

Board of Licensure in Medicine
 137 State House Station, (mailing)
 161 Capitol Street (physical address)
 Augusta, Maine 04333-0137
 Minutes of December 8, 2009

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XIX. ADJOURNMENT 4:48 p.m.

**Board of Licensure in Medicine
137 State House Station, (mailing)
161 Capitol Street (physical address)
Augusta, Maine 04333-0137
Minutes of December 8, 2009**

BOARD MEMBERS PRESENT

Sheridan R. Oldham, M.D.
Gary R. Hatfield, M.D., Board Secretary
Cheryl Clukey
Bettsanne Holmes
George K. Dreher, M.D.
Maroulla Gleaton, M.D.
David D. Jones, M.D.
David Nyberg, Ph.D.

BOARD STAFF PRESENT

Randal C. Manning, Executive Director
Mark C. Cooper, M.D.
Dan Sprague, Assistant Executive Director
Jean M. Greenwood, Board Coordinator
Tim Terranova, Consumer Assistant
Maria MacDonald, Board Investigator

ATTORNEY GENERAL'S OFFICE

Dennis Smith, Assistant Attorney General
Detective Peter Lizanecz

David H. Dumont, M.D. was excused.

The Board meets in public session with the exception of the times listed below, which are held in executive session. Executive sessions are held to consider matters which, under statute, are confidential (1 M.R.S.A. §405) and 10 M.R.S.A. §8003-B, and 22 M.R.S.A. § 1711-C.) The Board moved, seconded, and voted the following executive session times. During the public session portions of the meeting actions are taken on all matters discussed during executive session. Discussions are projected on a screen by POWERPoint projection.

PUBLIC SESSIONS

9:09 a.m. – 9:09 a.m.
9:15 a.m. - 9:19 a.m.
10:25 a.m. – 10:41
11:07 a.m. – 11:08 a.m.
11:37 a.m. – 11:40 a.m.
11:44 a.m. – 11:48 a.m.
12:28 p.m. – 12:29 p.m.
1:04 p.m. – 1:05 p.m.
1:51 p.m. – 1:53 p.m.
2:02 p.m. – 2:16 p.m.
3:12 p.m. – 3:20 p.m.
3:32 p.m. – 4:48 p.m.

PURPOSE

Call to order and amendment to agenda.
Unset Adjudicatory Hearing
Motions - Progress Reports & New Complaints
Public Session
Public Session
Public Session
Public Session
Public Session
Public Session
Motions on Informal Conferences
Motions on New Complaints
Public Session

EXECUTIVE SESSION

9:10 a.m. – 9:15 a.m. Progress Reports
9:19 a.m. – 10:25 a.m. New Complaints
11:08 a.m. – 11:37 a.m. Informal Conference
11:48 a.m. – 12:28 a.m. Informal Conference

1:05 p.m. – 1:51 p.m. Informal Conference
2:16 p.m. – 3:12 p.m. New Complaints

RECESS

10:41 a.m. – 11:07 a.m.
11:40 a.m. – 11:44 a.m.
12:30 p.m. – 1:04 p.m. Lunch
1:53 p.m. – 2:02 p.m.
3:20 p.m. – 3:32 p.m.

I. CALL TO ORDER: Dr. Oldham called the public meeting to order at 9:08 a.m.

A. AMENDMENTS TO AGENDA.

1. Amendment to Secretary's Report, List F. Paul Tessier, M.D.

B. SCHEDULED AGENDA ITEMS

1. INFORMAL CONFERENCES

- a. CR09-007 MARSHALL T. CHAMBERLIN, M.D.
- b. CR 08-425
- c. CR 08-425
- d. CR 09-003
- e. CR 08-336

EXECUTIVE SESSION

II. ASSESSMENT & DIRECTION (NONE)

III. PROGRESS REPORTS

1. CR 08-446 (FYI)
2. CR 09-109

Dr. Gleaton moved to dismiss CR 09-109. Dr. Dreher seconded the motion, which passed unanimously.

The patient alleges the physician interfered with his ability to obtain appropriate eye care including transition lenses and medication. A review of the medical record indicates that the patient saw an ophthalmologist and an optometrist on multiple occasions, did in fact get his medication, and did not meet medical necessity guidelines for transitions lenses.

3. CR 08-396 ROBERT L. MICK, M.D.

Dr. Dreher moved to unset the Adjudicatory Hearing in the matter of CR 08-396 Robert L. Mick, M.D. Dr. Nyberg seconded the motion, which passed unanimously.

The Board had previously scheduled the matter for hearing following Dr. Mick's appeal of the Board's decision to preliminarily deny his application for permanent licensure, which was based on a report it received regarding Dr. Mick's behavior during a period of his temporary licensure. Prior to the hearing, the Board received and reviewed: (1) additional information provided by Dr. Mick regarding a medical condition that could explain the behavior; and (2) a written request from Dr. Mick to withdraw his application for permanent licensure. Following its review of the information, the Board reversed its decision to preliminarily deny Dr. Mick's application for permanent licensure, and terminated the investigation. Following that, the Board took the following action:

Dr. Dreher moved to approve Dr. Mick's request to withdraw his application for permanent licensure. Ms. Clukey seconded the motion, which passed unanimously.

4. COMPLAINT STATUS REPORT (FYI)
5. REVIEW DRAFT LETTERS OF GUIDANCE

Dr. Gleaton moved to approve the three draft letters of guidance as written. Dr. Hatfield seconded the motion, which passed unanimously.

6. CONSUMER ASSISTANT FEEDBACK (FYI)

IV. NEW COMPLAINTS

- A. CR 09-210

Dr. Nyberg moved to investigate further CR 09-210. Ms. Holmes seconded the motion, which passed 6-2.

- B. CR 09-225

Dr. Gleaton moved to dismiss CR 09-225. Dr. Dreher seconded the motion, which passed 7-0-0-1 with Dr. Hatfield recused.

The patient alleges the physician acted unprofessionally while treating her and ultimately dismissing her from the practice. The physician explains that the patient failed multiple drug screens, which was the reason for dismissal, after several attempts to help the patient deal with her chronic medical problems by prescribing narcotic medications over a period of two and one-half years.

C. CR 09-228

Dr. Jones moved to hold an Informal Conference in the matter of CR 09-228. Ms. Holmes seconded the motion, which passed unanimously.

Dr. Jones moved to issue a new complaint (CR 09-532) to explore scope of practice including a violation of Schedule II privileges, treatment of a patient without complete medical knowledge and history, possibly inadequate physical exam, and a question about the pain management plan. Ms. Holmes seconded the motion, which passed unanimously.

D. CR 09-273

Ms. Holmes moved to hold an Informal Conference. Ms. Clukey seconded the motion, which failed 3-5.

Dr. Oldham moved to dismiss CR 09-273. Dr. Gleaton seconded the motion, which passed 6-2.

The patient complains that this physician acted unprofessionally when he discussed a possible diagnosis with her over the telephone. The patient also complains that the physician was late to an office appointment and that office staff was permitted to call her with normal laboratory results. Review of the medical record shows appropriate medical decision making. The physician attempted to convey abnormal test results to the patient in a timely manner. It is permissible for the physician to delegate to office staff communication about normal laboratory results.

E. CR 09-305

Ms. Clukey moved to dismiss, with a letter of guidance, CR 09-305. Ms. Holmes seconded the motion, which failed 2-6.

Ms. Clukey moved to dismiss CR 09-305. Ms. Holmes seconded the motion, which passed unanimously.

The complainant alleges the doctor communicated inappropriately with her ninety one year old mother, the spouse of his patient. He communicated with the spouse by telephone and did not communicate to her that this call was not an emergency. He asked if her hospitalized husband would want to be resuscitated if needed. While the doctor speaks fluent English, he has a heavy accent and her mother understood that the doctor was telling her that her husband was dying and needed life support immediately. The daughter was listed as the emergency contact with medical power of attorney, but the documents verifying this were not in the patient's medical record. The physician's call to the patient's spouse was appropriate, even though it unfortunately generated a misunderstanding.

F. CR 09-313

Dr. Dreher moved to dismiss CR 09-313. Dr. Jones seconded the motion, which passed unanimously.

The patient complains the physician did not spend adequate time with her during their telemedicine visits, was rude, and threatened to call the police if she filed a complaint against him.

The physician relates that her years of telemedicine visits were in the company of an RN who was with the patient at the primary site and were limited to pre-planned times, but were complicated by the patient's frequent cancellations and repeated violations of her controlled medications agreement with him. The physician informed her of the legal implications of her actions and the actions of those others she claimed had stolen her medications, but denies ever threatening her with legal action. The patient refused to sign a release requested by the physician's practice.

G. CR 09-315

Dr. Jones moved to dismiss CR 09-315. Ms. Holmes seconded the motion, which passed unanimously.

The patient complained that her male examiner inappropriately touched her during a chaperoned pelvic exam. This possibility is of great concern to the Board, but after review of the medical records, the supervising physician's letter, and an interview with the chaperone, the complaint can not be substantiated.

H. CR 09-318

Dr. Hatfield moved to dismiss CR 09-318. Dr. Gleaton seconded the motion, which passed unanimously.

The patient alleges the physician acted unprofessionally during their one and only visit. The physician explains that the patient had been treated for some time by another physician for chronic pain, and told him during this visit that he had recently escalated his medication dosage on his own. No abnormalities were found that day on the patient's examination that indicated a need for a larger dose of the medication, and the patient was asked to decrease back to the original prescription dosage, with a reevaluation in the near future. Shortly after that visit, the patient was seen at an emergency room and made a remark at that time threatening the physician. This was reported to the physician by the emergency room physician. A review of the records shows that the physician's care for this patient was appropriate, but the patient's behavior was not.

I. CR 09-344

Dr. Hatfield moved to dismiss CR 09-344. Dr. Gleaton seconded the motion, which passed 7-0-0-1 with Ms. Holmes recused.

The patient feels that the physician did not do surgery in a timely manner, did not do all the needed surgery, and made an incorrect diagnosis. She also feels that her post-operative care was inadequate, and that the physician did not return her phone calls. A review of the records shows that the clinical care was appropriate and timely, and that the physician did address the concern raised by the patient's phone call. The pathologist who reviews the surgical specimen makes the tissue diagnosis, not the surgeon.

J. CR 09-350

Ms. Clukey moved to dismiss CR 09-350. Dr. Gleaton seconded the motion, which passed unanimously.

The patient alleges incompetent medical care for a common problem. The patient feels she and her insurance company should be reimbursed for the office visits. Review of the medical record shows that the physician made a general non-specific diagnosis. A specialty referral was made when the patient did not improve. The Board does not have jurisdiction in fee disputes.

K. CR 09-351

Ms. Holmes moved to dismiss CR 09-351. Dr. Nyberg seconded the motion, which passed unanimously.

The patient alleges that the physician failed to provide copies of his medical record upon request. According to the physician: on 9/10/09 his office received a written request from the patient for copies of his medical records; on 9/19/09 the physician received a copy of the patient's complaint filed with the Board; on 10/5/09 the physician's office located the patient's records; on 10/13/09 the patient's records were mailed to the Board. The patient had not been seen in the physician's office since November 2003, and the office had since relocated making retrieval of the patient record difficult.

L. CR 09-352

Dr. Hatfield moved to dismiss CR 09-352. Ms. Holmes seconded the motion, which passed unanimously.

The complainant feels that the physician's care of her father during a hospitalization was poor, resulting in several complications. She also states that the physician repeatedly conveyed to the family that their father was about to die,

which was inaccurate and upsetting to her father, who was alert and conversant. The physician responds that his care was appropriate, and that he did not repeatedly tell the family that the patient was about to die. A review of the records shows a very complicated hospital course, with this physician involved only for a few days of a lengthy admission. Clinical care during that time was well thought-out, well documented, and appropriate. There is documentation that the family was kept informed by the physician, but it is not possible to know just what was said.

M. CR 09-353

Dr. Dreher moved to dismiss CR 09-353. Dr. Nyberg seconded the motion, which passed unanimously.

The husband of this patient complains the outpatient physician failed to provide adequate follow-up care for his wife after she had received intensive inpatient care on several occasions. Specific concerns include failure to initiate alternative treatments, withholding medications contingent on the patient's promise to change her behavior, and over-billing for a brief visit.

The physician's records indicate that he initiated several changes in treatment between the hospitalizations, he had a concern that the patient had not complied with planned follow-up care after the second hospitalization, he was reluctant to change medications without first seeing the patient again, and the patient was not able to provide him reassurance that she would not misuse medications if the physician provided them. The physician acknowledges a very brief appointment due to the sudden angry departure of the patient for which the physician did not submit a bill. The physician arranged for extensive review of his decisions and the overall situation with others in his department. The physician's treatment system arranged for a new provider at the patient's request.

The care appears reasoned and adequate in a difficult situation.

N. CR 09-366 PAUL M. LABAND, M.D.

Dr. Jones moved to dismiss, with a letter of guidance in the matter of CR 09-366 Paul M. Laband, M.D. Dr. Dreher seconded the motion, which passed 7-0-0-1 with Dr. Hatfield recused.

This is a complex surgical and medical case where the complainant states that unsubstantiated information was entered into the patient's chart by the hospitalist and then was noted as inaccurate the next day in the patient's chart by the same hospitalist. The physician takes full responsibility for his error and this error had no effect on patient care. A letter of guidance will emphasize taking greater precautions for entering only factual information from reliable sources in the record.

O. CR 09-367

Dr. Jones moved to dismiss CR 09-367. Dr. Nyberg seconded the motion, which passed 6-1-0-1 with Dr. Hatfield recused.

The complainant alleges that the doctor engaged in an unprofessional attempt to alter the diagnosis and the content of a patient's medical record. There may have been misrepresentation of the facts in this case by this physician but his intent is undetermined. Another physician has taken personal responsibility for this occurrence.

P. CR 09-368

Dr. Dreher moved to dismiss CR 09-368. Dr. Nyberg seconded the motion, which passed unanimously.

The patient alleges that the physician failed to treat him properly by refusing to prescribe certain medications to him, by continuing to prescribe other medications to him that did not benefit him and produced side-effects, and by referring him to a social worker with whom he had a bad experience.

The physician's response to the complaint described the patient's underlying medical conditions, the basis for the treatment decisions and his rationale for not prescribing the requested medication unless the patient was willing to participate in a more intensive care plan. The patient declined the latter and treatment was continued within the bounds of safe care.

The medical record corroborates the physician's response.

Q. CR 09-370

Ms. Clukey moved to dismiss CR 09-370. Ms. Holmes seconded the motion, which passed unanimously.

The patient complains that her physician prescribed the wrong medicine in 2005 and she took it for four years before the prescription was changed. She also states that the physician is known by many aliases including Adolph Hitler, and that he has threatened his receptionist and herself "with his long knife". The physician rightly points out that the complaint is grounded in delusional beliefs.

R. CR 09-371

Dr. Dreher moved to dismiss CR 09-371. Ms. Holmes seconded the motion, which passed unanimously.

The father of this child indicates the physician treating his child was not responsive to his concerns and phone calls or his revocation of consent for the use of a specific medication, and the physician had instigated a DHHS investigation of him.

The physician's response, which is supported by the patient's records, is that the treatment was helping, according to the patient and his mother (who routinely came to the appointments with the patient); there were no records of phone calls on the dates specified; the father never revoked consent to him; and the DHHS referral was made by another treating professional who was concerned about the father's behavior, including withholding the child's prescribed medication.

S. CR 09-372

Dr. Gleaton moved to dismiss CR 09-372. Dr. Nyberg seconded the motion, which passed unanimously.

The patient complains of postoperative problems after bilateral cataract surgery. The patient did not notify the physician of any concerns until she filed a complaint. The patient has rebuffed attempts by the physician to assess and help her condition. The record supports a good visual postoperative result and suggests typical issues that may or may not be the result of the surgery. The patient has chosen to seek care elsewhere for these issues.

T. CR 09-374

Dr. Jones moved to investigate further CR 09-374. Ms. Holmes seconded the motion, which passed unanimously.

U. CR 09-375

Dr. Gleaton moved to dismiss CR 09-375. Dr. Nyberg seconded the motion, which passed unanimously.

The complainant alleges the physician did not provide proper care or referrals while treating him post-operatively in an institution. The physician did not have institutional authority to approve referrals during this time, and the care he provided was adequate and appropriate as documented in the patient's medical record.

V. CR 09-402

Ms. Clukey moved to dismiss CR 09-402. Dr. Hatfield seconded the motion, which passed unanimously.

The patient alleges the physician did not provide her with test results in a timely manner and that the results provided did not match her research on their meaning. The records indicate there were various unsatisfactory attempts to communicate with the patient through telephone calls and mail, which complicated medical discussions. Review of the medical record indicates results were provided in a timely manner and range values were supplied by the laboratory.

W. CR 09-409

Ms. Holmes moved to dismiss CR 09-409. Dr. Nyberg seconded the motion, which passed unanimously.

The patient alleges the physician failed to provide copies of his medical records upon request. According to the physician, his office had received multiple written requests from the patient for his records, and responded to each of those requests by sending him a copy of the medical records. The investigation reveals that on 10/6/09, the physician received a copy of the patient's complaint filed with the Board, and that the physician's office mailed the patient another complete copy of his medical records on that same date.

V. INFORMAL CONFERENCE(S)

A. CR 09-007 MARSHALL T. CHAMBERLIN, M.D.

Dr. Hatfield moved to dismiss, with a letter of guidance, the Board complaint against CR 09-007 Marshall T. Chamberlin, M.D. Dr. Dreher seconded the motion, which passed 5-0-0-3 with Dr. Oldham, Dr. Jones and Ms. Clukey recused.

In this case a patient presented to the emergency room with new onset seizures and severe hyponatremia. Despite these problems, the physician caring for him was preparing to send the patient home. As well, despite the patient's caretakers pointing out the problem, the physician failed to recognize new neurological abnormalities, documenting a normal examination when in fact major abnormalities were present.

A review of the records demonstrates that the patient needed to be admitted due to the problems outlined above. The physician has taken educational courses to further his knowledge in these areas. The Board emphasizes the need for good communication, good record keeping, and a proper examination.

B. CR 09-017

Dr. Oldham moved to dismiss CR 09-017. Dr. Dreher seconded the motion, which passed unanimously.

The complainant in this case alleges the physician acted unprofessionally when examining a family member who was dying. An Informal Conference was held and the physician explained the purpose and circumstances surrounding the examination. The Board did not feel disciplinary action was required

C. CR 08-425

Dr. Hatfield moved to dismissal of CR 08-425. Dr. Nyberg seconded the motion, which passed unanimously.

In this case the complainant feels that the provider abandoned the patient after her transfer to an assisted living facility, did not provide compassionate attention to the family after the patient's death, and did not meet his responsibility with regard to signing the death certificate. An Informal Conference clarified that there was no intentional patient abandonment but rather confusion about the type of facility that the patient had been admitted to and who the attending physician would be. The provider believed he could not legally sign the death certificate. The provider and the supervising physician outlined changes that have been made in the practice to prevent similar problems from occurring in the future.

NOON MEAL

D. CR 09-003

Dr. Dreher moved to table CR 09-003 and refer the matter to the Licensure Committee. Dr. Gleaton seconded the motion, which passed unanimously.

E. CR 08-336

Ms. Holmes moved to dismiss the CR 08-336. Dr. Jones seconded the motion, which passed unanimously.

This complaint concerned unknown potential repercussions from an iatrogenic needle stick to the physician while performing a procedure on the complainant's spouse. The Board held an Informal Conference with both the complainant and the physician about the circumstances surrounding this incident. There has been a change in protocol in the department to improve responses to such inadvertent needle sticks, and the Board did not feel any disciplinary actions were required. It is unclear why the patient has not been provided results of her testing by the hospital.

PUBLIC SESSION

VI. MINUTES OF NOVEMBER 10, 2009

Dr. Jones moved to approve the minutes of November 10, 2009 as amended. Ms. Holmes seconded the motion, which passed 7-0. Dr. Gleaton abstained.

VII. NEW BUSINESS (NONE)

VIII. BOARD ORDERS & CONSENT AGREEMENT MONITORING & AND APPROVAL

A. BOARD ORDERS (NONE)

B. CONSENT AGREEMENT MONITORING & APPROVAL

1. CR 08-118 Reinaldo de los Heros, M.D

Dr. de los Heros is requesting a change to his monitoring schedule.

Dr. Dreher moved reduce the mandated monitoring to once per month.
Dr. Jones seconded the motion, which passed unanimously.

IX. ADJUDICATORY HEARING (NONE)

X. REMARKS OF CHAIRMAN

A. DRAFT LETTER OF NOMINATION TO FSMB BOARD OF DIRECTOR FYI

XI. EXECUTIVE DIRECTOR'S MONTHLY REPORT

A. POLICY TEMPORY LICENSE – RECENT CLINICAL EXPERIENCE REQUIRED

The Licensure Committee moved to approve the policy as amended. The motion passed unanimously.

B. ACCESS TO INITIAL COMPLAINT REVIEW PROCESS

The Board heard a recommendation by staff about licensee access to otherwise confidential information. The parties will be notified in advance.

C. REQUEST FOR OPINION: LICENSING OF PEER REVIEWERS

The Board approved Dr. Cooper's response to the request about licensing of peer reviewers.

D. PHYSICIAN POST COMPLAINT SURVEY ANALYSIS FYI

E. COMPLAINT STATUS REPORT FYI

XII. REMARKS OF ASSISTANT ATTORNEY GENERAL (NONE)

XIII SECRETARY'S REPORTA, LIST A LICENSES FOR RATIFICATION1. M.D. LIST A LICENSES FOR RATIFICATION

Dr. Gleaton moved to ratify the physicians on List A below for licensure.
Dr. Jones seconded the motion, which passed 7-0 with Ms. Clukey out of the room.

The following license applications have been approved by staff and Board Secretary Gary R. Hatfield, MD without reservation:

<u>NAME</u>	<u>SPECIALTY</u>	<u>LOCATION</u>
Ahmad, Hina S	OB/GYN	Sanford
Bloch, Isac L	Otolaryngology	Bangor
Britton, Daniel J	Emergency Medicine	Portland
Britton, Megan R P	Family Medicine	Belfast
Cochran, Thomas S	Emergency Medicine	Not Listed
Davidson, Stuart L	Orthopedic Surgery	Bar Harbor
Han, Paul K J	Internal Medicine	Portland
Hofer, Curt	Internal Medicine	Waterville
Hughes, Christopher A	Neurology	Biddeford
Johnson, Elizabeth H	Internal Medicine	Portland
Jones, Rebecca K	OB/GYN	York
Little, Dwight D	Internal Medicine	Unknown / Locums
MacQueen, Amy E	Family Medicine	Not Listed
McCarthy, Owen M	Orthopedic Surgery	Fort Kent, NMMC
Ram, Priti B	Diagnostic Radiology	Telemedicine
Raush, Daniel C	Internal Medicine/Hem/Onc	Lewiston
Sasso, Robert A	OB/GYN	Portland
Shervin, Nina	Orthopedic Surgery	Goodall Hospital, Sanford
Warner, Frederick T	Emergency Medicine	Not Listed

2. P.A. LIST A LICENSES FOR RATIFICATION (NONE)B. LIST B APPLICATIONS FOR INDIVIDUAL CONSIDERATION1. ARTHUR F. BLAKE, M.D.

The Licensure Committee moved to approve the license application of Arthur F. Blake, M.D. The motion passed 7-0 with Ms. Clukey out of the room.

2. CLAUDIO A. FERREIRA, M.D.

The Licensure Committee moved to approve the license application of Claudio A. Ferreira, M.D. The motion passed unanimously.

3. JOHN R. NECEFORO, M.D.

The Licensure Committee moved to table the application of John R. Neceforo, M.D. and schedule an interview. The motion passed 7-0 with Dr. Hatfield out of the room.

4. JAROSLAV P. STULC, M.D. – ADMINISTRATIVE APPLICATION

The Licensure Committee moved to preliminary deny the Administrative License Application of Jaroslav P. Stulc, M.D. with leave to withdraw his application. The motion passed 7-0 with Dr. Hatfield out of the room.

5. ERIN K. WILLIAMS ROBERTSON, M.D. – TEMPORARY APPLICATION

The Licensure Committee moved to preliminarily deny the Temporary License Application of Erin K. Williams-Robertson, M.D., with leave to withdraw her application. The motion passed unanimously.

6. LISA L. MAZUCH, M.D. – TEMPORARY APPLICATION

The Licensure Committee moved to preliminarily deny the Temporary License Application of Lisa L. Mazuch, M.D. with leave to withdraw her application. The motion passed unanimously.

7. HECTOR L. PENISTON-FELICIANO, M.D. – TEMPORARY APPLICATION

Dr. Dreher moved to approve the temporary license application of Hector L. Peniston-Feliciano, M.D. Dr. Gleaton seconded the motion, which passed unanimously.

C. LIST C APPLICATIONS FOR REINSTATEMENT

1. LIST C APPLICATIONS FOR REINSTATEMENT (NONE)

2. LIST C APPLICATIONS FOR REINSTATEMENT FOR INDIVIDUAL CONSIDERATION

a. MIGUELITO A. CABELIN, M.D.

The Licensure Committee moved to grant an inactive license to Miguelito A. Cabelin, M.D. The motion passed unanimously.

D. LIST D WITHDRAWALS

1. LIST D (1) WITHDRAW LICENSE APPLICATION (NONE)
2. LIST D (2) WITHDRAW LICENSE FROM REGISTRATION

The following physicians have applied to withdraw their licenses from registration:

<u>NAME</u>	<u>LICENSE NUMBER</u>
Bolliger, Eugene	013138
Engle, John	016867
Goumas, William	014377
Ho, Kenneth	008781
Hornstein, Abby.....	017414
Kumar, Nandan	011011
Luke, Barbara'	008732
Norian, Isabel.....	016899
Peters, Eugene.....	009399
Schachne, Lewis	007304
Wu, Der Sun.....	007611

Dr. Gleaton moved to approve the physicians on LIST D (2) above to withdraw their licenses from registration. Dr. Hatfield seconded the motion, which passed unanimously.

3. LIST D (3) WITHDRAW LICENSE FROM REGISTRATION FOR INDIVIDUAL CONSIDERATION

E. LIST E. LICENSES TO LAPSE BY OPERATION OF LAW (FYI)

The following physician licenses lapsed by operation of law effective November 6, 2009. (MD licenses expired on August 31, 2009.)

<u>NAME</u>	<u>LICENSE NO.</u>
Brownlowe, Katherine B.	017995
Cox, John F.	009653
Cruz, Leo Marlon P.	016350
Dayal, Yogeshwar.....	017647
Garson, Glen D.	014048
Gundy, Feridun	005698
Halstead, Douglas	008049

Kulczycki, Lucas L.	004926
Meada, Riad	017794
Michelson, Joseph B.	016659
Ng, Herman.....	009109
Patel, Chandravadan P.	011411
Smith, Eric E.....	017652

F. LIST F LICENSEES REQUESTING TO CONVERT TO ACTIVE STATUS

1. PAUL TESSIER, M.D.

Dr. Paul Tessier has requested to go from Inactive to Active status. He has also requested an extension of time to complete his CME. He has maintained an Active license until his 2006 Renewal.

The Licensure Committee moved to preliminarily deny the request of Paul Tessier, M.D. to change the status of his license to active. The motion passed 7-0 with Dr. Jones out of the room.

G. LIST G RENEWAL APPLICATIONS FOR REVIEW (NONE)

H. LIST H DELEGATED PRACTITIONER SCHEDULE II REQUESTING RATIFICATION (NONE)

XIV. STANDING COMMITTEE REPORTS

A. ADMINISTRATION POLICY & RULES COMMITTEE (NONE)

B. LEGISLATIVE & REGULATORY COMMITTEE

Gordon Smith, Esq., of Maine Medical Association and a member of the Maine Medical Marijuana Act Task Force, reported on the progress of the task force.

D. PUBLIC INFORMATION COMMITTEE

Ms. Clukey reported the "Fall 2009" issue of the newsletter has been mailed. The committee will be working on the "Winter 2010" issue. The Board gave Ms. Clukey some suggestions for future articles.

E. PHYSICIAN ASSISTANT ADVISORY COMMITTEE

Dr. Jones reported on the December 1 meeting of the PA Advisory Committee

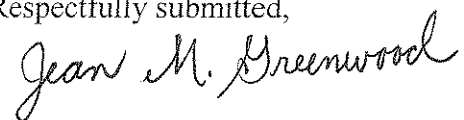
XV. BOARD CORRESPONDENCE (NONE)

XVI. FYI

XVII. FSMB MATERIAL

XVIII. ADJOURNMENT 4:48 p.m.

Respectfully submitted,

A handwritten signature in cursive script that reads "Jean M. Greenwood". The signature is written in black ink and is positioned below the typed name.

Jean M. Greenwood, Administrative Assistant
Board Coordinator