



Arizona Medical Board

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FINAL MINUTES FOR REGULAR SESSION MEETING Held on Wednesday, August 6, 2025 1740 W. Adams St., Board Room A • Phoenix, Arizona

Board Members

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

GENERAL BUSINESS

A. CALL TO ORDER

Chair Figge called the meeting to order at: 8:04 a.m.

B. ROLL CALL

The following Board members were present: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Farmer, Dr. Gillard and Ms. Leach.

The following Board member appeared virtually: Dr. Beyer.

The following Board members were absent: Ms. Bain and Dr. Krahn.

ALSO PRESENT

The following Board staff participated in the meeting: Raquel Rivera, Executive Director; Claude Deschamps, M.D., Chief Medical Consultant; Nicole Samaradellis, Investigations Manager; and Michelle Robles, Board Operations Manager. Carrie Smith, Assistant Attorney General ("AAG") also participated in the meeting.

C. PUBLIC STATEMENTS REGARDING MATTERS LISTED ON THE AGENDA

Individuals who addressed the Board during the Public Statements portion of the meeting appear beneath the case.

D. EXECUTIVE DIRECTOR'S REPORT

- Review, Discussion and Consideration of CCME/PARS CME Passport

Ms. Rivera reported that as part of Dr. Krahn's work in the FSMB Accreditation Review Committee, she informed Ms. Rivera of ACCME PARS which is a repository for verified, primary source physician CME completion data. This is a web-based portal where accredited CME providers can submit data about their educational activities and the physician learners who participate in them. We met with ACCME and have been provided logins to review the system. This is a free service and no cost to the Board. The handout

ACCME provided outlines that over 10,000 MDs are already in their system with CME credit; of those 10,000 MDs they have earned over 875,000 CME credits and completed over 21,500 CME activities in PARS. Ms. Rivera stated, if the Board is agreeable, she would like to partner with ACCME and promote the CME Passport on the Board's website and newsletters to see if we can benefit from the services and eventually be able to more efficiently audit CME compliance. Ms. Rivera confirmed that it is free for all physicians.

Dr. Figge opined that it would be important for physicians to sign up as the Board already completes random audits of 20 percent of physicians.

- Review, Discussion and Update on AMB Outreach Activities

Ms. Rivera reported that the Board continues to receive requests for presentations from both boards. In July, Ms. Rivera and the PHP Manager did a PHP Presentation at BUMC Phoenix to residents. BUMC Phoenix reported being one of the first medical schools in the country with a non-technical curriculum preparing medical students for issues that may arise throughout their career. Staff may return for a presentation specific to investigations and best practice when under board investigation.

- Review, Discussion and Consideration of Annual ED Performance Evaluation

Ms. Rivera thanked the Board for selecting her as the Executive Director of the Board. As part of this new role, she requested the Board's input on instituting an annual evaluation of my performance as the ED. This was not something that was formalized in the past and it would be beneficial to obtain feedback on an annual basis for continuous improvement, alignment, and accountability. Ms. Rivera provided two sample evaluation forms for review and consideration.

Ms. Smith clarified that the ED Selection and Retention Committee has the authority to make the decision on which plan.

Dr. Farmer congratulated Ms. Rivera on the position and noted that the Committee can take input from the Board. Dr. Farmer opined that this is a good idea.

- Report on Physician Health Program (PHP)

Ms. Rivera reported that in the future, Erinn Downey will be providing the PHP Updates to the Board. The PHP is a Board sponsored program, authorized by statute to assist individuals who may be impaired due to the following: substance abuse, dependence, or psychiatric, psychological or behavioral health disorders. The PHP guides the rehabilitation of potentially impaired and impaired practitioners consistent with the needs of public safety. A PHP Memo has been uploaded to the file for your review containing the # of individuals in confidential monitoring. There are currently 50 licensees whose participation in the PHP is public. The Board has two PHP Monitors, CBI and GRI. The Board utilized four Board approved Assessors who perform PHP Assessments.

E. CHAIR'S REPORT

- Discussion regarding Board collaboration with physician stakeholders

Dr. Figge noted that the Board is not alone when it comes to issues coming before the legislature and that other organizations are willing to collaborate with the Board.

- Discussion regarding reports on PHP for Board meetings

Dr. Figge noted the FSMB webinar trainings which led to his suggestion of having a PHP report every month so that the Board is aware of what is going on.

- Discussion regarding aging physicians and physician use of marijuana

The Board discussed various issues regarding aging physicians and physicians using marijuana. The Board agreed that it can be difficult to capture and evaluate an aging physician's ability to safely practice and that things regarding licensure is a legislative issue. The Board agreed that these two topics need to be investigated further.

F. LEGAL ADVISOR'S REPORT

No report was provided.

G. DISCUSSION REGARDING DEBRIEFING ON BOARD PROCESSES

Board staff informed the Board of how the 411 is built but if there is a GLS update that may cause issues, or it randomly stops working it is helpful when Board members are reviewing materials and come across an issue they let staff know so that we can address it. Board staff further noted that when it comes to old cases, we are limited to what documents are available and how they were uploaded at that time.

H. APPROVAL OF MINUTES

- April 1, 2025 Regular Session, including Executive Session
- June 4, 2025 Regular Session, including Executive Session

Dr. Figge noted some corrections in the minutes. He and Dr. Farmer were recused in Dr. Monash's case and that the motion in the June 4th minutes was to grant the termination.

MOTION: Dr. Gillard moved to approve the April 1, 2025 Regular Session; including Executive Session and the June 4, 2025 Regular Session; including Executive Session.
SECOND: Dr. Bethancourt.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach.

The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

LEGAL MATTERS

I. DISCUSSION, CONSIDERATION AND POSSIBLE ACTION ON SETTLEMENT OFFER IN LIEU OF FORMAL HEARING

1. MD-25-0012A, LAURA HARRINGTON, M.D., LIC. #24671

Dr. Harrington and counsel Melissa Cuddington were present. Carrie Smith, AAG was present on behalf of the State. Lynette Evans, AAG was present as the Board's Independent Legal Advisor.

Ms. Cuddington requested executive session for confidential medical information.

Ms. Smith stated that she had no objection to the discussion of confidential documents in executive session.

Ms. Evans agreed and noted that the Board would need to limit that executive session just to those matters and then, if it goes beyond that, we'll have to come back to open session.

MOTION: Dr. Gillard moved for the Board to enter into Executive Session pursuant to A.R.S. § 32-431.03(A)(3) to obtain legal advice.

SECOND: Dr. Farmer.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach.

The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

The Board entered into Executive Session at 8:33 a.m.

The Board returned to Open Session at 8:42 a.m.

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

Dr. Harrington stated that regarding patient A, there is an exchange of text messages, and agreed that she did engage in reckless text messages with her. Dr. Harrington requested that the Board consider that the successful practice of psychiatry, and in particular psychotherapy, requires a unique manner of communication. Regarding patient B, he is a distinguished professor of psychiatry, holding tenured positions at Princeton University of Pennsylvania, and Johns Hopkins. He is definitively opposed to the disclosure of his psychiatric records to any third party, including the Board. Dr. Harrington stated that at no time did patient B provide her with any medication whatsoever. Dr. Harrington stated that she is receptive to the Board's suggestions about ways to improve her practice and her goal is to provide the best care possible to her patients. Dr. Harrington stated that she would fully comply with any Board recommendations.

Ms. Smith requested clarification on what the actual settlement proposal was for consideration.

Ms. Cuddington stated that the proposal is for a reprimand in conjunction with a monitoring agreement as stated in Respondent's Settlement Conference memorandum.

Ms. Smith stated that this case arose out of complaint regarding Respondent's interactions with patient A. Respondent, based on the investigative information, was offered an inactive with cause agreement which she declined, and for that reason the Board instituted a summary suspension. During the course of the Board's investigation, Patient B was identified, and Board Staff requested those records. To this date the Board still has not received the records, and it's for that reason that the staff position on this case has remained at revocation. There's no valid basis to continue to withhold those records, including the patient's objection. The patient's objection is immaterial to the Board's statutes. Ms. Smith read A.R.S. § 32-1451.01(D) that this section, and any other law making communications between a physician and the physician's patient privileged, does not apply to investigations or proceedings conducted pursuant to this chapter. Ms. Smith stated that the State will abide by whatever recommendation that the Board feels is most appropriate in this case, be it a continuation of the deadlines to a continued pause in the litigation process to allow the Respondent to obtain treatment or for the parties to negotiate a consent agreement. The State does request that any resolution of this case involve production of Patient B's records in full, so that the Board can adequately review the care provided. Ms. Smith stated that if the Respondent wants to continue to have a license with this Board, the Board needs to have a full understanding of her safety to practice medicine.

Ms. Cuddington stated that with regards to the records issue, the patient at issue has objected to the release of his records. While we understand the importance of delivering these records to the Board so that they can conduct their investigation, Dr. Harrington has been steadfast in protecting the patient's privacy. Ms. Cuddington noted that they have offered to produce a set of records that just redacts the psychotherapy notes and they can produce the general medical records with the medication that was prescribed. The patient is not consenting to release of the psychotherapy notes. Ms. Cuddington stated that they have no objection to producing those in that format. Ms. Cuddington stated that Dr. Harrington is ready and willing to comply with any recommendations, and requested that either the Board stay the deadlines for the hearing, or recommend the reprimand in conjunction with the monitoring agreement.

During deliberations, Dr. Gillard commented that this is an unusual case and that he would not be against the monitoring and the reprimand.

MOTION: Dr. Gillard moved for a Letter of Reprimand and Probation for a monitoring agreement.

Motion failed due to no second.

Dr. Figge commented that the investigation is not yet complete and is in favor of staying the referral to formal hearing and completing the process rather than issuing the reprimand.

In response to a Board member's question, Ms. Smith confirmed that a subpoena has been issued and the physician has not produced the records. At this time the staff cannot review the records and care since they have not been provided.

Dr. Farmer inquired about how the non-compliance is enforced.

Ms. Smith explained that a subpoena has been issued to the respondent, but she has not produced the records in response to the subpoena. The Board can't review the care she provided to this patient, because she's continued to refuse to produce the records in full. Ms. Smith informed the Board that they cannot subpoena the patient because the patient doesn't possess the records, the physician does.

In regard to the Board's legal rights to uphold the subpoena, Ms. Evans explained that the failure to comply with subpoena would be a violation of the Board's statutes, and that could be a basis for disciplinary action potentially.

Dr. Figge commented that the physician would be deemed unregulatable because of the lack of cooperation.

MOTION: Dr. Gillard moved to continue the stay of the referral to Formal Hearing requiring the physician to comply with the subpoena for the medical records (non-redacted) for patient B and provide a PHP treatment plan within 60 days. After 60 days, the Board will be updated on the progress of the case and can continue the stay or take any other action consistent with its authority.

SECOND: Dr. Bethancourt.

Ms. Rivera spoke against the submission of redacted records in terms of setting a precedent. The Board standard is anytime we open an investigation we request any and all records. We don't even accept redacted records from federal facilities, who will try to redact them. For regular physicians in the community we expect and request any and all records as part of an investigation, but these are confidential and would only be seen by the Board Members. Ms. Rivera explained that we did summarily suspend the license and at that point, unless the parties object, we are required to go to the formal hearing within 60 days. The reason why revocation was recommended is because of a lack of cooperation with the records, and we also had the unsafe to practice recommendation because the case is not complete. The only reason it is not complete is our investigation has been delayed, based on the failure to obtain those records. So even if we have patient A's records and they're required to be reviewed we also have to get patient B's case reviewed. It would make more sense to have both of them reviewed by the same OMC. Additionally, there's a treatment component of this that hasn't been completed yet, and the Board has no idea what those recommendations are yet to craft a final agreement, or any PHP parameters for monitoring at this point. Ms. Rivera opined that it is reasonable to have an update on the case in 60 days, so that we can know if there is movement on the records issue and if there is any recommendations coming out of treatment.

Dr. Farmer spoke in favor of the importance of the process being adhered to and the concern about precedents being set. Dr. Farmer opined that the Board needs to insist on having the Board's subpoena honored, and further opined that it becomes impossible to evaluate the standard of care in the cases if the Board does not have that. Regarding the treatment plan, Dr. Farmer stated that he is comfortable waiting for that and the Board needs to hold firm to the 60 timeline and that the legal process be complied with in that period of time.

Ms. Evans suggested that the Board obtain the parties' feedback regarding their agreement with the recommendation.

Ms. Cuddington stated that they agree.

Ms. Smith stated that she agrees, as long as they are clear the records sought are for patient B.

Dr. Artz spoke against the motion as it is pretty clear that the Board is not getting the records. The subpoena was issued and not responded to. Dr. Artz further opined that being a physician actively practicing there is an intimate relationship with patients, and it is not individual to psychiatrists. Dr. Beyer opined that the issue of treatment and PHP can be solved however the second issue is the physician's ability to be regulated. Dr. Beyer opined that the absolute refusal to submit the records is a sign that this physician cannot be regulated. There was no basis to withhold those records and the Board needs to review them.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Dr. Beyer, Dr. Farmer and Dr. Gillard. The following Board members voted against the motion: Dr. Artz and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn.

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

MOTION PASSED.

J. RESCIND REFERRAL TO FORMAL HEARING AND ACCEPT PROPOSED CONSENT AGREEMENT

1. MD-25-0130A, URSULA V. ROEDER, M.D., LIC. #16141

Dr. Roeder was not present. Dr. Farmer recused. Carrie Smith, AAG was present on behalf of the State. Lynette Evans, AAG was present as the Board's Independent Legal Advisor.

Ms. Smith informed the Board that this case was initiated, based on a report from respondent's employer that she had failed to report a reportable misdemeanor in a timely manner, and an investigation was opened based on that. During the course of the investigation Dr. Roeder became unresponsive to Board staff. As a result, her license was summarily suspended by this Board. Dr. Roeder did come to the hearing, and we were able to negotiate a consent agreement for surrender of her license, which is in front of the Board today. The State respectfully requested that the Board rescind the referral to formal hearing and accept the consent agreement for Surrender of Dr. Roeder's license.

MOTION: Dr. Gillard moved to rescind the referral to formal hearing and accept the signed consent agreement for Surrender of License.

SECOND: Dr. Beyer.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Gillard and Ms. Leach. The following Board member recused: Dr. Farmer. The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 7-yay, 0-nay, 0-abstain, 1-recuse, 2-absent.

MOTION PASSED.

2. MD-22-0977A, ERIK M. RAMNATH, M.D., LIC. #36037

Dr. Ramnath was not present. Counsel Flynn Carey was present on behalf of the physician. Seth Hargraves, AAG was present on behalf of the State. Lynette Evans, AAG was present as the Board's Independent Legal Advisor.

Mr. Hargraves informed the Board that this case was initiated after Dr. Ramnath self-reported that he had been charged with a felony. He entered into an interim consent agreement suspending the license pending the outcome of the case. There was a settlement conference before this Board where a resolution could not be reached and the matter was pending hearing. Before the Board there is a signed consent agreement for voluntary surrender. The State requested that the Board accept that in lieu of proceeding to hearing.

Mr. Carey stated that they request that the agreement be accepted.

MOTION: Dr. Bethancourt moved to rescind the referral to formal hearing and accept the signed consent agreement for Surrender of License.

SECOND: Dr. Gillard.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

3. MD-20-1037A, MD-23-0231A, MD-25-0133A, MONEIL M. PATEL, M.D., LIC. #44593
Dr. Patel and counsel was not present. Carrie Smith, AAG was present on behalf of the State. Lynette Evans, AAG was present as the Board's Independent Legal Advisor.

Ms. Smith informed the Board that Case #MD-20-1037A was initiated based on a complaint regarding respondent's controlled substance prescribing. A medical consultant for the Board reviewed the care and identified deviations from the standard of care. Respondent was offered an interim consent agreement for practice restriction prohibiting him from prescribing controlled substances pending the completion of the case. The next two cases were initiated based on reports from the Pharmacy Board that respondent was certifying patients for medical marijuana without querying the controlled substance prescription monitoring database as required by statute. Respondent requested a formal hearing and the case was transferred. The parties have negotiated a consent agreement for voluntary surrender of license, and the State requested that the Board rescind the referral to formal hearing and accept the proposed consent agreement for Surrender.

MOTION: Dr. Gillard moved to rescind the referral to formal hearing and accept the signed consent agreement for Surrender of License.

SECOND: Dr. Artz.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

4. MD-20-0004A, MD-21-0043A, MD-21-0201A, MD-21-0593A, MD-21-0716A, MICHAEL L. HAM, M.D., LIC. #26357

Dr. Ham was present with counsel Cynthia Patane. Seth Hargraves, AAG was present on behalf of the State. Lynette Evans, AAG was present as the Board's Independent Legal Advisor.

Mr. Hargraves stated that this case was before the Board last month for a Settlement Conference. At that meeting the Board was agreeable to Dr. Ham's settlement proposal, with the addition of adding a competency evaluation given the length of time he has been on a practice restriction. Before the Board is a consent agreement, laying out the terms that the Board agreed to at the last meeting. Mr. Hargraves requested that the Board accept the consent agreement and vacate the referral to hearing.

Ms. Patane agreed with Mr. Hargraves' statement.

MOTION: Dr. Gillard moved to rescind the referral to formal hearing and accept the signed consent agreement for a Letter of Reprimand and Probation with Practice Restriction. Respondent's current practice restriction shall remain in affect pending the successful completion of the Clinical Competency Evaluation as required by this Order. If the Evaluating Facility finds that Respondent is safe to practice without any additional recommended training, monitoring or education, Respondent may immediately apply to the Board to terminate this Practice Restriction. If the Evaluating Facility finds that Respondent is safe to return to the practice of medicine with recommendations for training, monitoring, or education, Respondent may request modification of this Practice Restriction to facilitate Respondent's

compliance with those recommendations as approved by Board staff. Prior to any Board consideration for termination or modification of this Practice Restriction, Respondent must submit a written request to the Board. Respondent shall within 2 months of the effective date of this Order obtain no less than 10 hours of Category I Continuing Medical Education (“CME”) in an intensive, in-person/virtual course in Ethics, and successfully complete the Medical Record Keeping Seminar offered by the Center for Personalized Education for Physicians (“CPEP”) (10.5 credits). Upon completion of the CME and CPEP, Respondent shall provide Board staff with satisfactory proof of attendance and successful completion. The CME hours shall be in addition to the hours required for the biennial renewal of medical licensure. The Probation shall not terminate except upon affirmative request of Respondent and approval by the Board.

SECOND: Dr. Bethancourt.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

K. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING HEARING ON APPEAL OF DEFICIENCY NOTICE

1. MD-25-0680A, ADAM D. LITWIN, M.D., LIC. # N/A

Dr. Litwin was present. Carrie Smith, AAG was present on behalf of the State. Lynette Evans, AAG was present as the Board’s Independent Legal Advisor.

In opening, Dr. Litwin stated that he is challenging the determination that he did not provide adequate proof of his non-selection to residency for renewal of his medical graduate transitional training permit. He is required to apply for Residency every year for three years. This issue is that this year he only applied to match and get into residency

In opening, Ms. Smith stated that she had Joseph Nardo, the Board’s licensing manager, present as the State’s witness. Ms. Smith informed the Board that the deficiency notice in this case was issued based on A.R.S. § 32-1432.04(b) which requires the permittee in the year preceding an application for renewal to submit complete and valid applications to at least three accredited primary care internship and residency programs and is not selected for internship or residency positions. The statute states that the permittee shall provide the Board with written documentation of the internship or residency program applications and the non-selections. In this case a deficiency notice was issued because the licensee submitted evidence of application to three programs. However, he has not, according to the Board standards, provided written documentation with regard to the non-selections.

During questioning, Dr. Litwin testified that he did apply to three residency positions and that he was able to obtain one program coordinator to send him a rejection email and the other two he is submitting that there’s no deficiency via the Thalamus platform, which he submitted as evidence. Dr. Litwin stated that he satisfied that requirement.

Mr. Nardo confirmed that he satisfied the requirement to provide proof of 60 credits of CME.

During questioning, Mr. Nardo testified regarding the permit renewal process normally works. Typically, non-selections come through the NRMP, and we match that with the receipt that they provide through the ERIS. If the program will send us an email directly, staff will also accept that. Mr. Nardo informed the Board how staff obtain information from the State’s exhibits page two and three. Mr. Nardo confirmed that none of these documents were submitted for this license application. Mr. Nardo confirmed that if a deficiency is not met the renewal application would be denied. Mr. Nardo noted that the only other option at this point would be to submit an initial transitional training permit and then meet the requirements of that. Mr. Nardo stated that there is a statutory requirement that a permittee can only hold a transitional training permit for an aggregate time period of more than 36

months. Mr. Nardo confirmed the rejection letter that Dr. Litwin referred to in his testimony would qualify him for an initial application.

Mr. Litwin referenced the Thalamus document illustrates that he did not match.

Ms. Smith requested that the Board accept Exhibit 1, the licensing file and Dr. Litwin's board file MD-25-0680A into the record.

Dr. Figge accepted the exhibits into the record.

Dr. Gillard inquired if the Board has a waiver option.

Ms. Smith stated that it is the State's position that that the deficiency has been not been met and it is also the State's position that there is no waiver process available in this statute.

Dr. Figge inquired if the physician needs to reapply since his renewal timeframe has expired.

Ms. Smith stated that it is the State's position would be that the timely request for a deficiency hearing would waive would stay those deadlines.

Ms. Evans agreed that generally the idea is that if there is a timely application for renewal and that there's a pending matter then that will stay an expiration.

In closing, Ms. Smith stated that the evidence and testimony you heard today demonstrates that unfortunately, Dr. Litwin did not provide documentary proof of the non-selection as required by statute. However, as you heard from Mr. Nardo, if the Board denies his application for renewal, based on failure to meet the deficiency requirements of the statute, he can immediately reapply for a new permit and the non-selection that he referred to in his testimony would likely meet the requirement for a new permit.

In closing, Dr. Litwin requested that the Board look at the Thalamus as proof.

Ms. Evans confirmed that the physician had 60 days from the date of the notice letter to address the deficiency, which has passed.

Dr. Beyer opined that the deficiency has not been dealt with.

MOTION: Dr. Beyer moved that the applicant has failed to demonstrate by a preponderance of the evidence that he has sufficiently addressed and cured the deficiency and moved that the Board affirm the deficiency finding and direct Applicant to cure the deficiency within the timeframe set forth in the April 14, 2016 Notice of Deficiency.

SECOND: Dr. Artz.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

L. MOTION FOR REHEARING/REVIEW (Formal Hearing)

1. MD-22-1166A, ATILA MADY, M.D., LIC. #24825

Dr. Mady was present. Carrie Smith, AAG was present on behalf of the State. Lynette Evans, AAG was present as the Board's Independent Legal Advisor.

Dr. Mady stated that he did not request the hearing and that the decision was made by the Attorney General's representative. Dr. Mady stated that he handed in some information to the Office of Administrative Hearings, based on the fact that I believe that a kangaroo court was performed. Dr. Mady also stated that the information that was decided in that court

and that ruling was inappropriate. It excluded evidence before the Board and in possession of the Board from the outset of the case that documentation of malfeasance was excluded. The fact that the complainant had pursued the complaint with the intent of harassment and vengeance, was excluded. On June the 6th that final ruling started tolling a clock which required him to file for a judicial review, which he did. Dr. Mady stated that he was also required to notify the office of administrative hearings of this request for Judicial review because the Office of Administrative Hearings has to transfer the record for the regular courts, for the review of the rulings and the hearing in the trial court. Dr. Mady stated that at that point he was notified by Ms. Robles that somehow it was deemed that he was requesting a review, and he very clearly stated that he did not. Dr. Mady stated that this matter transitioning to judicial review, according to statute, is the next step. Dr. Mady further noted that he made the Board aware that a number of irregularities have been performed throughout this case, which have been ignored. Dr. Mady stated that he will not withdraw the judicial review request unless the Board acknowledges the irregularities from the very beginning of the case.

Ms. Smith stated that respondent has received due process. In this case, due process is the right to be heard at a reasonable time and a reasonable manner, and that has occurred in this case over and over and over again. Respondent was asked to provide a narrative regarding his care of the patient in question. In this case the Board was authorized by statute to initiate an investigation based on the allegations of patient harm in the complaint. The Board proceeded through its normal process with this investigation, and the administrative hearing process was also followed, and Respondent was provided with due process. With regard to that hearing, the decision in this case is supported by the evidence. It's the State's position that revocation is the appropriate outcome. Regarding the timeliness issue that was raised, Ms. Smith noted that the judicial review action is not in front of the Board today, however, the Board's rules and the Administrative Procedures Act both require that in order for a judicial review action to be filed, a party must exhaust their administrative remedies. At the time he filed the JRA, Dr. Mady had not exhausted his administrative remedies. That is what we're here today, to provide the opportunity for him to seek rehearing or review in front of this agency prior to the case going to Superior Court in the event that a rehearing or review is not ordered.

Dr. Gillard noted that this Board is bound by certain statutes, however, this Board can be overruled by the Superior Court. Dr. Gillard inquired if a denial has to be for a rehearing for it to move on to the Superior Court.

Ms. Evans confirmed that in order to move forward to the next steps, to be successful with an appeal, you would have to exhaust your administrative remedies, which includes proceeding with a rehearing or review in front of the Board Then a determination on that request. It does allow for an appeal process, a full evidentiary hearing at the Superior Court, which would have an authority over the Board.

Dr. Mady stated that it is his understanding that the initial judgment that was issued by this Board does constitute a final order. Once a final order is issued, the person is allowed to appeal for the Judicial Review and going back and trying to cancel the judicial review is contrary to statute. Dr. Mady stated that he submitted that application within the statutory time frame, after this Board had, as a final step, adopted the ruling. This particular review was not requested by himself, and is not mandatory, and, according to statute, is not required. Dr. Mady stated he had exhausted my remedies with the Board's final ruling.

Ms. Smith stated that the Board did issue on June 6th Findings of Fact, Conclusions of Law, and in Order for Revocation of respondent's license. The last page of that document contains a notification to the respondent of his right to seek review pursuant to the Board's rules and Statutes. A.A.C. R4-16-103 notes that the party is required to exhaust his administrative remedies by seeking review or rehearing in front of this Board. He may not be seeking it, but the Board is providing him with that due process at this time, and it is appropriate for the Board to do so.

Ms. Evans confirmed that a denial is required to go forward to Superior Court.

MOTION: Dr. Farmer moved to deny the motion for rehearing or review.

SECOND: Dr. Beyer.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach.

The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

M. MOTION FOR REHEARING/REVIEW (Formal Interview)

1. MD-18-0884B, OMAR ABDUL-HADI, M.D., LIC. #49298

Dr. Abdul-Hadi was present with counsel Cody Hall.

Dr. Abdul-Hadi requested that the Board reconsider the outcome of this case. Dr. Abdul-Hadi argued that clinical evidence and consistency were not fully weighed, which go directly to the fairness and legal basis of the final decision. Dr. Abdul-Hadi stated that he submitted expert reports from multiple board-certified orthopedic surgeons, including Dr. Spitzer, Dr. Parvizi, and Dr. Dunbar, all of whom confirmed that his management of JK met the standard of care. The Board's own consultant agreed that hardware retention was reasonable and that the course of care was appropriate. Dr. Abdul-Hadi argued that this does not rise to the level of clear and convincing evidence required on the A.R.S. § 32-1451.04, to impose disciplinary action. Second, it's important to know that he inherited JK from another orthopedic surgeon who performed surgery on what was clearly a non-displaced patella fracture, a type of fracture that does not require surgical intervention. JK was a frail patient with a severely compromised ejection fraction. Dr. Abdul-Hadi stated that he stepped in post-operatively and worked to stabilize him as best he could. On January 12th he saw a patient who was improving and stable. He and the PA documented a clear plan for continued monitoring. The hospitalist and the infectious disease specialist. Both agreed at that time that he was stable, there were no signs that pointed to impending deterioration. Dr. Abdul-Hadi noted that he was the only provider in this case to receive a Letter of Reprimand. Other providers, including physicians and physician assistants, received either advisory letters or no disciplinary action, even when facing similar or nearly identical allegations.

Mr. Hall argued that there are grounds for rehearing or review given the excessive penalty, error in the rejection of evidence, the finding is not justified by the evidence and it's contrary to law. For seven or more different providers, the consistent response from all of the other boards has been a non-disciplinary outcome. The allegations against Dr. Abdul-Hadi are very similar to the allegations against at least one of the other doctors and the PAs. Mr. Hall requested that the Board review its decision in this matter, and to issue an advisory letter consistent with the evidence.

During deliberation, Dr. Gillard commented that the patient was quite an advanced age and presented to an emergency department with a sodium of. The patient had a cardiomyopathy and prior also had congestive heart failure. Dr. Gillard note that this was not a unanimous vote. Dr. Beyer opined that he is not sure that there's a compelling argument that the hearing was in any way tainted. Dr. Beyer further commented that the interview took into account all the care that the patient received, and that the physician had provided. Dr. Beyer opined that he does not find a compelling basis for this to be reheard. Ms. Leach opined that the penalty was excessive.

MOTION: Ms. Leach moved to grant the motion for review pursuant to A.A.C. R4-16-103(D)(5).

SECOND: Dr. Gillard

MOTION: Dr. Figge moved for the Board to enter into Executive Session pursuant to A.R.S. § 32-431.03(A)(3) to obtain legal advice.

SECOND: Dr. Bethancourt.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn. VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent. MOTION PASSED.

The Board entered into Executive Session at 10:45 a.m.
The Board returned to Open Session at 11:00 a.m.
No legal action was taken by the Board during Executive Session.

Dr. Farmer spoke in favor of the motion given the penalties to the other practitioners provide context and given the complexities of the case.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn. VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent. MOTION PASSED.

MOTION: Ms. Leach moved to rescind the Board's Order for Letter of Reprimand and issue an Advisory Letter for failing to document monitoring of a patient with a post-operative septic knee, failure to appropriately adjust the treatment plan for a patient experiencing continuous post-operative complications, inadequate medical records, and inadequate supervision of a physician assistant. 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. Gillard.

Dr. Gillard noted that a mitigating factor in the original SIRC report was that a lack of continuity between multiple orthopedic surgeons may have played a role in the apparent lack of acceptance of responsibility or interest in the patient's well-being. There were also comorbidities to begin with. Dr. Beyer spoke against the motion and opined that when we heard the case there was a consensus on the Conclusions of Law and that the Board felt that there was a violation of A.R.S. §32-1401(27)(e), (r) and (jj) and without rehearing dropping down to just an (e) violation for the Advisory Letter is inappropriate. Dr. Farmer commented regarding the (jj) violation, this was a complicated case and there were issues with various people not being coordinated and consideration of the (jj) violation would be appropriate. Dr. Figge commented that potential misrepresentation of the timing of call to the public unduly influencing the Board was not the case. Dr. Figge also disagreed with the statement that the Board did not consider respondent's experts. Dr. Figge spoke against the motion and opined that everything was done correctly. It was not a unanimous vote but at the time there was good and sufficient argument as to what a Letter of Reprimand was given. Dr. Bethancourt agreed that he did not think they were out of line but he was a little bothered by the seven other providers not being reprimanded. Dr. Farmer spoke in favor of the motion and opined that the physician has learned a lot from the malpractice case and this whole experience.

VOTE: The following Board members voted in favor of the motion: Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members voted against the motion: Dr. Figge and Dr. Bethancourt. The following Board members were absent: Ms. Bain and Dr. Krahn. VOTE: 6-yay, 2-nay, 0-abstain, 0-recuse, 2-absent. MOTION PASSED.

CONSENT AGENDA

N. CASES RECOMMENDED FOR DISMISSAL

MOTION: Dr. Bethancourt moved to item numbers 1 and 2.

SECOND: Dr. Artz.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach.

The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

1. MD-24-0223A, JOSHUA B. HVIDDING, M.D., LIC. #60212

RESOLUTION: Dismiss.

2. MD-24-0759A, EE-LYNN LOI, M.D., LIC. #63278

Dr. Loi addressed the Board during the Public Statements portion of the meeting.

RESOLUTION: Dismiss.

O. CASES RECOMMENDED FOR ADVISORY LETTERS

MOTION: Dr. Beyer moved to issue an Advisory Letter in item numbers 1, 3-6 and 8.

SECOND: Dr. Bethancourt.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach.

The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

1. MD-23-0624A, DARYN N. MCCLURE, M.D., LIC. #31048

Counsel Cory Tyszka addressed the Board during the Public Statements portion of the meeting on behalf of the physician.

RESOLUTION: Advisory Letter for non-compliance with CSPMP mandatory use requirements. While the licensee has demonstrated substantial compliance through rehabilitation or remediation that has mitigated the need for disciplinary action, the board believes that repetition of the activities that led to the investigation may result in further board action against the licensee.

2. MD-22-1020A, DAVID A. CAMARATA, M.D., LIC. #28451

Counsel Callie Maxwell addressed the Board during the Public Statements portion of the meeting on behalf of the physician.

Dr. Gillard the question was whether or not the prescribing of a non-steroidal, anti-inflammatory drug caused the GI bleeding and death. The autopsy showed that there were only gastric erosions, no sign of bleeding, and that the result was a cardiac death. Dr. Gillard opined that the physician was not at fault or responsible for the death.

MOTION: Dr. Gillard moved to dismiss.

SECOND: Dr. Bethancourt.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach.

The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

3. MD-24-0839A, SUNDEEP S. KANG, M.D., LIC. #44022

RESOLUTION: Advisory Letter for failing to timely report a misdemeanor charge. 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.

4. MD-24-0450A, JOY B. PESKIN, M.D., LIC. #19520

Kathleen Lambert addressed the Board during the Public Statements portion of the meeting.

Dr. Gillard opined that nothing further needs to be done in this matter.

RESOLUTION: Advisory Letter for a DUI incident resulting in a motor vehicle accident. 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.

5. MD-23-0623A, MOHAMMAD GOLPARIAN, M.D., LIC. #32921

RESOLUTION: Advisory Letter for non-compliance with CSPMP mandatory use requirements. While the licensee has demonstrated substantial compliance through rehabilitation or remediation that has mitigated the need for disciplinary action, the board believes that repetition of the activities that led to the investigation may result in further board action against the licensee.

6. MD-24-0973A, RANDALL O. CRAFT, M.D., LIC. #33325

RESOLUTION: Advisory Letter for failing to obtain adequate informed consent 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.

7. MD-24-0973B, MATTHEW H. ANDERSEN, M.D., LIC. #59223

Dr. Gillard noted that there was a complaint against the surgeon and even though they're working together, this physician is an anesthesiologist. It appears that this physician is being required to explain the risks of the surgery and not the risk of the anesthesia. Dr. Gillard opined that the anesthesiologist is not responsible for the issues listed in the complaint.

MOTION: Dr. Gillard moved to dismiss.

SECOND: Dr. Bethancourt.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

8. MD-24-0982A, BRADLEY R. NICOL, M.D., LIC. #30127

RESOLUTION: Advisory Letter for failing to timely diagnose a post-operative complication. 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.

P. CASES RECOMMENDED FOR ADVISORY LETTERS WITH NON-DISCIPLINARY CONTINUING MEDICAL EDUCATION ORDERS

1. MD-24-0322A, MARESSA M. ALEJANDRO-REYES, M.D., LIC. #43530

Counsel Callie Maxwell addressed the Board during the Public Statements portion of the meeting on behalf of the physician.

Dr. Bethancourt commented that the amount of lab testing and not knowing what a CBC is seemed very unusual. Dr. Bethancourt spoken in favor of the recommendation of an Advisory Letter with CME.

MOTION: Dr. Bethancourt moved to issue an Advisory Letter and Order for Non-Disciplinary CME for inappropriately recommending semaglutide injections (GLP-1) without clinical justification, inadequate supervision of a medical assistant, and for 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 6 hours of Board staff pre-approved Category I CME in medical recordkeeping. The CME hours shall be in addition to the hours required for license renewal.

SECOND: Ms. Dorrell.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach.

The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

Q. REVIEW OF EXECUTIVE DIRECTOR DISMISSALS

MOTION: Dr. Beyer moved to uphold the Executive Director Dismissal in item numbers 1 and 2.

SECOND: Dr. Gillard.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach.

The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

1. MD-24-0594A, RUSSELL J. BARTELS, M.D., LIC. #30114
Counsel Cody Hall addressed the Board during the Public Statements portion of the meeting on behalf of the physician.

RESOLUTION: Dismissal upheld.

2. MD-24-1157A, MICHAEL CAMPION, M.D., LIC. #16283
Counsel Cody Hall addressed the Board during the Public Statements portion of the meeting on behalf of the physician. D.M. addressed the Board during the Public Statements portion of the meeting.

RESOLUTION: Dismissal upheld.

R. PROPOSED CONSENT AGREEMENTS (Disciplinary)

MOTION: Dr. Bethancourt moved to accept the consent agreement in item numbers 1-5.

SECOND: Dr. Artz.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach.

The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

1. MD-19-1114A, JOSE D. MARTINEZ GONZALEZ, M.D., LIC. #54734

RESOLUTION: Consent Agreement for a Letter of Reprimand.

2. MD-24-0843A, KATHY C. CORNELIUS, M.D., LIC. #66301

RESOLUTION: Consent Agreement for a Letter of Reprimand.

3. MD-25-0750A, DOUGLAS P. NELSON, M.D., LIC. #24103

RESOLUTION: Consent Agreement for Surrender of License.

4. MD-24-0159A, JAMIE S. SCHWARTZ, M.D., LIC. #63759

RESOLUTION: Consent Agreement for a Letter of Reprimand.

5. MD-22-0105A, EDGARDO D. ZAVALA-ALARCON, M.D., LIC. #27016

RESOLUTION: Consent Agreement for a Letter of Reprimand and Probation. Respondent shall within 6 months of the effective date of this Order no less than 15 hours of Board Staff pre-approved Category I CME in an intensive, in-person/virtual course in ethics. Upon completion of the CME, Respondent shall provide Board staff with satisfactory proof of attendance. The CME hours shall be in addition to the hours required for the biennial renewal of medical licensure. The Probation shall terminate upon Respondent's proof of successful completion of the CME.

S. LICENSE APPLICATIONS

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

MOTION: Dr. Gillard moved to grant the license in item numbers 1 and 2.

SECOND: Dr. Bethancourt.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach.

The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

1. MD-24-1006A, SEAN T. O'MARA, M.D., LIC. #N/A

RESOLUTION: License granted.

2. MD-25-0396A, HAAD A. MAHMOOD, M.D., LIC. #N/A

RESOLUTION: License granted.

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

1. THIS CASE HAS BEEN PULLED FROM THE AGENDA.

iii. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING APPLICANT'S REQUEST FOR WAIVER OF DOCUMENTATION REQUIREMENT

1. SRIKANTH PRAYAGA, M.D., LIC. # N/A

MOTION: Dr. Farmer moved to grant the waiver request and grant the license.

SECOND: Dr. Artz.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

iv. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING LICENSURE BY ENDORSEMENT PURSUANT TO A.R.S. § 32-1426(B) AND R4-16-201(F), OR TAKE OTHER ACTION

1. JAMES MIRABILE, M.D., LIC. # N/A

Dr. Gillard noted that the physician has multiple state licenses and no board action. His boards expired last years and he has 30 years of practice.

MOTION: Dr. Gillard moved to grant licensure by endorsement.

SECOND: Dr. Bethancourt.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn.
VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.
MOTION PASSED.

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

OTHER BUSINESS

T. REQUEST FOR TERMINATION OF BOARD ORDER

1. MD-23-0376A, ARTHUR T. MAYDELL, M.D., LIC. #57380

Dr. Gillard noted that this was a five-year probation but the initial evaluation was done by Dr. Faria, she had suggested two years of PHP. Dr. Keen opined that the physician has been compliance and achieved maximum benefit. Dr. Lott is also in favor of termination.

MOTION: Dr. Gillard moved to grant the request for termination of the June 28, 2023 Board Order.

SECOND: Dr. Artz.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

2. MD-20-0467A, DAVID M. LEDER, M.D., LIC. #54873

MOTION: Dr. Gillard moved to grant the request for termination of the April 8, 2021 Board Order.

SECOND: Dr. Bethancourt.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

3. MD-23-0449A, GREGORY A. ROBERTSON, M.D., LIC. #17506

Dr. Gillard noted that the physician has fulfilled the requirements of the Order.

MOTION: Dr. Gillard moved to grant the request for termination of the May 8, 2025 Board Order.

SECOND: Ms. Dorrell.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

4. MD-93-1096, ROBERT M. KERSHNER, M.D., LIC. #14390

Dr. Gillard noted that the physician no longer practices in Arizona.

MOTION: Dr. Gillard moved to grant the request for termination of the October 19, 1998 Board Order.

SECOND: Ms. Dorrell.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach. The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

U. GENERAL CALL TO THE PUBLIC

No individuals addressed the Board during the General Call to the Public.

V. ADJOURNMENT

MOTION: Dr. Bethancourt moved for adjournment.

SECOND: Dr. Gillard.

VOTE: The following Board members voted in favor of the motion: Dr. Figge, Dr. Bethancourt, Ms. Dorrell, Dr. Artz, Dr. Beyer, Dr. Farmer, Dr. Gillard and Ms. Leach.

The following Board members were absent: Ms. Bain and Dr. Krahn.

VOTE: 8-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

The meeting adjourned at 11:56 a.m.



Raquel Rivera

Raquel Rivera, Executive Director