

PUBLIC SESSION MINUTES
STATE BOARD OF MEDICAL EXAMINERS OF SOUTH CAROLINA
August 1-August 3, 2011

Board Meeting
Synergy Business Park
The Kingstree Building
110 Centerview Dr., Room 108
Columbia, South Carolina

MEETING CALLED TO ORDER

Dr. Louis E. Costa, II, President of the Board, called the regular meeting of the S.C. Board of Medical Examiners to order at 8:00 A.M., on Monday, August 1, 2011, at 110 Centerview Drive, Room 108, Columbia, South Carolina, with a quorum present. Dr. Costa announced the meeting was being held in accordance with the Freedom of Information Act by notice emailed to The State newspaper, Associated Press, WIS-TV and all other requesting persons, organizations, or news media. In addition, notice was posted on the Board's website and on the bulletin boards located at both of the main entrances of the Kingstree Building where the Board office is located.

Board members present for this meeting were:

Dr. Louis E. Costa, II, President, of Charleston
Dr. David deHoll, of Iva
Dr. Jim Chow, of Columbia
Dr. Robert T. Ball, Jr., of Charleston
Dr. Robert E. Turner, of Florence
Dr. Jeff Welsh, of Columbia

Members of the S.C. Department of Labor, Licensing and Regulation (LLR) staff participating at various times in the meeting included:

S.C. Board of Medical Examiners

Bruce F. Duke, Board Administrator
April Dorroh, Program Assistant
Brenda Eason, Administrative Assistant
Ieshia Watson, Administrative Assistant
Laura McDaniels, Administrative Assistant

Office of General Counsel

Melina Mann, General Counsel
Patrick Hanks, Assistant General Counsel
Lil Ann Gray, Assistant General Counsel
Paula Magargle, Assistant General Counsel
Jocelyn Andino, Assistant General Counsel

Office of Advice Counsel

Sheridon Spoon, Advice Counsel
Dean Grigg, Advice Counsel

REVIEW/APPROVAL OF AGENDA

An agenda for this meeting was reviewed and approved.

REVIEW/APPROVAL OF MINUTES FROM NOVEMBER 2010 BOARD MEETING:

After considering recommendations, additions, deletions and corrections, a motion was made to approve the minutes by Dr. deHoll. Dr. Welsh seconded the motion and the minutes were unanimously passed.

ADVANCED ICU CARE

Dr. deHoll told the Board that Dr. Isabelle Kopec, Vice President of medical affairs for Advanced ICU Care was here to present how her company provides care at various intensive care units throughout the United States. He explained that they had been providing services in Anderson for about a year and one half performing remote monitoring of patients in the intensive care unit. Further, he stated that Advanced ICU Care physicians acted in a consulting fashion, but were very active in terms of monitoring and intervention of patients within the hospital's intensive care unit.

Dr. Kopec presented and handed out a document about her company (see attached), addressed the Board and stated that there was a shortage of intensivists in the United States and that less than 20% of ICUs in the USA have intensivists. She explained that tele-ICU is growing and is being used as a solution to the shortage problem. Moreover, she stated that they used two-way video and high tech and HIPPA compliant connectivity to evaluate and monitor ICU patients.

She also told the Board that her company collects quite a bit of data on their practice activities and shares this information with the critical care committee at the hospitals they serve. She also emphasized that her company's service did not substitute for the physicians and physicians extenders who were present with the patient and that their service supplemented the bedside service already being given to these patients.

Dr. Kopec presented data and studies to the Board that showed how their program had improved mortality rates, length of hospital stays, low personnel turnover rates, etc. Dr. Costa concluded the discussion with Dr. Kopec by stating the Board would consider allowing a physician in another country to obtain a permanent license by having a Skype interview and not having to appear personally before a Board member as long as the out of country physician was practicing at an accredited hospital and was having to follow the same high standards as in country physicians.

After further discussion Dr. Costa moved that physicians located in another country, employed by Advanced ICU-Care and practicing in an accredited hospital, equivalent to United States' hospitals with accreditation be allowed to pursue licensure in South Carolina. Dr. Chow seconded the motion and the Board unanimously approved the motion.

E-PRESCRIBING

Ms. Lee Ann Bundrick, Administrator of the Pharmacy Board and Mr. Hugh Mobley, former Pharmacy Board member appeared and addressed the Board. Mr. Mobley told the Board that electronic-prescribing is an evolving issue and the pharmacy community is seeing issues that have caused concern. For example the pharmacy community is seeing

incorrect drugs being prescribed with wrong signatures and seeing inadequate quantities or no quantities being prescribed. They are also seeing nurses' names as the electronic prescriber of medications.

Mr. Mobley also stated that as of now no physicians and/or pharmacists-pharmacies have been authorized by the DEA to prescribe controlled substances using e-prescribing. However, this is nevertheless going on without DEA authorization. However, he did state that several pharmacies and/ or prescribers have applied for authorization.

Another important issue is that many e-prescribers are issuing prescriptions with rubber stamp signatures. This practice is not acceptable as all signatures have to have a physical signature to be lawful. The discussion ended with an understanding that the Pharmacy Board would provide information to Medical Board staff for dissemination to the Board's licensees to sensitize prescribers to the problems in E-prescribing

TELEMEDICINE DISCUSSION

Dr. Costa reintroduced the telemedicine discussion and asked the Board to consider clarifying the understanding of the Statute (40-47-113) dealing with the ability of a physician to prescribe. Specifically he wanted the Board to consider whether the Board feels like a doctor can prescribe without having a physical encounter with the patient outside of the circumstances excepted in the Statute. Moreover, he wants the Board to consider whether the Statute can be interpreted to include the "ISELECT" model.

Dr. Ball addressed the Board and described the different types of telemedicine. Dr. deHoll indicated that he believed that any approval of an ISELECT type model would at a minimum have to have the component of a "medical home". Dr. Costa stated that he believed the "ISELECT model did not foster the medical home concept for two reasons. First, their protocols did not contain a mechanism that would ensure a disposition with the physician with physical contact at some point in the future and second, the "ISELECT model lacks a video component.

Dr. Ball suggested that the Board might entertain a pilot project whereby ISELECT would serve as "on call physicians" for clearly identified family practitioners. Mr. Ritchie representing ISELECT concurred with this suggestion and asked that ISELECT be allowed to pilot a project like this in both a rural and urban setting. Mr. Ritchie also indicated that ISELECT supports the idea helping to aid patients find a medical home. Moreover Mr. Ritchie told the Board that ISELECT wanted to use physician extenders to conduct baseline physicals for prospective patients prior to an encounter with a physician.

Dr. Costa stated that whatever protocols that would be developed by ISELECT would be done with input from the State's primary care interests and associations. Dr. deHoll proposed the following motion for the Board's consideration:

"The proposed motion is to support the principles of Mr. Spoon's letter to Mr. Ritchie of May 12, 2011. The Board will consider a pilot project that will include at a minimum provision for audio and video communication, support for two -way communications between providers, and a proactive provision to establish a medical home, a provision to provide outcomes data to the Board for such pilot."

Dr. Ball seconded the motion and it was unanimously approved by the Board

Amy Trivette, M.D.
Applicant for licensure

Dr. Chow made a motion to allow applicant to proceed with licensure with the stipulation that she follow the guidelines that there be a licensed physician at the actual institution and that the prescribing could not be direct but has to be under advisement to a physician and that physician would generate prescriptions.

Motion was seconded by Dr. Ball
Motion carries

Gowtham Rao, M.D.
Applicant for licensure

Dr. Turner made a motion to allow applicant to proceed with licensure.

Motion was seconded by Dr. Ball
Motion carries

FINAL ORDER HEARINGS

A motion was made and passed for the Board to go into Executive Session to conduct Final Order Hearings. Each hearing was held in Executive Session, and a transcript of each hearing, as well as the Board's Final Order, are on file at the Board Office. After testimony for each case, the Board entered a private deliberative session. No votes were made or actions taken while the Board was in Executive Session. **A motion was made and passed to return to Public Session and the Board voted on the following sanctions after each Final Order Hearing:**

OGC- REPORT

Ms. Melina Mann, General Counsel appeared and was introduced to the Board. Ms. Magargle and Mr. Hanks also appeared before the Board. A discussion ensued about the process of MOAs as opposed to panel hearing as it pertains to disciplinary issues. Dr. Costa indicated that the Board was concerned about the growth of MOAs and the decline of panel hearing over the past few years. Ms. Mann assured the Board that OGC was open to the panel process and would accommodate the Board if the Board wanted more panel hearings.

After a lengthy discussion it was agreed that the MOA process is useful and would still be utilized, but that the panel process would also be used if appropriate.

Kevin W Burnham, P.A.
2010-231
Final Order Hearing

A motion was made by Dr. Turner as follows:

- Accept Memorandum of Agreement
- Public Reprimand
- Pay court cost of \$ 1,105.00

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- Continue with all conditions of the interim reinstatement agreement signed December 21, 2010
 - Grant limited prescriptive authority to exclude all controlled substances.

Motion was seconded by Dr. Welsh
Motion carries

ADJOURN

At 5:45 Dr. Ball made a motion to adjourn. Dr. Turner seconded the motion and it was unanimously passed.

RECONVENE

The Board reconvened at 8:10 am on Tuesday, August 2, 2011.

RPP PRESENTAION.

Rick Wilson from the Recovering Professional's Program (RPP) appeared and asked the Board to consider revising its final order directive as it pertains to respondents who are ordered to participate with RPP. He asked that the Board consider restricting individuals in the RPP program from practicing if taking legally prescribed drugs. Mr. Wilson explained that individuals were getting prescriptions for mood altering drugs and thus never really getting into recovery. Specifically he asked the Board to consider language that would prohibit respondents ordered into RPP from practicing while taking prescribed opiates, sedative hypnotics, stimulants, or other drugs that could cause impairment. In addition, if a RPP participant tests positive for one of these substances then he would have to later get a negative drug screen to return to work. Mr. Wilson also asked the Board to consider changing notification by the participant to the Board from 48 to 24 hours as it pertains to taking these substances (see attached).

Dr. Graham addressed the Board and stated that people who are taking mood-changing drugs could not be treated for addictions and that abstinence from these substances was the only way to treat individuals who have addictions. Dr. Turner asked about the issue of the rare physician who may be prescribed low doses of stimulants to help antidepressants work better. This issue was discussed and the Board agreed that in rare cases a RPP participant who needed an exception to RPP's proposal could present to the Board along with their psychiatrist and the Board would determine if an exception could be made.

Mr. Sheheen addressed the Board and presented statistics pertaining to physicians in the RPP program (see attached). Dr. deHoll made a motion to adopt the changes asked for by RPP. Dr. Turner seconded the motion and it was passed unanimously.

SCMA PRESENTATION

Todd Atwater, CEO of the South Carolina Medical Association (SCMA) appeared and asked the Board to recognize the SCMA as a certifier of the Continuing Medical Education (CME) requirement for all of their members that want to participate in the program.

He told the Board that the SCMA was accredited to offer CMEs in South Carolina by the American Council for Continuing Education, who in turn is recognized by the American Medical Association and is authorized to recognize and accredit other CME providers. He explained that this process would ease the audit burden on the Board and would also ease the burden on the State's physicians of having to keep up with their CMEs.

In response to a question from Dr. deHoll, Mr. Atwater stated that about half of the State's physicians were members of the SCMA and that this would be an additional benefit of membership.

After more discussion Dr. Ball moved to accept the concept of the SCMA's proposal. Dr. deHoll seconded the motion and the motion passed unanimously.

James Parker Whipple, D.O. **Applicant for reactivation of license**

Dr. Welsh made a motion and the following conditions must be met:

- Complete the reactivation application
- Meet requirement for either Board recertification in pediatrics or successful passing of the SPEX examination
- CME requirements up to date for the last two years
- Site-specific practices approved by the Board

Dr. Chow seconded the motion

Motion carries

Jason Bradley Terrell, M.D. **Applicant for licensure**

Dr. Tuner made a motion to approve applicant to pursue licensure

Motion seconded by Dr. deHoll

Dr. Ball abstained

Motion carries

Walter Grady, D.O. **2010-140** **Final Order Hearing**

A motion was made by Dr. Turner as follows:

- Accept Memorandum of Agreement
- Public Reprimand
- Pay fine of \$1,000.00
- Pay court cost \$ 436.00

Dr. Ball seconded the motion
Motion carries

Gregory Baker, M.D.
Applicant for licensure

Dr. Welsh made a motion to approve applicant to pursue licensure

Motion seconded by Dr. deHoll
Motion carries

Eugene Golding, M.D.
Applicant for reactivation of license

Dr. Costa made a motion to approve applicant to pursue licensure

Motion seconded by Dr. deHoll
Motion carries

Dallas Smith, M.D.
Applicant for licensure

Dr. deHoll made a motion to approve applicant to pursue licensure

Motion seconded by Dr. Welsh
Motion carries

OIE REPORT

Mr. Faglie and Mr. Dorman presented the Investigative Review Committee's Report.

Recommendation from IRC for Dismissal

Cases 1-14

Dr. deHoll moved to accept and Dr. Ball seconded the motion
All in Favor
Motion Carries

Recommendation from IRC for Formal Complaint

Case 15- 19

Dr. Chow moved to accept and Dr. deHoll seconded the motion
All in Favor
Motion Carries

Recommendation from IRC for Letters of Caution

Case 20

Dr. deHoll moved to accept and Dr. Welsh seconded the motion
All in favor
Motion Carries

ADJOURN

BOARD ADJOURNS AT 6:15 PM

BOARD RECONVENED AT 8:30 AM, Wednesday AUGUST 3, 2011

Kathryn Jarvis, M.D.
Applicant for licensure

Dr. Turner made a motion to allow applicant to pursue licensure

Motion seconded by Dr. deHoll
Motion carries

John D Hamel, M.D.
Applicant for licensure

Dr. Hamel made a request to withdraw his application
Dr. Ball made a motion to accept his request to withdraw his application
Motion seconded by Dr. deHoll
Motion carries

Heather Manos, M.D.
Applicant for licensure

Dr. deHoll made a motion to allow applicant to proceed with full licensure pending a report from her current treating psychiatrist

Motion seconded by Dr. Turner
Motion carries

Thomas R Dempsey, M.D.
Applicant for reactivation of license

Dr. deHoll made a motion to allow applicant to proceed with reactivation of licensure

Motion seconded by Dr. Turner
Motion carries

Thomas R Jackson, M.D.
2006-325
Final Order Hearing

Dr. Turner made a motion as follows:

- **Accept Memorandum of Agreement**
- **Public Reprimand**
- **Suspension stayed upon the following; payment of \$530.00 cost; payment of \$ 2,000.00 fine; documentation of an appointment with BMI re-evaluation by Dr. Abel; after re-evaluation has been completed and any treatment recommendations completed, the respondent will reappear before the Board**

Motion seconded by Dr. Welsh

Motion carries

Joseph Willard Washington Jr., M.D.

Mandatory reappearance before the Board

Dr. Ball made a motion as follows:

- **Site specific practice approved by the Board**
- **Complete not less than 50 hours of CME in the next 12 months to include internal medicine review, an ethics course, and physical examination course or review**
- **Board will receive quarterly reports from the Medical Director of his site specific approved practice concerning the quality of his care, and he needs to appear before the Board in six months**

Motion seconded by Dr. Turner

Motion carries

John H Dewitt, M.D.

Request to be released from terms and conditions

Dr. Ball made a motion to release Dr. Dewitt from terms and conditions

Motion seconded by Dr. Turner

Motion carries

Kent M McGinley, M.D.

Request to be released from terms and conditions

Dr. Ball made a motion to release Dr. McGinley from terms and conditions

Motion seconded by Dr. Chow

Motion carries

PHYSICIAN ASSISTANTS ADVISORY COMMITTEE RECOMMENDATIONS

Mr. Duke presented recommendations from the July 2011 Physician Assistants Advisory Committee' meeting for the Board's review. Dr. deHoll moved and Dr. Chow seconded the motion to approve the recommendations as amended by the Board. The Board unanimously approved the following recommendations (see attached).

RESPIRATORY CARE ADVISORY COMMITTEE RECOMMENDATIONS

Mr. Duke presented the recommendations from the Respiratory Advisory Committee's July 2011 meeting. Dr. Ball moved to accept the recommendations. Dr. deHoll seconded the motion and the Board unanimously approved the recommendations (see attached)

PATHOLOGY SERVICES

Dr. Welsh addressed the Board about the issue previously brought to the Board from the South Carolina Pathology Association (see attached). He stated that the Attorney General's opinion (see attached) as requested by the Board had been received. Dr. Welsh said that he thought the Board should not attempt to formulate a broad policy dealing with these issues, but rather the Board should handle any complaints brought to them on a case by case basis. After a brief discussion the Board agreed to act as Dr. Welsh had requested.

THE BOARD ADJOURNED AT 5:45 pm

**Respectfully Submitted
Bruce Duke
Administrator**