



Arizona Regulatory Board of Physician Assistants

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FINAL MINUTES FOR REGULAR SESSION MEETING Held on Wednesday, May 29, 2024 1740 W. Adams St., Board Room A, Phoenix, AZ 85007

Board Members

Susan Reina, P.A.-C, Chair
John J. Shaff, PA-C, D.F.A.A.P.A., Vice-Chair
Levente G. Batizy, D.O.
David J. Bennett, D.O.
Kendra Clark, P.A.-C
Kevin K. Dang, Pharm D.
Michelle DiBaise, D.H.S.c., P.A.-C., D.F.A.A.P.A.
Shiva K. Y. Gosi, M.D., M.P.H., F.A.A.F.P., C.P.E.
Amanda Graham, P.A.
Beth E. Zoneraich

GENERAL BUSINESS

A. CALL TO ORDER

Vice-Chair Shaff called the meeting to order at 10:03 a.m.

B. ROLL CALL

The following Board members participated in the meeting: Vice-Chair Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham and Ms. Zoneraich.

The following Board members were absent: Chair Reina, Dr. Bennett, Dr. Dang and Dr. Gosi.

ALSO PRESENT

The following Board staff were present: Patricia McSorley, Executive Director; Raque Rivera, Interim Deputy Director; Nicole Samaradellis, Interim Investigations Manager; Joseph McClain, M.D., Chief Medical Consultant and Michelle Robles, Board Operations Manager. Carrie Smith, Assistant Attorney General ("AAG") was also present.

C. CALL TO THE PUBLIC

Individuals who addressed the Board during the Call to the Public appear beneath the matter(s) referenced.

D. REVIEW, DISCUSSION, AND POSSIBLE ACTION REGARDING EXECUTIVE DIRECTOR'S REPORT

- Update on the Petition by the Arizona State Association of Assistant Physicians to Invalidate the Rules for Collaborative Practice Pending Before the Governor's Regulatory Review Council

Christy Hall addressed the Board during the Public Statements portion of the meeting.

Ms. McSorley informed the Board that the deadline for the written submission is June 13, 2024 and there will be a hearing before the Governor's Review Council. Ms. McSorley confirmed that she will consult with the Chair and Vice-Chair prior to her finalized presentation.

- Review, Consideration and Possible Action Re: Draft Response to Governor's Request for Standardized Processes or Rubrics for Discipline and the Reporting of Suspected Abuse, Neglect or Exploitation to Law Enforcement

Ms. McSorley informed the Board that there are two draft policies for review. The Board is required to submit a policy regarding disciplinary actions and a policy for reporting abuse and neglect to law enforcement. Ms. McSorley noted that this process is already being done but will now be in a written policy.

MOTION: PA Shaff moved to approve the Draft Response to Governor's Request for Standardized Processes or Rubrics for Discipline and the Reporting of Suspected Abuse, Neglect or Exploitation to Law Enforcement.

SECOND: PA Graham.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

- Discussion Regarding Conflict of Interest Forms and Online Board Member Training

Ms. McSorley informed the Board of the Conflict of Interest requirements.

E. REVIEW, DISCUSSION AND POSSIBLE ACTION REGARDING CHAIR'S REPORT

No report was given.

F. REVIEW DISCUSSION AND POSSIBLE ACTION REGARDING LEGAL ADVISOR'S REPORT

- Update on *Pierre-Louis v. Arizona Regulator Board of Physician Assistants*, LC2024-000126
- Update on *Gervais v. Arizona Regulator Board of Physician Assistants*, LC2024-000127

Ms. Campbell reported that these cases are relatively new and that there has been no ruling on the motion to stay. Ms. Campbell noted that there will be more information available after tomorrow's scheduled arguments.

G. APPROVAL OF MINUTES

- February 28, 2024 Regular Session; including Executive Session

MOTION: Dr. Batizy moved to approve the February 28, 2024, Regular Session meeting; including Executive Session.

SECOND: PA Graham.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

LEGAL MATTERS

H. FORMAL INTERVIEWS

1. PA-23-0052A, JULIA NIETO, P.A., LIC. #6451
PA Nieto was present with counsel Melissa Cuddington.

Board staff summarized on June 5, 2023, the Board was notified of a Malpractice Settlement made on behalf of PA Nieto. The allegations were failure to diagnose acute coronary syndrome and failure to transfer the 55-year-old patient to the ER in August of 2019, with subsequent heart attack and heart transplant. JB was a 55-year-old male who had established care with a different provider at Clinica La Familia on August 1, 2019. He

reported a history of ulcers and had recently undergone an EGD showing a small hiatal hernia and GERD. He had been intolerant of a couple of PPIs and Zantac and was on Nexium with symptom improvement. JB also c/o a sore throat and reported smoking 1 1/2 pks cigarettes per day. Labs were ordered and Nexium was continued. On August 3, 2019, JB was first seen by PA Nieto for an ingrown left hyperkeratotic great toenail. He continued to have a sore throat and requested a GI referral. Additional medical history was documented including Thalassemia, hearing loss and a deviated septum. JB was referred to Podiatry and a GI provider. JB returned on August 9, 2019 for lab results. He had seen podiatry and had his ingrown toenail removed. He continued to complain of sore throat. Erythema was noted to the posterior oropharynx, and Azithromycin was prescribed. Leukocytosis was noted on lab review. JB was seen again by PA Nieto on August 28, 2019. He presented with a complaint of chest pain which had started that day, with burning in the chest upon awakening. He took Pantoprazole, but the pain persisted at work and worsened after eating, with inability to walk due to the pain. JB also complained of left upper quadrant abdominal pain and some mild left arm discomfort. He had seen GI and reported that the GI doctor was concerned about pancreatitis. Normal exam findings were documented. An EKG showed sinus bradycardia and PA Nieto noted no ST elevation or depression. JB was given specific ED precautions. Pantoprazole was continued and twice a day Zantac was added with reflux precautions advised. On September 5, 2019, JB was seen by PA Nieto for shortness of breath, a burning sensation to his chest and difficulty breathing that developed after being seen in the office the prior week. JB had stopped Pantoprazole and Ranitidine after developing a burning sensation to the tongue. He described his chest pain as tightness and burning and reported night sweats. On exam, JB was noted to be in moderate acute distress and was unable to speak in complete sentences. The rest of the documented exam was within normal levels. Further evaluation in the ED was recommended due to respiratory distress, with offer of EMS transport. JB declined and stated he would go by private vehicle. JB was also advised to stop his medications. Later that day, JB presented to Chandler Regional Medical Center with chest pain and shortness of breath. His EKG showed ST elevation in anterior, lateral and inferior leads with q waves in multiple leads. An echo showed an ejection fraction of 15% with akinesis to the anteroseptal and lateral areas. JB was admitted to the ICU, and his presentation was noted to be consistent with a myocardial infarction which had occurred several days earlier leading to chronic heart failure. JB had a complicated hospital course with bradycardia requiring atropine and pacing and an episode of VTach required synchronized cardioversion and antiarrhythmics. A cardiac cath showed 90% LAD stenosis and multiple stents were placed. JB was subsequently treated for cardiogenic shock and VTach and was transferred to St. Joseph's for possible Impella or LVAD support. He was treated with diuresis and inotropic therapy (milrinone) and discharged September 18, 2019. JB was readmitted in cardiogenic shock on September 28th and was started on cardiac resynchronization therapy (CRT-D) and underwent LVAD. After a long and complicated hospital course, JB was discharged on October 24, 2019. The Board's Medical Consultant ("MC") stated that PA Nieto deviated from the standard of care by not recommending and documenting the recommendation that the patient seek further evaluation in the ED on August 28th, 2019.

PA Nieto provided an opening statement to the Board where she summarized her care to the patient that resulted in this case. PA Nieto explained that she has recommended that he seek a higher level of care at an ED and offered EMS transportation, which the patient declined. PA Nieto opined that she did not fall below the standard of care. PA Nieto acknowledged that she failed to document her specific concerns and recommendations. PA Nieto informed the Board that she has learned the importance of documenting each precaution and clinical care provided as well as having the patient sign an AMA form. PA Nieto noted that she has completed CME on risk management and CME on requirement of acute coronary syndrome.

During questioning, PA Nieto explained that she did not have a laboratory available and that the patient would benefit from labs being done in an ED. She explained that if she were to order the labs the results wouldn't be available the same day whereas in the ED

results can be expedited and received in a matter of hours. PA Nieto informed the Board of the conversation she had with the patient regarding her concerns. PA Nieto stated that on September 5th she recommended that the patient seek care from an ED urgently and that the patient initially declined to go but then elected to go via personal vehicle. PA Nieto stated that she understands the importance of detailed record keeping, chart notations and correctly and effectively expressing medical concerns with patients. PA Nieto informed the Board that she has put those procedures into practice which include having patients sign an AMA form when medical recommendations are declined. PA Nieto also expressed the importance of using more direct language when making recommendations. PA Nieto explained that upon a patient's initial visit to her clinic they are given a form to fill out regarding family medical history. PA Nieto explained that she did not use the term heart attack because not all of the patient's symptoms were consistent with a heart attack and she did not want to misdiagnose the patient and that is why he recommended that he go to the ED. PA Nieto stated that she understands that since she did not specifically stated that he was having a heart attack the patient did not fully understand her concerns and urgency.

Dr. Batizy stated that given the patient's chest pain, a practitioner should assume that the patient is experiencing a heart attack until proven otherwise.

PA Nieto agreed that given the chest pain, she should have assumed it was a heart attack. PA Nieto further acknowledged that she did not document the patient challenging demeanor and refusal to go to the ED. PA Nieto confirmed that during her malpractice trial, she confirmed that she had a medical professional state that she met the standard of care.

PA Shaff commented that if it is not written down then it did not happen and stressed the importance of detailed documentation including referrals and conversations.

Ms. Cuddington provided a closing statement to the Board and noted that a public discipline would be a detriment to her career. Ms. Cuddington stated that there was an expressed referral to the ED during the patient's second visit and although it was not documented there was one on the first visit as well. PA Nieto has already completed the CME's as recommended and requested a non-disciplinary order.

MOTION: Dr. DiBaise moved for a finding of unprofessional conduct in violation of A.R.S. § 32-2501(20)(j) as stated by SIRC.

SECOND: PA Graham.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

MOTION: Dr. DiBaise moved to issue an Advisory Letter for failing to refer and document a discussion for transfer to a higher level of care for symptoms of acute coronary syndrome. 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.

SECOND: Ms. Zoneraich.

Dr. DiBaise opined that the documentation issue was a bigger concern.

Ms. Smith noted that the physician was not noticed for the documentation violation.

PA Clark opined that PA Nieto did refer the patient to the ED but that it was not documented.

VOTE: The following Board members voted in favor of the motion: Ms. Zoneraich. The following Board members voted against the motion: PA Shaff, Dr. Batizy, PA

Clark, Dr. DiBaise and PA Graham. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 1-yay, 5-nay, 0-abstain, 0-recuse, 4-absent.

MOTION FAILED.

Ms. Smith informed the Board that if they wish to issue an advisory letter for documentation then they would need to rescind the vote on the A.R.S. § 32-2501(20)(j) violation and to refer the case back for further investigation to re-notice the physician assistant for the new violation.

MOTION: Dr. Batizy moved for a draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand.

Dr. Batizy acknowledged the completed CME which remediates the need for Probation.

MOTION FAILED DUE TO NO SECOND.

Ms. Cuddington waived the notice requirement regarding the documentation violation on behalf of PA Nieto.

MOTION: PA Shaff moved to rescind the motion for a finding of unprofessional conduct in violation of A.R.S. § 32-2501(20)(j) as stated by SIRC.

SECOND: PA Graham.

VOTE: The following Board members voted in favor of the motion: PA Shaff, PA Clark, Dr. DiBaise, PA Graham. The following Board members voted against the motion: Dr. Batizy and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 4-yay, 2-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

MOTION: Dr. DiBaise moved for a finding of unprofessional conduct in violation of A.R.S. § 32-2501(20)(p).

SECOND: PA Shaff.

VOTE: The following Board members voted in favor of the motion: PA Shaff, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board member abstained: Dr. Batizy. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 5-yay, 0-nay, 1-abstain, 0-recuse, 4-absent.

MOTION PASSED.

MOTION: Dr. DiBaise moved to issue an Advisory Letter for failing to document a discussion regarding a referral to a higher level of care. 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.

SECOND: Ms. Zoneraich.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

2. PA-22-0090A, PA-22-0098A, ROBERT J. STRONG, P.A., LIC. #2242
PA Strong was present without counsel.

Board staff summarized that Case# PA-22-0090A was opened after the Board received a complaint in October of 2022 regarding PA Strong's Urgent Care evaluation of patient, JM, who had scheduled an Urgent Care appointment to drain a Bartholin cyst. However, PA Strong reportedly opened the door without knocking and had informed JM that he could not drain the cyst, stating that JM would need to be seen by an OB/Gyn. When

asked if there would be a refund, PA Strong had reportedly said “that’s a negative” and had shown JM and her husband the door. PA Strong was subsequently re-noticed about the case due to failure to respond. JM is a 30-year-old female seen by PA Strong at NextCare Urgent Care on October 23, 2022, requesting drainage of a Bartholin cyst. She was on antibiotics and was doing sitz baths. The documented exam showed normal HEENT, respiratory, skin, musculoskeletal, sensory and psychiatric findings. No genital exam was noted. The Assessment was Bartholin gland cyst. The Plan included Sitz baths and Ibuprofen and follow up with PCP or OB/Gyn in one week if not improved. The MC stated that there was no documentation of an exam to the vaginal area to ascertain that the patient had a Bartholin cyst and not an abscess. The MC commented that that drainage could be done in an Urgent Care depending on the operator experience. The MC also noted inadequate communication to the patient. Case # PA-22-0098A was opened after receipt of a complaint on November 5, 2022 regarding PA Strong’s Urgent Care treatment of 52-year-old patient CD, alleging inadequate exam, failure to prescribe an antibiotic, and failure to test for and diagnose Covid-19. CD presented to Urgent Care on November 2, 2022 for a COVID evaluation with symptoms of chest congestion, sinus pressure and a cough for four days. The exam documented air bubbles to the right and left TMs, left frontal sinus tenderness, posterior nasal discharge to the oropharynx and normal respiratory and cardiovascular findings. A chest X-ray was negative. The Assessment noted that COVID was suspected, and CD was instructed to isolate until test results were received. However, PA Strong did not order a COVID test for CD. CD reported home testing was positive for COVID. In his licensee response, PA Strong reported that he determined that CD had a sinus infection and prescribed a ZPak. However, the visit record did not document a diagnosis of sinusitis or note any prescriptions issued to CD. The Supervising Physician’s response reported that COVID testing was not ordered and noted that areas of communication, documentation and patient care could have been improved. The MC stated that PA Strong deviated from the standard of care by failing to perform COVID testing on a symptomatic patient. SIRC considered the two cases together and stated that the cases demonstrated a pattern of inadequate evaluation, documentation and overall lack of care and/or communication with patients. SIRC recommended a Letter of Reprimand and 10 hours of CME in medical recordkeeping and 11 hours of CME in a patient communication course. PA Strong originally signed the offered consent agreement, but requested a formal interview, noting that the consent was signed in error. At the February 28, 2024 Public Meeting, the Board voted to reject the signed consent agreement and to move forward with a Formal Interview.

During questioning, PA Strong explained the patient already had a diagnosis for a Bartholin cyst from her primary care and she was instructed to go to an OBGYN or some other facility to get it drained. PA Strong confirmed that he did not document this in her medical chart. PA Strong explained that when he entered the room and asked why she was there, she told him that she was there to get her Bartholin Cyst drained. He then explained to her that it was not something that he has done or could do at this facility. PA Strong explained that from that point on things escalated between himself and the patient and her partner. PA Strong stated that the patient requested a refund for the appointment so he directed the patient to speak with the onsite office manager. PA Strong informed the Board that when there is a conflict with the patient he tries his best to have the front office spot the error before patient is brought to the back but explained like in this case that is not always an effective option. PA Strong further explained that he tries to speak in a calm voice with the patient. Regarding the delay in responding to Board staff’s request for a response, PA Strong explained that he only gathers his physical mail from the post office twice a month and that it is tedious to go through hundreds of emails. Regarding patient CD, PA Strong explained that normally when a patient comes in for a COVID test as soon as they are brought back by the medical assistance to check their vitals a COVID swab test is also administered. PA Strong noted that a COVID test does not require an order. PA Strong stated that after the vitals are taken and the swab is completed he would evaluate the patient’s symptoms. CD was concerned about a possible sinus infection and PA Strong confirmed that he provided antibiotics. PA Strong noted that a COVID swab is not a task that he would have done. PA Strong further explained that if a

test was done the results were not immediate and that it would take one to two days. PA Strong further noted that CD was on day five of symptoms when she came in, so she was already outside the zone for antivirals that would have helped her. PA Strong stated that he did not document this but confirmed that he always tells the patient that there is a window of opportunity for antivirals to work. Regarding patient JM, PA Strong confirmed that he did call in the Zpak prescription but did not document it in the chart.

PA Strong provided a closing statement where he explained that he was told there was not much that the clinic would be able to do for possible COVID positive patients and that when a patient did come into the clinic with serious COVID symptom he took it upon himself to refer them to the emergency room where rapid test results were able to be provided and more diagnostic equipment was available.

PA Strong agreed that, in these two cases, there was a pattern of inadequate evaluation, documentation and overall lack of care and communication. PA Strong explained that he left NextCare due to the high case and workload.

During deliberation, Ms. Zoneraich opined that there has been unprofessional conduct.

MOTION: Ms. Zoneraich moved for a finding of unprofessional conduct in violation of A.R.S. § 32-2501(20)(p) and (aa) as stated by SIRC.

SECOND: PA Shaff.

Ms. Zoneraich opined that regarding patient JM, a GYN exam should have been done and more compassion should have been shown. Regarding patient CD, a COVID test should have been ordered and PA Strong should have better investigated COVID versus sinus infection. Ms. Zoneraich opined that both patients failed to have empathy or discussion and that there are documentation issues. Dr. Batizy disagreed and commented that a hostile patient kind of closed the exam. JM already knew she had a Bartholin cyst from a family doctor and given the escalation, sometimes there is nothing you can do to diffuse it. Dr. Batizy stated the COVID test was irrelevant if the patient came in after five days. Dr. Batizy opined that there was not enough evidence that this was a deviation from care. Ms. Zoneraich commented that regarding JM it was taken as a given that she had this cyst and no exam was attempted. Ms. Zoneraich noted that she did not read that the patient said no to the exam or that one was offered. PA Shaff agreed that whether the exam was offered or not sometimes when a patient gets angry there is nothing that can be done and the visit is ended. Ms. Zoneraich noted that PA Strong took months to respond, did not check his mail or email and did not provide an opening statement, which shows a lack of concern about the proceedings. Ms. Zoneraich opined that it is unclear who started the escalation and that per the complaint PA Strong was rude and that this could have been handled better. PA Shaff opined that it is not fair to put out that assumption. PA Clark agreed that PA Strong was put in a precarious situation with the front staff in scheduling this patient. PA Clark disagreed with the A.R.S. § 32-2501(20)(j) violation as there was no conduct or practice that would cause harm or danger to this patient. PA Clark agreed that there's a lot of elements involved when a patient expects a particular treatment that cannot be provided regardless of the messages that are sent around or the scheduling errors. When a patient takes that posture, it is very difficult to proceed with an appropriate visit and examination at that point. Ms. Zoneraich and PA Shaff agreed that the A.R.S. § 32-2501(20)(j) violation can be removed from the motion.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

MOTION: Ms. Zoneraich moved for a draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and Probation. 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; and complete no less than 11

hours of Board staff pre-approved Category I CME in an intensive, in-person course in patient communication. 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.

SECOND: PA Shaff.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

CONSENT AGENDA

I. CASES RECOMMENDED FOR DISMISSAL

MOTION: PA Shaff moved to dismiss the case in item numbers 1 and 2.

SECOND: PA Clark.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

1. PA-23-0037A, DAVID R. MURRAY, P.A., LIC. #1570

RESOLUTION: Dismissed.

2. PA-23-0011A, NINA C. CHASE-BOUAMOUD, P.A., LIC. #5781

RESOLUTION: Dismissed.

J. CASES RECOMMENDED FOR ADVISORY LETTERS

MOTION: PA Shaff moved to issue an Advisory Letter in item numbers 1-5.

SECOND: PA DiBaise.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

1. PA-23-0028A, LUMINITA IACOB, P.A., LIC. #3017

RESOLUTION: Advisory Letter for inadequate documentation and failing to timely document a patient interaction. 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. PA-23-0020A, ANITA D. CHAPMAN, P.A., LIC. #2482

RESOLUTION: Advisory Letter for failure to properly treat a sinus infection. 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.

3. PA-23-0093A, FELICITY D. FRANCE, P.A., LIC. #8692

RESOLUTION: Advisory Letter for performing health care tasks on an expired license and without a delegation agreement in place. 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. PA-23-0050A, DANIELLE L. STEWART, P.A., LIC. #8095

RESOLUTION: Advisory Letter for inadequate follow-up and documentation of suspected abuse claims. 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. PA-24-0029A, SIERRA F. TIETGE, P.A., LIC. #8884

RESOLUTION: Advisory Letter for practicing with an expired license. 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.

K. CASES RECOMMENDED FOR ADVISORY LETTERS WITH NON-DISCIPLINARY CONTINUING MEDICAL EDUCATION ORDER

1. PA-22-0071A, JEFFREY T. MIKESSELL P.A., LIC. #4233

MOTION: PA Clark moved to issue an Advisory Letter and Order for Non-Disciplinary CME for failing to maintain an annually updated delegation agreement and for inappropriate professional boundaries. 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 PBI's Professional Boundaries and Ethics (PB-24) course. PBI shall provide an AIR letter to the Board upon completion of the CME coursework. The CME hours shall be in addition to the hours required for license renewal.

SECOND: PA Shaff.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

L. LICENSE APPLICATIONS

i. APPROVE OR DENY LICENSE APPLICATION

1. PA-23-0059A, JOHNSON MONESTIME, P.A., LIC. #N/A

MOTION: PA Clark moved to offer the applicant the opportunity to withdraw his license application within ten days in lieu of a formal license denial based on A.R.S. § 32-4302 (A)(1).

SECOND: Dr. DiBaise.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

ii. CONSIDERATION AND POSSIBLE ACTION TO APPROVE OR DENY LICENSE APPLICATION WITH PROPOSED CONSENT AGREEMENT (Disciplinary)

1. PA-23-0061A, ROSILEE W. BARKER, P.A., LIC. #N/A

PA Barker addressed the Board during the Public Statements portion of the meeting.

MOTION: PA Clark moved to grant the license and accept the signed consent agreement for a Probationary License, requiring the physician assistant to comply with CPEP's Reentry Plan including direct supervision by a Supervising Physician. In addition, PA Barker shall be required to

utilize a Board approved Preceptor to provide oversight to ensure maintenance and/or re-acquisition of skills. The physician assistant may petition the Board to request that the probation be terminated and full licensure be granted after one year. The request must be accompanied by letters of support from her preceptor and supervising physician.

SECOND: PA Shaff.

PA Barker confirmed that she understood the terms of the agreement and that she is willing to comply with the consent agreement in order to obtain licensure.

Ms. Smith clarified the terms of the Order and the termination requirements.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

ACTION ON CASE(S)

M. APPROVAL OF DRAFT FINDINGS OF FACT, CONCLUSIONS OF LAW AND ORDER

1. PA-22-0053A, ERIK B. C. BUZAN, P.A., LIC. #5148

MOTION: PA Shaff moved to approved the Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand and Two-Year Probation. PA Buzan shall enter into a contract with a Board approved monitoring company to perform periodic chart reviews, at the physician assistant's expense. After three consecutive favorable chart reviews, PA Buzan may petition the Board to terminate the Probation. PA Buzan shall not request early termination of Probation without having completed the chart review process. The Probation shall not terminate except upon affirmative request of the physician assistant and approval by the Board.

SECOND: Ms. Zoneraich.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

OTHER BUSINESS

N. REQUEST FOR TERMINATION OF BOARD ORDER

1. PA-20-0010A, MARK R. SCOTT, P.A., LIC. #2319

MOTION: PA Shaff moved to grant the request for termination of the May 19, 2021 Board Order.

SECOND: Dr. DiBaise.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

2. PA-18-0038A, MICHAEL M. ABRAHAM, P.A., LIC. #5934

MOTION: PA Clark moved to grant the request for termination of the November 13, 2019 Board Order.

SECOND: Ms. Zoneraich.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

O. ADJOURNMENT

MOTION: Ms. Zoneraich moved for adjournment.

SECOND: PA Shaff.

VOTE: The following Board members voted in favor of the motion: PA Shaff, Dr. Batizy, PA Clark, Dr. DiBaise, PA Graham, and Ms. Zoneraich. The following Board members were absent: PA Reina, Dr. Bennett, Dr. Dang, and Dr. Gosi.

VOTE: 6-yay, 0-nay, 0-abstain, 0-recuse, 4-absent.

MOTION PASSED.

The Board meeting adjourned at: 11:52 a.m.



A handwritten signature in black ink that reads "Patricia E. McSorley".

Patricia E. McSorley, Executive Director