive to 2015. Dr. Figge stated that given the five years of the physician's compliance and the recommendations supporting termination, he spoke in favor of granting the request to terminate the SHA.

**MOTION: Dr. Figge moved for the Board to grant the physician's request to terminate the April 6, 2017 Board Order.**

**SECOND: Dr. Paul.**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

3. MD-18-0835A, MD-18-0953A, DAWN R. ELLIOTT, M.D., LIC. #49454

Board staff reported that on December 11, 2019, Dr. Elliott was issued an Order for Letter of Reprimand and Probation with terms and conditions that include psychology treatment, as well as the requirement to have a licensed physician proctor and monitor the performance of a minimum of ten cases with reports to the Board as to whether additional proctoring or remediation is warranted. In February of 2020, the Board voted to terminate the proctor requirement after the first report returned with no issues noted in the ten cases monitored. Board staff further reported that Dr. Elliott has completed the psychological evaluation and six therapy sessions pursuant to the Board's Order, and that the evaluator supported the physician's request for termination.

The Board noted that the individual that was previously serving as Dr. Elliott's proctor submitted correspondence to the Board regarding concerns that were not previously communicated to the Board. Ms. Rivera clarified that subsequent to the Board's February 2020 meeting, the proctor outlined concerns that were not initially reported to the Board. Ms. Rivera informed the Board that when the proctor initially submitted the report to the Board regarding Dr. Elliott's progress, the Board's staff attempted on multiple occasions to obtain clarification as to whether the proctor believed that further proctoring was required and no issues were disclosed at that time.

Dr. Figge recalled the Board's lengthy discussion at its February 2020 meeting, and stated that there appeared to be some animosity that has developed between the proctor and the licensee that is an issue the Board may not be able to resolve. Dr. Figge stated that the physician has complied with the requirements of her Board Order and spoke in support of termination. Dr. Krahn agreed with Dr. Figge's comments that any further concerns would be addressed under a new investigation, and that the Board's process has been completed under this case.

**MOTION: Vice-Chairman Gillard moved for the Board to grant the physician's request to terminate the December 11, 2019 Board Order.**

**SECOND: Dr. Beyer**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

4. MD-16-093A, ETHAN M. PHILPOTT, M.D., LIC. #51541

Vice-Chairman recalled that the physician requested termination in February of 2019 and that at that time, there were conflicting opinions from two assessors regarding whether the Order should be terminated. He noted that the physician has been compliant Order since 2016 and the assessors have expressed their support for termination.

**MOTION: Vice-Chairman Gillard moved for the Board to grant the physician's request to terminate the March 13, 2017 Board Order.**

**SECOND: Dr. Krahn**

**VOTE: The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.**

**VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.**

**MOTION PASSED.**

## **X. GENERAL CALL TO THE PUBLIC**

Lincoln Hyatt readdressed the Board during the Call to the Public and stated that he wished to clarify that there is no interest in allowing other license holders to work and support Arizona residents.

## Y. ADJOURNMENT

**MOTION:** Vice-Chairman Gillard moved for adjournment.

**SECOND:** Dr. Figge

**VOTE:** The following Board members voted in favor of the motion: Ms. Bain, Dr. Bethancourt, Dr. Beyer, Ms. Dorrell, Chairman Farmer, Dr. Figge, Vice-Chairman Gillard, Ms. Jones, Dr. Krahn, and Dr. Paul.

**VOTE:** 10-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

**MOTION PASSED.**

The Board's meeting adjourned at 4:38 p.m.



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Patricia E. McSorley, Executive Director