

NEVADA STATE BOARD OF MEDICAL EXAMINERS

1105 Terminal Way, Suite 301
Reno, NV 89502-2144

Michael J. Fischer, M.D.
Board President

Edward O. Cousineau, J.D.
Executive Director



*** * * MINUTES * * ***

OPEN SESSION BOARD MEETING

Held in the Conference Room at the Offices of the
Nevada State Board of Medical Examiners
1105 Terminal Way, Suite 301, Reno, Nevada 89502

and videoconferenced to

the Conference Room at the Offices of the Nevada State Board of
Medical Examiners/Nevada State Board of Dental Examiners
6010 S. Rainbow Boulevard, Building A, Suite 1, Las Vegas, Nevada 89118

FRIDAY, MARCH 4, 2016 – 8:30 a.m.

Board Members Present

Michael J. Fischer, M.D., President
Rachakonda D. Prabhu, M.D., Vice President
Wayne Hardwick, M.D., Secretary-Treasurer
Beverly A. Neyland, M.D.
Theodore B. Berndt, M.D.
Sandy Peltyn
Victor M. Muro, M.D.
M. Neil Duxbury
April Mastroluca

Board Members Absent

None

Staff/Others Present

Edward O. Cousineau, J.D., Executive Director
Todd C. Rich, Deputy Executive Director
Robert Kilroy, J.D., General Counsel
Laurie L. Munson, Chief of Administration and Information Systems
Pamela J. Castagnola, CMBI, Chief of Investigations
Lynnette L. Daniels, Chief of Licensing
Donya Jenkins, Finance Manager
Peter K. Keegan, J.D., Deputy Attorney General

Agenda Item 1

CALL TO ORDER AND ANNOUNCEMENTS

- Roll Call/Quorum

The meeting was called to order by President Michael J. Fischer, M.D., at 8:30 a.m.

Mr. Cousineau took roll call, and all Board members were present. Mr. Cousineau announced there was a quorum.

Dr. Fischer apologized for missing the December Board meeting.

Mr. Cousineau introduced the Board's new License Specialist, Sherri Dailey.

Agenda Item 2

PUBLIC COMMENT

Dr. Fischer asked whether there was anyone in attendance who would like to present public comment. No public comment was received.

Agenda Item 3

APPROVAL OF MINUTES

- December 4, 2015 Board Meeting – Open/Closed Sessions

Dr. Prabhu moved that the Board approve the Minutes of the December 4, 2015 Board Meeting – Open/Closed Sessions. Dr. Berndt seconded the motion. Dr. Fischer stated he was abstaining from the vote since he was not present at the December 4, 2015 meeting. A vote was taken on the motion and it passed, with all other Board members voting in favor of the motion.

Agenda Item 4

CONSIDERATION AND ACTION REGARDING PROPOSED AMENDMENT TO NEVADA ADMINISTRATIVE CODE (NAC) CHAPTER 630

- Review of Public Comments on, and Consideration of Adoption of, Proposed Amendment to NAC Chapter 630, Amending NAC 630.155 and NAC 630.357 to Expand the Scope of Qualifying Courses to Include Courses on Alzheimer's Disease and Other Forms of Dementia (R103-15)

Mr. Rich explained that the proposed regulatory change would amend NAC 630.155 and NAC 630.357 by adding language that would allow for double the amount of continuing medical education (CME) credit for courses related to treatment of dementia and Alzheimer's disease. The regulation currently allows double CME credit for geriatrics and gerontology courses, and this change would allow a licensee to obtain double CME credit for either geriatrics/gerontology courses or dementia/Alzheimer's courses during a licensing biennium, but not both. The proposed change would apply to both physicians and physician assistants, and originated from the passage of Senate Concurrent Resolution No., 2, sponsored by Senator Hardy, during the 2015 legislative session. He stated a public workshop had been held on January 12, 2016, and a public hearing had been held on February 4, 2016. There were no attendees at either the public workshop or public hearing, and no written comments were received relative to the proposed regulatory change.

Discussion ensued regarding the distinction between courses related to geriatrics and gerontology and courses related to dementia and Alzheimer's disease.

Dr. Prabhu moved that the Board adopt the proposed regulation. Ms. Peltyn seconded the motion and it passed unanimously.

Agenda Item 5

CONSIDERATION OF REQUEST OF GLENN IRWIN, JR., M.D. FOR REMOVAL OF CONDITION ON HIS MEDICAL LICENSE

Dr. Irwin appeared in Las Vegas. Linda Johnson, M.D., Dr. Irwin's preceptor, was present with him.

Dr. Irwin explained he had received a license to practice medicine with the condition that he complete a six-month preceptorship under the direction of Dr. Linda Johnson. The preceptorship and all required reports were completed as of the end of December 2015, and he was requesting that the Board lift the condition from his license.

Dr. Neyland moved that the Board remove the condition on Dr. Irwin's license, which would give him an unrestricted license. Dr. Prabhu seconded the motion and it passed unanimously.

Agenda Item 6

CONSIDERATION OF REQUEST OF MOHAMED SALEH, M.D. FOR CHANGE IN PRECEPTOR

Dr. Saleh appeared in Las Vegas. Matthew Okeke, M.D., Dr. Saleh's proposed preceptor, was present with him.

Dr. Saleh explained that he felt Dr. Matthew Okeke would be a much more compatible preceptor for him than the preceptor who was originally approved by the Board.

Dr. Fischer asked Dr. Saleh whether he had ever started with the original preceptor, and Dr. Saleh said he had not, as the original preceptor had kept postponing him.

Dr. Prabhu moved that the Board grant Dr. Saleh's request for a change in preceptor. Dr. Neyland seconded the motion and it passed unanimously.

Agenda Item 7

REPORTS

(a) Investigative Committees

Dr. Berndt reported that at its February 10, 2016 meeting (the rescheduled November 2015 meeting), Investigative Committee A considered 113 cases. Of those, the Committee authorized the filing of a formal complaint in 10 cases, sent 8 cases out for peer review, requested an appearance in 9 cases, issued 21 letters of concern, referred 5 cases back to investigative staff for further investigation or follow-up and recommended closure of a total of 60 cases.

Dr. Hardwick reported that at its February 17, 2016 meeting, Investigative Committee A considered 84 cases. Of those, the Committee authorized the filing of a formal complaint in 5 cases, sent 11 cases out for peer review, requested an appearance in 5 cases, issued 14 letters of concern, referred 6 cases back to investigative staff for further investigation or follow-up and recommended closure of a total of 43 cases.

Dr. Neyland reported that at its February 9, 2016 meeting, Investigative Committee B considered 82 cases. Of those, the Committee authorized the filing of a formal complaint in 2 cases, sent 10 cases out for peer review, requested an appearance in 4 cases, issued 18 letters of concern and recommended closure of a total of 48 cases.

(b) Nevada State Medical Association Report

Catherine O'Mara, Executive Director of the Nevada State Medical Association (NSMA), commended Board staff for working with her the last few months to get her up to speed on various matters. She reported that the NSMA Annual Meeting will be held September 16-18, at which time Dr. Don Havins will become President of the NSMA. NSMA is hopeful there will be some ethics, opioid abuse-related or emergency preparedness CME offered there. They are also looking at workshops regarding topics that affect medical practices, such as the PMP Program or electronic death records. With the statewide, as well as nationwide, opioid abuse problem, physicians have a role to play in working through this problem. NSMA has partnered with Join Together Northern Nevada to participate in the Take Back Program on April 30. This is a nationwide day where people can return prescription medications, syringes, etc., at drop locations, and the DEA then transports them to California for destruction. She met with the Board of Pharmacy on the PMP Program, and they have been wonderful to work with. They are working really hard to make the system work. In the next couple of months, NSMA is going to focus on that program and ask all of its members to run their own reports to see whether there are any inconsistencies and, if so, to go through the processes available for correcting them. As of January 1 of this year, all death records are to be signed electronically. There are a couple of issues with the system and NSMA has been working with the State regarding those. The hearing on network adequacy regulations has been pushed to March 16, and NSMA plans to participate. The next meeting of the Legislative Committee on Health Care, on March 23, will deal with a number of issues, including telemedicine. NSMA will participate in that meeting as well. NSMA is very interested in graduate medical education and improving residencies in the state, and will host an event with the University of Nevada School of Medicine in the north on May 5, with the goal of connecting all community physicians with the University.

(c) Clark County Medical Society Report

Loretta Moses, Executive Director of the Clark County Medical Society (CCMS), reported that on January 9, Dr. Havins and Dr. Forman gave an ethics and legislative update CME, which was attended by approximately 60 individuals; on February 10, CCMS held a suicide prevention and assisted suicide CME in collaboration with the Nevada Psychiatric Association, which was also attended by about 60 individuals; on April 16, CCMS will hold a medical marijuana symposium; and on May 14, from 8 to 12, CCMS will hold a robotics symposium. CCMS just concluded its second annual junior mini-internship program, with 38 students. In the fall, CCMS will hold the adult mini-internship program. The CCMS presidential installation dinner will be held June 18, and Dr. Souzan El-Eid will be installed as President, along with the other Board members. Ms. Moses extended her appreciation to Sandy Peltyn for all of her contacts, support and assistance. Framing of CCMS' new office building will begin on March 7.

Agenda Item 8

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. MAHESH KUTHURU, M.D.*, BME CASE NO. 14-32161-1

This item was not discussed at the meeting.

Agenda Item 9

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. IRWIN GLASSMAN, M.D.*, BME CASE NO. 13-6387-1

Neither Dr. Glassman nor his legal counsel was present.

Dr. Fischer named the adjudicating Board members who would be considering the matter.

Mr. Kilroy outlined the allegations contained in the Complaint filed against Dr. Glassman and the terms of the proposed Settlement Agreement.

Dr. Neyland moved that the Board accept the Settlement Agreement. Dr. Prabhu seconded the motion and it passed unanimously, with all adjudicating Board members voting in favor of the motion.

Agenda Item 10

EXECUTIVE STAFF/STAFF REPORTS

(a) Investigations Division Report

Ms. Castagnola reported the current number of open investigative cases was 552 and the current number of cases per investigator was approximately 69. There were 21 peer reviews in the field and 21 peer reviews awaiting assignment.

(b) Quarterly Compliance Report

Ms. Jenkins reported the total costs outstanding for the quarter were \$50,122.55 and total fines outstanding were \$10,700.00, for a combined total of \$60,822.55. The total costs collected during the quarter were \$8,370.90. The total number of cases with the Controller's Office at the end of the fourth quarter was 7, for a total of \$39,706.91, and no collections were written off during the quarter.

(c) Quarterly Update on Finances

Ms. Jenkins highlighted the various sections of the Balance Sheet for the fourth quarter of 2015. She explained the Board's assets were currently heavy due to the 2015 licensure renewals, and were currently \$9,600,000, primarily held in cash and CDs. She stated the current liabilities include the deferred income accounts, which begin with Account 210, and the total deferred income was \$4,897,000. She explained that this section represents the amount of license renewal and new license fees that we hold in our reserves to be used until the next renewal period because licensure fees make up the majority of the Board's income. She stated the equity represents the Board's reserves, and the total was \$4,600,000. Of that reserve, the amount added in 2015 was \$676,000.

Ms. Jenkins then highlighted the various sections of the Profit and Loss Budget vs. Actual for the fourth quarter of 2015. She explained that the fourth quarter resulted in a net loss for the quarter; however, the loss was the result of timing issues. The personnel expenses were 3.3% over budget for the fourth quarter, which was primarily the result of the increase in the retirement program for the second half of the year. The expenses were over in total by 7%, most of that being in Account 531, which includes all of the Board's peer reviews and medical reviews. This reflects the amount of work going on in the Board's Investigations Division related to peer reviews and medical reviews. Staff has budgeted this figure to be higher for 2016. The fourth quarter resulted in a net loss of \$61,119.08. Included in the materials for this agenda item is a Profit and Loss Budget vs. Actual for January through December 2015. Total income for the fourth quarter was 7% under budget; however, the Profit and Loss Budget vs. Actual for the year shows income was over by 9%, and the total expenses for the year were at 99.9%, so that was pretty exact for the year. The Board's interest income was over for the year by a significant amount – almost double – because the interest rates continued to rise over the year. The total net income that was added to the Board's reserves for the year was \$676,000.

Ms. Jenkins stated that the Board's auditors had concluded their field work for the 2015 audit the previous week and it went very well. They still have a little more work to do. There is a new regulation for governmental auditing, which will require the Board to recognize a portion of the PERS unfunded liability. This refers to the difference between PERS' assets and what they owe, and a portion of that will need to be recognized on the Board's financial statements because we participate in PERS. She said she did not know what that figure will be, as the auditors were still working on it, but they will let us know and will adjust our financials accordingly. She said she expects to be able to present the 2015 audit to the Board at the June Board meeting.

Dr. Berndt asked about the trend in the number of peer reviews, and Ms. Jenkins said staff could prepare a report on that. She said from a financial standpoint, the Board is trending upward in its spending for peer reviews, but she doesn't know whether that is due to more cases being sent for peer review or just more cases in general. Dr. Berndt said he was interested in the percentage of cases that are being sent out for peer review.

Dr. Hardwick stated that although the Board had a loss for the quarter, it was mostly right on budget for the year. Additionally, part of the additional expenses in that quarter were attributed to the December meeting in Las Vegas, which cost between \$15,000 and \$20,000, with the audio-visual equipment being \$8,000 of that, so we are going to see if we can improve on that for the next Las Vegas meeting. Ms. Jenkins stated the Board was a little over budget because of those expenses.

(d) Legal Division Report

Mr. Kilroy reported there were currently 93 cases in the Legal Division, 1 of which had been presented to the Board for action at this meeting. There were 22 cases pending the CMT process, 20 cases awaiting filing of a formal complaint, 33 cases in which a formal complaint had been filed that were pending hearings, 7 since the last Board meeting, and 11 miscellaneous legal matters requiring further investigation, etc. He then provided an update regarding the 4 pending civil court cases in which the Board was currently involved. He said since coming to the Board before Thanksgiving, he had been overwhelmed by the quality and professionalism of the Board staff. The Legal and Investigations Divisions have implemented daily and weekly meetings to attempt to streamline some of the processes and to standardize the formats of peer reviews, investigations, etc., and the Legal Division is now up-to-speed and caught up. Angie Donohoe has been a consummate professional and has been there for him each and every day, helping him remain focused and on task, because there is a lot of work to be done.

Agenda Item 11

LICENSURE RATIFICATION

- Ratification of Licenses Issued, Reinstatements of Licensure and Changes of Licensure Status Approved Since the December 4, 2015 Board Meeting

Dr. Prabhu moved that the Board ratify the licenses issued, reinstatements of licensure and changes of licensure status approved since the December 4, 2015 Board Meeting. Dr. Neyland seconded the motion and it passed unanimously.

Agenda Item 12

APPEARANCES FOR CONSIDERATION OF ACCEPTANCE OF APPLICATIONS FOR LICENSURE

(a) Elliott Schmerler, M.D.

Maria Nutile, Esq. was present with Dr. Schmerler as his legal counsel. Vance Alm, M.D., Dr. Schmerler's preceptor, was also present.

Dr. Fischer asked Dr. Schmerler whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did.

Dr. Prabhu moved that the Board go into closed session pursuant to NRS 241.030. Dr. Neyland seconded the motion and it passed unanimously.

Upon returning to open session, Dr. Hardwick moved that the Board grant Dr. Schmerler a conditional license with the following conditions: that Dr. Schmerler be supervised by Dr. Alm; that he see no less than 100 patients per quarter, with reports on 100% of patients for the first quarter, 75% for the second quarter, 50% for the third quarter and 25% for the fourth

quarter, with reports to the Board by Dr. Alm monthly for the first 3 months and bi-monthly thereafter. Dr. Prabhu seconded the motion and it passed unanimously.

(b) Abegael Lorico, M.D.

Dr. Fischer asked Dr. Lorico whether she wanted her application to be considered in closed session, with the public being excluded, and she said that she did not.

Dr. Muro questioned Dr. Lorico concerning her board certification. Dr. Lorico confirmed that her last board certification was in 1975. Dr. Muro asked her whether she was participating in any type of board certification maintenance program, and Dr. Lorico stated she was not, but that her CMEs were up to date and she had worked at two teaching hospitals before applying for licensure in Nevada, so she thinks she is up to date.

Dr. Muro questioned Dr. Lorico regarding her affirmative responses to Questions 5a and 5b on her application for licensure, and the fact that she had failed to disclose on her application several cases of malpractice that had been filed against her.

Dr. Lorico said she probably did not remember the cases because they were traumatic to her and those events occurred more than 30 years ago. Dr. Lorico then explained the circumstances surrounding the three cases of malpractice that had been filed against her that resulted in settlements.

Dr. Muro asked Dr. Lorico what she planned to do if granted a license to practice medicine in Nevada.

Dr. Lorico said she had applied to work at a teaching hospital, but could not enter into a contract with the hospital at the time because she did not have a Nevada license; however, the hospital may have another position available this spring. She would mainly be teaching the fellows and residents, but would also be seeing patients and could possibly be performing surgical procedures within her scope of practice. Dr. Muro asked her when she last performed surgical procedures, and she stated it was in 2015.

Dr. Muro stated he was concerned with Dr. Lorico's lack of recent standardized testing and recertification, as well as her failure to disclose some of the malpractice cases that had been filed against her.

Dr. Berndt asked Dr. Lorico whether she considered herself a mainstream medicine practitioner or an alternative medicine practitioner, and she said she was 90% mainstream.

Discussion ensued regarding whether it would be appropriate to require Dr. Lorico to undergo to a peer review.

Dr. Hardwick asked when she last treated a patient, and Dr. Lorico said it was in July 2015.

Dr. Muro moved that the Board grant Dr. Lorico an unrestricted license contingent upon successful passage of a peer review. Dr. Fischer seconded the motion.

Mr. Cousineau stated he had grave concerns regarding the fact that Dr. Lorico did not recall a settlement as large as \$800,000, regardless of whether it was 30 years ago, and in the time he has been with the Board, it is the largest non-reported settlement he has seen. If she is going to be teaching our students, veracity and integrity are just as important as clinical competency, and he is extremely troubled that there were several cases that were not reported by her.

Dr. Lorico said if she couldn't remember, she couldn't remember, and if something jarred her memory, it jarred her memory. It is a very traumatic experience for doctors to be sued, especially the first time, and it must have been selective amnesia or post-traumatic stress syndrome – she doesn't know. There was no intent on her part to delay or whatever.

Dr. Muro asked Dr. Lorico whether she would be willing to withdraw her application and provide the additional information on a new application now that she recalls it. Dr. Lorico said she thought she had just provided it.

A vote was taken on the motion and it passed, with Dr. Berndt, Mr. Duxbury and Ms. Mastroluca voting against the motion and the remaining Board members voting in favor of the motion.

Ms. Daniels described the peer review process and advised Dr. Lorico that she would be responsible for the peer review fees.

(c) Mohammad Nagy, M.D.

Dr. Nagy appeared in Las Vegas.

Dr. Fischer asked Dr. Nagy whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Dr. Berndt questioned Dr. Nagy regarding his training, board certification and medical practice.

Dr. Nagy described his training, and said he was board certified in Internal Medicine. At the time he certified, there were no boards in Hematology. He has not recertified, as he was grandfathered in. He practiced Hematology Oncology until 2013, when he sold his practice, and he had not practiced clinical medicine since that time because he could not practice for three years pursuant to a restrictive covenant contained in the sales contract.

Dr. Berndt asked Dr. Nagy whether he had served on the Board of Medical Examiners previously, and Dr. Nagy stated he had.

Dr. Berndt asked Dr. Nagy what he planned to do if the Board granted his request to change his license status to active, and Dr. Nagy said he planned to practice pro bono at a charity clinic.

Dr. Berndt asked Dr. Nagy to describe his proposed preceptor plan, in the event the Board required Dr. Nagy to have a preceptor, and Dr. Nagy did so.

Dr. Berndt moved that the Board grant Dr. Nagy's request to change license status from inactive to active. Dr. Prabhu seconded the motion.

Mr. Cousineau asked whether there was any desire on the part of the Board for Dr. Nagy to enter into the preceptorship, and Dr. Berndt stated that Dr. Nagy is well qualified and will be working with an Oncologist, so he didn't think he needed a preceptor. Dr. Prabhu concurred.

A vote was taken on the motion and it passed unanimously.

(d) Adam Brochert, M.D.

Dr. Fischer asked Dr. Brochert whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did.

Dr. Neyland moved that the Board go into closed session pursuant to NRS 241.030. Dr. Prabhu seconded the motion and it passed unanimously.

Upon returning to open session, Dr. Prabhu moved that the Board grant Dr. Brochert's application for licensure. Dr. Hardwick seconded the motion and it passed unanimously.

(e) Lee Beville, III, M.D.

Dr. Berndt asked Dr. Beville whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Dr. Fischer questioned Dr. Beville regarding his affirmative response to Question 12 on his application for licensure.

Dr. Beville explained the circumstances surrounding the one case of malpractice that had been filed against him that resulted in a settlement.

Dr. Fischer questioned Dr. Beville regarding his affirmative response to Question 27 on his application for licensure.

Dr. Beville explained the circumstances surrounding denial of his applications for licensure in Ohio, Louisiana and Missouri.

Dr. Fischer moved that the Board grant Dr. Beville's application for licensure. Dr. Hardwick seconded the motion and it passed unanimously.

(f) Julian Losanoff, M.D.

Dr. Fischer asked Dr. Losanoff whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Dr. Hardwick questioned Dr. Losanoff regarding the fact that he had not completed 36 months of progressive postgraduate training in the United States or Canada and had not passed a major examination in the past 10 years.

Dr. Losanoff described his training and his past medical practice. He said he had unrestricted licenses in Illinois and Michigan. He is currently the Chief of Surgery at the VA in Las Vegas.

Dr. Hardwick asked if he would ever be eligible to be board certified in general surgery, and Dr. Losanoff explained he would not because in order to do so, he would need to attend a residency program, and there is no residency program available to him.

Dr. Berndt asked whether it was his intention to continue working at the VA, and Dr. Losanoff said he has dedicated himself to the organization and intends to continue there, and also continue teaching at the medical schools in Las Vegas, but does not intend to go into private practice.

Dr. Hardwick moved that the Board grant Dr. Losanoff an unrestricted license by endorsement. Dr. Berndt seconded the motion and it passed unanimously.

(g) Jay Eneman, M.D.

Dr. Fischer asked Dr. Eneman whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Dr. Fischer stated the Board had received the report from the peer reviewer and asked Dr. Eneman whether he had read it. Dr. Eneman stated he had not received it.

Dr. Fischer read the last paragraph of the report to him, which included a recommendation from the peer reviewer that Dr. Eneman be given a restricted license.

Dr. Fischer stated the Board was in a bit of a predicament because Dr. Eneman was requesting an unrestricted license and an unrestricted license would allow him to perform orthopedic surgery.

Dr. Eneman stated that he had no plans to perform surgery; however, he did not want a restricted license. He explained that whenever he applies to an insurance carrier, there is always a question asking whether his license has been restricted, and although he and the Board may understand that the restriction is that because of his age he is not doing surgery, if he has a restricted license, most companies will not accept or use him as a provider or for any type of activities with them, even if he provides an explanation. So he is sure the Board can understand his predicament. He stopped doing surgery in October 2012, and has no desire to go back into surgery at this time. However, a restricted license would be detrimental to his function, whether it be in New York or Nevada. He said if he knew this was going to be an issue, he probably would not have taken the time to do the peer review and would just have rescinded his application, and if the license would have to be restricted, he wanted to rescind his application.

Dr. Fischer said that would probably be the wisest thing for Dr. Eneman to do.

Dr. Eneman said he didn't understand how the peer reviewer could tell whether he was competent or not in surgery when he had never seen him operate and why he would have put that in there unless the Board had requested it.

Dr. Fischer stated the Board did not request it.

Dr. Eneman stated he was withdrawing his application.

(h) Reuben Thaker, M.D.

Dr. Fischer asked Dr. Thaker whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did.

Dr. Prabhu moved that the Board go into closed session pursuant to NRS 241.030. Dr. Neyland seconded the motion and it passed unanimously.

Upon returning to open session, Dr. Neyland moved that the Board grant Dr. Thaker's application for licensure. Dr. Prabhu seconded the motion and it passed unanimously.

(i) Indira Mahidhara, M.D.

Tracy Singh, Esq. was present with Dr. Mahidhara as her legal counsel.

Dr. Fischer asked Dr. Mahidhara whether she wanted her application to be considered in closed session, with the public being excluded, and she said that she did not.

Dr. Muro questioned Dr. Mahidhara regarding that fact that she had not practiced patient care since 2009.

Dr. Mahidhara confirmed that she was participating in the Physician Retraining and Reentry Program at University of California San Diego (UCSD).

Ms. Singh stated that if her application was going to be denied because of her lack of clinical experience in recent years, Dr. Mahidhara would prefer to withdraw her application. However, they understand there are ways she can prove her competency. If the program Dr. Mahidhara is currently taking is not sufficient, she would prefer a peer review to a preceptorship.

Dr. Mahidhara confirmed she was currently board certified and had recertified in Family Medicine in 2013.

Dr. Mahidhara described the UCSD program and said she hoped that upon successful completion of the program, the Board would feel comfortable with her clinical competence.

Discussion ensued regarding whether completion of the UCSD program would be sufficient or whether Dr. Mahidhara should also be required to undergo a peer review or a preceptorship.

Dr. Muro moved that the Board grant Dr. Mahidhara an unrestricted license contingent upon successful completion of the UCSD program.

Further discussion ensued regarding whether completion of the UCSD program would be sufficient, since it was a program that is unfamiliar to the Board, or whether Dr. Mahidhara should also be required to undergo a peer review after she completes the program. Dr. Fischer asked her if she would be willing to undergo a peer review, and Dr. Mahidhara stated she would.

Dr. Muro amended his motion to grant Dr. Mahidhara an unrestricted license upon successful completion of the UCSD program she is currently enrolled in and subsequent to that, successful completion of a peer review in the specialty of Family Medicine. Dr. Hardwick seconded the motion.

Discussion ensued regarding whether Dr. Mahidhara should be required to complete the UCSD program or whether the Board should issue her a license contingent only upon successful completion of a peer review.

A vote was taken on the motion and it passed unanimously.

(j) Jason Shaffer, RRT

Dr. Fischer asked Mr. Shaffer whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Ms. Peltyn questioned Mr. Shaffer regarding his affirmative response to Question 13 on his application for licensure.

Mr. Shaffer said he regretted all those things he had done in the past and had made a lot of changes in his life. He doesn't drink or party, he has become a personal trainer and his lifestyle is all about health and fitness.

Ms. Peltyn asked him if he had completed the counseling he had been ordered to do. He stated he had completed all the counseling he was required to do. He said he knows there was a problem with the court in Crawford County, in that the paperwork had not been filed, but it did get filed after he requested that the information be sent to the Board and they sent a letter indicating it was missed on their part. Ms. Daniels confirmed that the Board had received the letter.

Mr. Shaffer told the Board he had entered into a six-month contract with a diversion program in Las Vegas.

Dr. Fischer asked Mr. Shaffer if he thought he was an alcoholic, and Mr. Shaffer said he did not.

Dr. Prabhu moved that the Board grant Mr. Shaffer's application for licensure. Dr. Neyland seconded the motion. Ms. Daniels stated that since Mr. Shaffer had a six-month contract with a diversion program, he would be granted a license with the condition that he complete the program. When he has completed the diversion program, the condition will be removed from his license. Mr. Cousineau added that Mr. Shaffer will not have to come back before the Board for the condition to be removed.

A vote was taken on the motion and it passed unanimously.

Ms. Peltyn left the meeting at 12:50 p.m.

Agenda Item 13

CONSIDERATION AND APPROVAL OF REVISIONS TO BOARD POLICY AND PROCEDURE MANUAL, TO INCLUDE MODIFICATION OF EXISTING POSITION DESCRIPTIONS FOR RESEARCH ANALYST AND INVESTIGATOR AND CREATION OF NEW POSITION DESCRIPTION FOR SENIOR INVESTIGATOR

Mr. Cousineau stated that Libi Anders currently fills the position of Research Analyst, and he would like to add to the title the position of Public Information Officer, as Ms. Anders already performs many of the functions that would be consistent with what would be expected of a Public Information Officer. He explained Ms. Anders has, for quite a while now, assisted him with preparing speeches, fact sheets, press releases, and the like, and she is more than willing to assist him with legislative, Board-related or press-related matters. He believes the Board needs a Public Information Officer, and although her title will not be solely that, Ms. Anders will be the one who will be interfacing with the public and the press, as necessary. He said he wanted to make it clear that Ms. Anders will not become the spokesperson for the Board, that duty will remain with him, and that comes at the direction of Dr. Fischer, who has delegated those responsibilities. Additionally, he was requesting an increase in Ms. Anders' salary of approximately 10%, based upon the additional duties with the position, which would bring her to approximately \$61,000 a year, which is well within the confines of the average for other Public Information Officers in the public sector in the state.

Dr. Hardwick moved that the Board add Public Information Officer to the position of Research Analyst, with an increase in salary to \$61,000. Dr. Berndt seconded the motion and it passed unanimously.

Ms. Castagnola stated that recently, one of the Investigations Division's Administrative Assistants had been promoted to the position of Investigator. In reviewing that, she suggested the Board establish a Senior Investigator position to differentiate between those investigators who are newly hired or have less than a couple of years' experience, and are basically in the training phase, versus those Investigators, of whom we have a number, who have 8 to 10 years or more experience, to show our appreciation and give them a career path based on their experience other than being promoted to a supervisory position. The Senior Investigator position requires more investigative experience and will allow for an increase in salary.

Dr. Prabhu moved that the Board approve the creation of a new position of Senior Investigator. Dr. Neyland seconded the motion and it passed.

Agenda Item 14

PERSONNEL

- Annual Performance Evaluation of Executive Director

Dr. Fischer stated he had given Mr. Cousineau an A+ for his performance since he has ascended to the position of Executive Director.

Dr. Neyland moved to accept the evaluation of Mr. Cousineau as Executive Director. Ms. Peltyn seconded the motion.

Dr. Hardwick stated he had attended the meeting in Chicago on the formation of the Interstate Medical Licensure Compact, and Mr. Cousineau plays an active role in the Compact and is one of the leaders there.

Dr. Berndt stated the Board had made a very good decision.

A vote was taken on the motion and it passed unanimously.

Agenda Item 15

MATTERS FOR FUTURE AGENDAS

Mr. Cousineau stated the following items would be on the agenda for a future meeting: the results of the annual financial audit at the June meeting; the 2015 annual report; consideration of reducing the registration fees for new applicants, commensurate with the lowered fees for the last renewal cycle, which was approximately 10% per licensure category; and discussion regarding proposed legislative initiatives at either the June or September meeting.

Agenda Item 16

STAFF COMMENTS/UPDATES

Ms. Munson provided a brief update regarding the status of the Board's database software upgrade.

Mr. Rich provided an update regarding the various outreach initiatives of the Board. He explained that staff is currently working with the University of Nevada School of Medicine to get approval for the Board's CME program, which will provide two CME credits in ethics, and we are probably two weeks away from receiving it. Staff plans to offer at least one program in Las Vegas and one in Reno, and is also considering going to some of the rural areas to reach out to physicians there. Staff would also like to engage with other stakeholders in perhaps a less formal manner to educate them as to what the Board does. The Board does a lot of good things, and he thinks it is incumbent upon all of us to make sure that consumers understand what we do and licensees understand we are trying to help them.

Agenda Item 17

PUBLIC COMMENT

Dr. Fischer asked whether there was anyone in attendance who would like to present public comment. No public comment was received.

Agenda Item 18

ADJOURNMENT

Dr. Prabhu moved to adjourn the meeting. Dr. Hardwick seconded the motion and it passed unanimously. Dr. Fischer adjourned the meeting at 1:33 p.m.

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