NEVADA STATE BOARD OF MEDICAL EXAMINERS

9600 Gateway Drive Reno, NV 89521

Rachakonda D. Prabhu, M.D. Board President Edward O. Cousineau, J.D. Executive Director



* * * M I N U T E S * * *

OPEN SESSION BOARD MEETING

Held in the Conference Room at the Offices of the Nevada State Board of Medical Examiners 9600 Gateway Drive, Reno, Nevada 89521

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, JUNE 1, 2018 - 8:30 a.m.

Board Members Present

Rachakonda D. Prabhu, M.D., President Wayne Hardwick, M.D., Vice President Mr. M. Neil Duxbury, Sccretary-Treasurer Ms. Sandy Peltyn Victor M. Muro, M.D. Ms. April Mastroluca Aury Nagy, M.D. Michael C. Edwards, M.D., FACS Weldon Havins, M.D., J.D.

Board Members Absent
None

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(NSPO Rev. 4-18)

Staff/Others Present

Edward O. Cousineau, J.D., Executive Director
Jasmine K. Mehta, J.D., Deputy Executive Director
Donya Jenkins, Finance Manager
Robert Kilroy, J.D., General Counsel
Aaron Bart Fricke, J.D., Deputy General Counsel
Donald K. White, J.D., Deputy General Counsel
Laurie L. Munson, Chief of Administration and Information Systems
Pamela J. Castagnola, CMBI, Chief of Investigations
Lynnette L. Daniels, Chief of Licensing
Henna Rasul, J.D., Senior Deputy Attorney General

Agenda Item 1

CALL TO ORDER AND ANNOUNCEMENTS

- Roll Call/Quorum

The meeting was called to order by President Rachakonda D. Prabhu, M.D., at 8:32 a.m.

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

Ms. Daniels introduced new License Specialist Jennifer Grogan.

Agenda Item 2

PUBLIC COMMENT

Dr. Prabhu 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

- (a) April 13, 2018 Board Meeting Open/Closed Sessions
- (b) May 14, 2018 Board Meeting Open Session

Ms. Mastroluca requested that a correction be made to the April 13, 2018 Open Minutes regarding Agenda Item 15(i). She explained the proposed Minutes stated the following: "Dr. Muro moved that the Board deny Dr. Kalen's application for licensure by endorsement. Ms. Mastroluca seconded the motion, and it failed, with Dr. Prabhu, Mr. Duxbury, Ms. Peltyn and Dr. Havins voting in favor of the motion." However, the Minutes should reflect the opposite – that Dr. Prabhu, Mr. Duxbury, Ms. Peltyn and Dr. Havins voted against the motion and Dr. Muro, Ms. Mastroluca, Dr. Nagy and Dr. Edwards voted for it.

Dr. Havins stated that at the top of page 20, the proposed Minutes said stated he said the Board is able to approve Category I AMA credits. He said he hoped that was not what he said, as what he meant to say was he thought the Board, in the past, had some talks that received CME-type credits for the purpose of re-licensure, and that the Board's expert witnesses receive the equivalent of CME credit for re-licensure. Also, if the Board's outreach program could receive the equivalent of CME credit for re-licensure, there would probably be much better attendance. He said that is what he meant, and if that could be corrected, he would appreciate it.

Dr. Havins clarified that he was referring to peer reviewers and not expert witnesses.

Mr. Cousineau asked for clarification regarding what Dr. Havins wanted corrected.

Dr. Havins said the Board would, of course, have to become ACCME accredited to offer Category I credit, which the Board is not.

Mr. Cousineau explained that the Board's outreach program had been approved by UNSOM for two hours of CME credit, and it had been offered for the last several years. He said he wanted to clarify that Dr. Havins wanted his comments at the top of the page to be specifically about the peer reviewers.

Dr. Havins indicated he did, and said that since the outreach is already receiving Category 1 AMA credits through UNR, that is excellent, and that point was moot.

Ms. Mastroluca moved that the Board accept the Minutes of April 13, 2018 with the corrections noted. Dr. Edwards seconded the motion, and it passed unanimously.

Ms. Mastroluca moved that the Board accept the Minutes of May 14, 2018. Mr. Duxbury seconded the motion, and it passed unanimously.

Agenda Item 4

CONSIDERATION AND APPROVAL OF FY 2017 ANNUAL AUDIT BY KOHN & COMPANY LLP, CERTIFIED PUBLIC ACCOUNTANTS

Connie Christiansen, CPA, CFE, CGMA, of Kohn & Company LLP, gave a PowerPoint presentation summarizing the results of the Board's 2017 financial audit. She stated the Board had received an unmodified opinion on its financial statements, which is the highest level of assurance you can have on an audit. She said with respect to internal controls, no material weaknesses or material instances of noncompliance were identified. Thus, the separate report required for governmental entities also received an unmodified opinion. She stated there were no difficulties encountered during the audit; staff, as always, was extremely well-prepared and helpful, and provided all the information requested. There were no proposed adjusting journal entries as a result of the audit, and no disagreements with management. There were no transactions that lacked authoritative guidance. She explained a new Government Accounting Standards Board (GASB) Pronouncement, Statement Number 82, had been implemented, which affects pension reporting and the deferred outflows, particularly some changes in actuarial assumptions, which resulted in a prior period adjustment of about \$240,000.00. She said all significant transactions were recognized in the proper period. She then described the more significant estimates and the more significant disclosures in the Board's financial statements.

Ms. Christensen outlined the Board's licensing levels over the last four years. She explained that the number of new licenses continues to increase slightly each year, and the Board is at a record level of total licensees. She outlined the revenue and expenses over the last four years, as well as the change in net position over that period. She stated the drop in net position was planned, in an effort to contain fees, and also in anticipation of expanding services the Board offers. She explained that the majority of the Board's assets are in cash and cash equivalents, and the Board's largest liability has to do with the deferred revenue for licensing.

Dr. Havins asked Ms. Christensen how the net position was arrived at. Ms. Christensen explained that the net position is the assets and deferred outflows net of the liabilities and deferred

inflows. Dr. Havins asked Ms. Christensen about the PERS liability, and Ms. Christensen explained it.

Mr. Duxbury said he was very pleased to see such an excellent report and that "zero adjustments" is difficult to achieve. He said Ms. Jenkins does a fantastic job in providing information that is complete and accurate.

Mr. Duxbury moved that the Board approve the audit. Ms. Mastroluca seconded the motion, and it passed unanimously.

Agenda Item 5

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

 Request for Authorization to Proceed With the Regulatory Adoption Process to Repeal NAC 630.205, Regarding Prescription of Appetite Suppressants (R008-17)

Ms. Mehta explained the reason this was on the agenda was that this particular regulatory change didn't previously have an "R" number. An "R" number is what is issued by the Legislative Counsel Bureau (LCB). When she took over the position of Deputy Executive Director, a workshop had already been scheduled on this change, so she assumed that everything was in order; however, it wasn't. She explained that on April 9, she received an email from the LCB transmitting approved language from the LCB for this regulatory change. The Board had already approved this regulatory change, to remove the requirements to see a physician for the prescription of appetite suppressants. So when she received the April 9 email, she was confused because the Board had already gone through the regulatory process. She contacted the LCB, and the LCB said they had worked on it in June of last year, but never got the LCB-approved language to the Board until almost a year later, in April 2018. They didn't know what had happened, but said under NRS 233B, the Board would have to go through the regulatory process all over again. The LCB-approved language changed the language that had previously gone to workshop by removing in NAC 630.187 the reference to the Dietary Guidelines for Americans. So this is a change from what the Board had already approved. Staff was seeking approval to go forward with the workshop and hearing process again so the Board can get this one removed from the books.

Dr. Havins moved to approve moving forward with the workshop and hearing process. Dr. Edwards seconded the motion, and it passed unanimously.

Agenda Item 6

ADJUDICATION IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. ALBERT CAPANNA, M.D., BME CASE NO. 12-6789-1

This item was not discussed at the meeting.

Agenda Item 7

CONSIDERATION OF REQUEST OF MADELINE R. HARDACRE, M.D. FOR REMOVAL OF CONDITION ON HER MEDICAL LICENSE

Elizabeth Hutson, M.D., Dr. Hardacre's preceptor, was present with Dr. Hardacre.

Dr. Hardacre explained that she had appeared before the Board a year ago, seeking a medical license after taking a few years off, and presented a preceptorship plan, which the Board approved, to practice for a year under Dr. Hutson's guidance. That has been completed, so she was requesting that the condition be removed so she would have a true active license in the state of Nevada.

Dr. Hutson said they had practiced together over the last year, and she couldn't think of anyone she would rather be in practice with than Dr. Hardacre. Their practice is set up as a gynecology and urogynecology practice. Dr. Hutson focuses mostly on doing minimally-invasive surgery and in-office procedures, and brought Dr. Hardacre on to see new patients as consults coming in, and then she would operate on them. So Dr. Hardacre is doing in-office clinic gynecology, and Dr. Hutson does the surgery part of it, as well as some office gynecology. The practice model has worked amazingly well and has been very successful. Patients love Dr. Hardacre; Dr. Hutson loves practicing with her and has learned so much from her. Dr. Hutson said she thinks a year preceptorship was too much as far as determining whether Dr. Hardacre is ready to see patients and is doing a good job at what she is doing. She gives Dr. Hardacre a 12 out of 10 rating and asked that the Board lift her conditions because she is doing a fantastic job and she thinks the state of Nevada is lucky to have her.

Dr. Hardwick asked if it was correct that the preceptorship was originally for 12 months, but they wanted to end the preceptorship at 9 months. Dr. Hutson stated it was.

Ms. Mastroluca asked what Dr. Hardacre's future plans were.

Dr. Hardacre said she planned to continue working with Dr. Hutson.

Ms. Daniels complimented Dr. Hutson regarding the timeliness and thoroughness of her reports.

Dr. Hardwick moved that the Board lift the condition on Dr. Hardacre's license and complete the preceptorship at this point. Dr. Nagy seconded the motion, and it passed unanimously.

Agenda Item 8

CONSIDERATION OF REQUEST OF MEHRAN SALEK, M.D., FKA MOHAMMAD FANI-SALEK, M.D., FOR REMOVAL OF THE "REVOKED" LICENSURE STATUS ON HIS MEDICAL LICENSE AND AUTHORIZING THE BOARD TO PROCESS HIS CURRENTLY PENDING APPLICATION FOR LICENSURE

Maria Nutile, Esq. appeared with Dr. Salek as his legal counsel.

Ms. Nutile stated that even though the agenda item said "removal of the revoked licensure status," they really didn't have any hope for that; what they were looking for was a pathway for Dr. Salek to be able to reapply again to the Board. She said she had been involved in the case for 14 years, and then provided background regarding the matter, including the following. Dr. Salek completed his education in Iran, then residency training first in New York and then in Nevada, and was granted an unrestricted license to practice medicine in Nevada in 2004. He had been practicing for about 6 months when he was notified the Board had received letters from a Dr. Nejad in Iran with allegations he hadn't completed his medical training.

Ms. Nutile explained that Dr. Salek had completed his schooling. However, in Iran, after that, you are required to work for the Iranian government for a period of time from 3 to 5 years.

Dr. Salek only worked for a year and a half because if you don't want to work the rest of the time, you can pay the University, which he did. Eventually, he made his way to the U.S., where he finished residency and obtained his medical license. Ms. Nutile said she spoke with Bonnie Brand, General Counsel for at the Board at the time, who said the Board had received the letters and didn't want Dr. Salek to practice. Ms. Nutile advised Dr. Salek not to practice, and he agreed he would not do so. Ms. Brand said the Board would allow Dr. Salek get something to show that he graduated, even though he already had the certificates from the Educational Commission for Foreign Medical Graduates (ECFMG), and such. Relations between the U.S. and Iran were strained, and to this day, are strained. Someone contacted the Board and said he/she would go to Iran and talk to Dr. Nejad, and apparently did so. However, the name of that person was never disclosed to Dr. Salek, and that person never testified at the Board hearing. Ms. Nutile then read excerpts from Synopsis of the hearing officer who presided over the hearing, which included that he found "respondent's argument that Iran and the United States do not have the best relationship believable," "and therefore believable that Iran/Dr. Nejad may not be credible, especially since respondent was to provide medical services for some period in Iran after his graduation; respondent testified he did not fulfill this obligation." Ms. Nutile said additionally, the hearing officer found to be credible the declaration provided in support of Dr. Salek from an Arizona physician who had gone to the same school as Dr. Salek and graduated with him. However, that physician was not at the hearing. Ultimately, the hearing officer left the decision to the Board's discretion. The Board revoked Dr. Salek's license in 2005. Ms. Nutile said they realize the Board had the discretion to revoke Dr. Salek's license, but they believe there were other reasons. One was the President of the Board at that time was an OB/GYN with whom Dr. Salek had done a rotation at UMC, and they did not have the best relationship. He tried to get Dr. Salek ousted from the program because his work visa had expired. Dr. Salek appealed to the Nevada Supreme Court in 2006, and the Nevada Supreme Court upheld the Board's decision.

Ms. Nutile explained that the Ministry of Health in Iran investigated the matter of Dr. Salek's educational documents, but to complete its investigation, it needed Dr. Salek's file from the University, and the University, specifically Dr. Nejad, refused to release the file. Dr. Salek sued the University and, in 2007, the court ordered the University to turn over the file. It took until 2010 for the Ministry of Health to get the file, and in 2011, Dr. Salek's diploma was conferred. Dr. Salek was hired by the University of Tehran as an Associate Professor of OB/GYN and taught residents. At the same time, he started his private practice in Iran. In 2015, he stopped working at the University and continued solely with his private practice.

Ms. Nutile stated that in 2006, ECFMG revoked Dr. Salek's certificate due to the Board's action. After his diploma was issued and he obtained his license in Iran, Dr. Salek went to the ECFMG. The ECFMG held a hearing and rescinded the revocation, meaning that his certificate from 1999 still stands. Dr. Salek tried to reapply for a license in Nevada; however, due to changes in the regulation in 2007 regarding Step 3 of the United States Medical Licensing Examination (USLME), Dr. Salek no longer meets the criteria to do so.

Mr. Cousineau explained the regulation allows 3 attempts to pass Step 3 and Dr. Salek took it 5 times, and that is why staff did not believe Dr. Salek was eligible for licensure.

Ms. Nutile said technically on its face, Dr. Salek wasn't eligible; however, at the time he took Step 3 of the USMLE, he would have had no way of knowing that if he took it 4 times, rather than 3, he wouldn't be able to apply to a particular state, and had his license not been revoked, he wouldn't be in this situation. She said he has tried to obtain a license in other states and the revocation in Nevada was an issue.

Ms. Nutile read NRS 630.160(2)(c), regarding examinations which provide eligibility for licensure, and stated the first two are no longer available, so there really was no other pathway. She said if you hold a license in another state, the number of times you take Step 3 of the USMLE doesn't matter because you can get a license by endorsement, but if you hold a license in another country, you can't apply for licensure by endorsement. So they were asking for some combination to be put together for a pathway for Dr. Salek to reapply. She said they think the whole purpose behind the number of times someone takes the USMLE is to show competency, and Dr. Salek could show his clinical competency. He has been practicing for the last 7 years and taught for 3 or 4 of those years as an associate professor.

Mr. Cousineau said he wanted the Board to understand that what they were referring to relates specifically to subsection (3) of NRS 630.160(2)(c), the USMLE requirement. He said based on statute and regulation, there is no legal way to give Dr. Salek an opportunity to obtain licensure other than to allow Dr. Salek to sit for the SPEX examination, and the Board has to sponsor an individual to sit for that examination.

Ms. Nutile said she would not concede there is no legal way because she thinks the statute trumps the regulation and the Board has discretion; however, Dr. Salek would be very willing to demonstrate his competency by sitting for the SPEX examination; he is not opposed to that.

Discussion ensued regarding whether it would be appropriate for the Board to rescind revocation of Dr. Salek's license.

Mr. Cousineau asked Dr. Salek whether he would be able to sit for his ABMS boards with a revocation, and Dr. Salek said he could.

Mr. Cousineau asked whether, if Dr. Salek took the SPEX examination and received his license in Nevada, he would be willing to not practice medicine until he passed his ABMS Boards.

Dr. Salek stated the ABMS would be next year.

Discussion ensued regarding how the Board should proceed.

Dr. Muro moved that the Board sponsor Dr. Salek to sit for the SPEX examination. Dr. Hardwick seconded the motion.

Mr. Cousineau stated that Dr. Salek would have to come back before the Board after that.

Ms. Nutile said they understood that.

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

Agenda Item 9

CONSIDERATION OF RECOMMENDATIONS FROM THE NEVADA STATE BOARD OF MEDICAL EXAMINERS R100-17 SUBCOMMITTEE REGARDING PROPOSED REGULATION R100-17 AND TO CLARIFY IMPLEMENTATION OF ASSEMBLY BILL 474 (2017)

Ms. Mehta explained that the Board approved formation of a subcommittee with respect to the disciplinary regulation the Board was required to implement under AB 474 regarding prescription of controlled substances. There was a lot of concern voiced by licensees regarding ambiguity in the law and being required to answer for failure to comply when there were so many

questions about the implementation of the regulation. The regulations that are required to be implemented by the Pharmacy Board are enforceable by this Board, but they are not our regulations. AB 474 specifically gave to the Pharmacy Board the ability to implement regulations that would clarify implementation of the bill and required this Board to implement CME requirements and a disciplinary regulation. To address the confusion and consternation the licensees were feeling, and rightly so, the Board authorized formation of a subcommittee, which was comprised of 18 members who met regularly. She commended the members of the subcommittee because they took a significant portion of their time to attend these meetings every other week, for a period of two and a half months. The subcommittee accomplished an incredible amount of work in that time frame. Members of the Pharmacy Board were on the subcommittee. and they took the conversations held by the subcommittee and put together a proposed regulation that would help clarify and address some of the concerns. She said the letter provided to the Board in its meeting materials contains the subcommittee's recommendations to the Board to support implementation of regulations by the Board of Pharmacy, which were included as an attachment, as well as the subcommittee's recommendations with respect to the Board's proposed disciplinary regulation. She then outlined the recommendations regarding the proposed disciplinary regulation.

Dr. Muro added that this was an attempt to provide clarity and direction with respect to AB 474. There was a lot of concern and confusion regarding how it is going to impact the providers and continuity of care. The concern with prescription of controlled substances is always on everyone's mind, but at the same time, we have folks who are legitimately in need of such medication. He said a variety of groups were represented on the subcommittee, which he thinks helped carry things forward and took into account the specific needs of everyone from the oncologists to hospice to emergency room physicians, while at the same time maintaining the integrity of the Bill and its intent, or what we all believe the intent to be. The process was very interactive, very collegial, and a lot of people put in a tremendous amount of effort. He thanked everyone who participated.

Dr. Edwards added that this will give a lot of reassurances back to the Board's licensees, and will clarify a lot of the questions.

Dr. Hardwick said the meetings were very well run by Dr. Muro and Ms. Mehta. He thinks the bottom line is reasonable and accurate dispensing of controlled substances, and he thinks we are really approaching that.

Dr. Nagy asked about the previously proposed disciplinary regulation.

Ms. Mehta explained that the recommendation from the subcommittee is to withdraw the previously proposed regulation and replace it with the subcommittee's proposed language.

Mr. Cousineau said the Board needed to adopt the recommendations of the subcommittee as to the regulations that are being advanced by the Pharmacy Board in order to clarify certain language of AB 474; authorize Ms. Mehta to proceed forward with the regulatory adoption process anew with the language recommended by the subcommittee; and authorize the pull-back or the repeal of R100-17.

Dr. Havins moved that the Board rescind proposed regulation R100-17 and move forward with adoption of the regulation proposed on the second page of the letter from the subcommittee.

Discussion ensued regarding the motion.

Dr. Havins withdrew his motion.

Mr. Cousineau suggested an appropriate motion would be to adopt the collective recommendations of the subcommittee included in the meeting materials under Tab 9.

Ms. Peltyn so moved. Dr. Nagy seconded the motion, and it passed unanimously.

Agenda Item 10

<u>CONSIDERATION OF DISSOLUTION OF THE NEVADA STATE BOARD OF MEDICAL</u> EXAMINERS R100-17 SUBCOMMITTEE

Ms. Mehta explained that since the duties of the subcommittee were delineated by the Board and those duties had been fulfilled, the Board could now dissolve the subcommittee.

Dr. Hardwick moved that the Board dissolve the subcommittee. Dr. Edwards seconded the motion, and it passed unanimously.

Agenda Item 11

REPORTS

(a) Investigative Committees

Dr. Hardwick reported that at its March 18, 2018 meeting, Investigative Committee A considered 87 cases. Of those, the Committee authorized the filing of a formal complaint in 9 cases, sent 11 cases out for peer review, requested an appearance in 3 cases, issued 18 letters of concern, referred 4 cases back to investigative staff for further investigation or follow-up, and recommended closure of a total of 42 cases.

Dr. Prabhu reported that at its March 9, 2018 meeting, Investigative Committee B considered 94 cases. Of those, the Committee authorized the filing of a formal complaint in 3 cases, sent 12 cases out for peer review, requested an appearance in 5 cases, issued 16 letters of concern, referred 4 cases back to investigative staff for further investigation or follow-up, and recommended closure of a total of 54 cases.

(b) Nevada State Medical Association

Catherine O'Mara, Executive Director of the Nevada State Medical Association (NSMA), welcomed the Board to its new office. She said she wanted the Board to take a moment to appreciate the accomplishments of the subcommittee because it was a very incredible thing the Board did by embracing its licensees and working with staff from other Boards to work out a problem that has really caused its licensees a lot of consternation. She said she really appreciated the opportunity to be part of the subcommittee, and that it was very productive. Her two key takeaways from that experience were (1) don't underestimate the power of Board members engaging in this type of process; and (2) some continued education to the licensees about the disciplinary process is needed. She reported that with respect to AB 474, NSMA continues to work really hard to improve the workflow issues the Bill created. The Board of Pharmacy has a regulation hearing next Thursday, and NSMA believes there will be a second wave of regulations to help further clear up some of those workflow issues. She stated another challenge Board licensees are having has nothing to do with the law, but seems to be a side effect of the law: they are now struggling with pharmacist and pharmacy national policies getting in the way of physicians prescribing to their patients and also new prior authorization rules that payers have started

implementing. She said NSMA is working on this at the national level to try to negotiate some better resolutions with some of the pharmacy chains, which all have different ways of interpreting the requirements and different ways of curbing dispensing of opioids. She reported that NSMA had a delegation who would be attending the AMA annual meeting in Chicago the following Friday, and that Dr. Hardwick was part of that.

(c) Clark County Medical Society

Catherine O'Mara, Executive Director of the NSMA, provided a report at the request of Alexandra P. Silver, Executive Director of the Clark County Medical Society (CCMS). She said the following day was the 64th annual installation dinner turned luncheon, and described some of the events that would be part of the installation program. CCMS is a proud supporter of Touro University and has donated \$13,000.00 to its scholarship fund this year. CCMS has hired a new staff member: Emma Gould will be its Membership and Engagement Coordinator.

Agenda Item 12

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. RIMTAUTAS MARCINKEVICIUS, M.D.*, BME CASE NO. 18-11842-1

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

Mr. White stated a formal Complaint had been filed against Dr. Marcinkevicius alleging three violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Havins moved that the Board approve the Settlement Agreement. Ms. Mastroluca seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 13

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA*STATE BOARD OF MEDICAL EXAMINERS VS. SCOTT MATTHEW MARTIN, M.D., BME
CASE NO. 18-43110-1

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

Mr. Fricke stated a formal Complaint had been filed against Dr. Martin alleging two violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Ms. Mastroluca moved that the Board approve the Settlement Agreement. Dr. Havins seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 14

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA*STATE BOARD OF MEDICAL EXAMINERS VS. DHIRAJ RAJ JEYANANDARAJAN, M.D.,
BME CASE NO. 18-39711-1

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

Mr. Fricke stated a formal Complaint had been filed against Dr. Jeyanandarajan alleging two violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Edwards moved that the Board approve the Settlement Agreement. Ms. Peltyn seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 15

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA*STATE BOARD OF MEDICAL EXAMINERS VS. JASON EMER, M.D., BME CASE NO. 1843242-1

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

Mr. White stated a formal Complaint had been filed against Dr. Emer alleging two violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Edwards moved that the Board approve the Settlement Agreement. Ms. Mastroluca seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 16

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA*STATE BOARD OF MEDICAL EXAMINERS VS. MICHAEL KAPLAN M.D., BME CASE
NOS. 11-8547-1 AND 15-8547-1

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

Mr. Fricke stated a First Amended Complaint had been filed against Dr. Kaplan in the 2011 case alleging two violations of the Nevada Medical Practice Act, as well as a formal Complaint against Dr. Kaplan in the 2015 case alleging three violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Ms. Mastroluca moved that the Board accept the Settlement Agreement. Dr. Muro seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 17

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA* STATE BOARD OF MEDICAL EXAMINERS VS. THOMAS DANIEL O'GARA, M.D., BME CASE NO. 18-9747-1

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

Mr. Fricke stated a formal Complaint had been filed against Dr. O'Gara alleging 24 violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Nagy moved that the Board approve the Settlement Agreement. Dr. Hardwick seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 18

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA*STATE BOARD OF MEDICAL EXAMINERS VS. JASON RUSSELL BURKE, M.D., BME CASE NO. 18-20493-1

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

Mr. Fricke stated a formal Complaint had been filed against Dr. Burke alleging one violation of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Hardwick moved that the Board approve the Settlement Agreement. Dr. Edwards seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 19

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA* STATE BOARD OF MEDICAL EXAMINERS VS. STEVEN DON FOLKERTH, M.D., BME CASE NO. 17-11283-1

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

Mr. Fricke stated a formal Complaint had been filed against Dr. Folkerth alleging seven violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Ms. Mastroluca moved that the Board accept the Settlement Agreement. Dr. Nagy seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 20

EXECUTIVE STAFF/STAFF REPORTS

(a) Investigations Division Report

Ms. Castagnola reported the current number of open investigative cases was 646 and the current number of cases per investigator was approximately 92. There were 52 peer reviews in the field and 38 peer reviews awaiting assignment.

(b) Quarterly Compliance Report

Ms. Jenkins reported the total number of files in collection with the State Controller's Office for the first quarter of 2018 was 8, for a total of \$45,900.00. There were no collections written off during the quarter. The total outstanding in costs was \$50,100.00, total outstanding in fines was \$7,500.00, and the compliance collections for the quarter were \$16,000.00.

(c) Quarterly Update on Finances

Ms. Jenkins highlighted the various sections of the Balance Sheet for the first quarter of 2018. She stated the Board's total assets as of March 31, 2018 were \$9,711,000.00, and the total liabilities and net position were also \$9,711.000.00.

Ms. Jenkins then highlighted the various sections of the Profit and Loss Budget vs. Actual for the first quarter of 2018. She stated the Board's income was at 100.1% of budget. The total expenses were over budget by 2.5%. In the total net income column, it shows a deficit of \$215,850.00 for the quarter, which is over budget by \$29,484.00, which is primarily due to increased legal costs in the first quarter.

Mr. Duxbury said he wanted to compliment Ms. Jenkins for the fantastic job she is doing.

(d) Legal Division Report

Mr. Kilroy reported there were currently 162 cases in the Legal Division, 8 of which had been presented to the Board for action at this meeting; 89 cases pending the CMT process; 72 cases awaiting filing of a formal complaint; 12 cases in which a formal complaint had been filed that were pending hearings, and 34 letters of concern approved by the Investigative Committees during their May meetings. He provided an update regarding the pending civil court cases in which the Board was currently involved. He stated that the appeal in the *Hansen* case in the Nevada Supreme Court was denied, so consequently, there will be more telephonic meetings to authorize the Legal Department to file appeals and engage in lawsuits. He said this will probably be rectified subsequently by regulation or legislation.

(e) Report on Federation of State Medical Boards 2018 Annual Meeting

Mr. Cousineau named the Board members and staff who attended the Federation of State Medical Boards 2018 Annual Meeting. He said he thought the most interesting component was the speaker at lunch the first day. He was a professor at the Naval War College and talked about, in essence, the fact that experts are becoming less and less appreciated based on the fact there is so much ability for individuals to educate themselves through social media, the Internet, and the like, and acknowledging the fact that specialized education was losing validity, not necessarily appropriately. Mr. Cousineau said he had participated in one of the breakout sessions as faculty, and specifically talked to the responses of our licensees and others involved in the events in Las Vegas on October lst.

Dr. Prabhu said he felt honored and proud that Mr. Cousineau had been chosen to be one of the panelists on the very important topic on emergency preparedness. He has many friends who are members and presidents of state boards all over the country, and six or seven of them came to him and said how well Mr. Cousineau spoke.

Dr. Havins said, as a first-time attendee, he thought it was very worthwhile.

Mr. Duxbury said he thought the lack of attendance due to the political posture regarding the bathroom law was interesting.

Mr. Cousineau said there are 14 states that exclude travel on public funds to certain states, to include North Carolina, because of the bathroom transgender bill.

Dr. Nagy said he had spoken individually with the woman from Harvard who had spoken on pain management issues and narcotics. He asked her about the laws in Canada and their experience in terms of transitioning people from opioids to marijuana, and the responses he received from her were biased against marijuana.

Dr. Hardwick said he thought all the sessions were very educational and lively.

Ms. Mehta said she thought the breakout session regarding how to interview alleged victims in boundary cases would be worth exploring more. The speaker was trained specifically in interviewing such victims and those cases are notoriously difficult for us to bring because oftentimes the victims don't want to come forward, or if they do have the courage to come forward, they feel their credibility is going to be attacked and that it's not worth it for them to participate in the disciplinary process. The speaker emphasized how important it was to have investigators who are trained specifically in these investigative techniques as they relate to alleged boundary-issue victims.

Agenda Item 21

LICENSURE RATIFICATION

 Ratification of Licenses Issued, Reinstatements of Licensure and Changes of Licensure Status Approved Since the April 13, 2018 Board Meeting

Dr. Edwards moved that the Board ratify the licenses issued, reinstatements of licensure and changes of licensure status approved since the April 13, 2018 Board Meeting. Ms. Mastroluca seconded the motion, and it passed unanimously.

Agenda Item 22

APPEARANCES FOR CONSIDERATION OF ACCEPTANCE OF APPLICATIONS FOR LICENSURE

(a) Justin Layne Knowles, M.D.

Dr. Knowles appeared via telephone.

Dr. Prabhu asked Dr. Knowles 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. Knowles regarding his affirmative response to Questions 12 and 12(a) on his application for licensure.

Dr. Knowles described the circumstances surrounding the single case of malpractice that had been filed against him that resulted in a settlement.

Dr. Hardwick moved that the Board grant Dr. Knowles' application for licensure. Dr. Havins seconded the motion, and it passed unanimously.

(b) Anshul Dixit, M.D.

This item was not discussed at the meeting.

(c) Anthony Robert Marks, M.D.

- Dr. Prabhu asked Dr. Marks 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 stated Dr. Marks was applying for licensure by endorsement, and asked Dr. Marks what he was currently doing.
- Dr. Marks stated he was an emergency physician and a senior partner at California Emergency Physicians in San Diego, and had been there since 2004 at Sharp Chula Vista Hospital. He is licensed in California in good standing.
 - Ms. Peltyn asked why he did not want to take the SPEX examination.
- Dr. Marks explained he didn't feel the examination adequately represents an emergency physician because the questions on the test don't really pertain to emergency physicians, and that is why he chose to apply by endorsement.
 - Dr. Havins asked about the possibility for Dr. Marks to undergo a peer review.
- Dr. Muro said the Board had to address the fact that Dr. Marks had not taken a licensing examination or a board certification examination in the past 10 years. SPEX would be one of those that would facilitate that process. Endorsement is not a back door to circumvent the processes that are in place.
- Mr. Cousineau explained that endorsement was basically put in place to allow those individuals who bring a unique skill set or specialty to the state. Certainly, Dr. Marks meets the requirements to apply for endorsement being licensed in another jurisdiction, but he thinks the Board wants to keep a standard policy that unless an individual applying by endorsement is bringing that unique skill set, that specialty we need, or has some kind of eminence about them, the Board is not inclined to grant licensure by endorsement. The only alternative, which was broached earlier by Dr. Havins, would be a peer review. That is at the discretion of the Board and something they would have to discuss amongst themselves.
 - Dr. Hardwick asked Dr. Marks what he planned to do if granted a license in Nevada.
- Dr. Marks explained that his company is acquiring some contracts in Nevada. He had a medical license in Nevada in 1992, which he also obtained by endorsement.
- Ms. Daniels stated the Dr. Marks would have obtained his previous license by reciprocity because he held a license in California.
- Discussion ensued regarding whether it would be appropriate to require Dr. Marks to take the SPEX examination or another examination or program, such as PACE, in order to grant him a license.
 - Dr. Marks stated he would take the SPEX examination if he did not have another choice.
- Mr. Cousineau said that depending on when Dr. Marks were to take the SPEX examination, he might have to reapply because his application may be expired. However, if he passes the SPEX examination, he would not have to reappear before the Board and his license could be granted

administratively. The Board could table his application. He said that Dr. Marks also had the option to withdraw his application.

Dr. Marks said he wanted to table his application.

(d) Todd Andrew Radivan, PA-C

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

Dr. Nagy moved that the Board go into closed session pursuant to NRS 241.030. Mr. Duxbury seconded the motion, and it passed unanimously.

(e) Anil Gopalakrishna Rao, M.D.

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

Mr. Duxbury stated that Dr. Rao was applying for licensure by endorsement because he did not have 36 months progressive postgraduate training.

Dr. Rao stated he was 4 months short, and explained the circumstances that resulted in that shortage.

Mr. Duxbury asked Dr. Rao what he planned to do if granted a license in Nevada.

Dr. Rao said he would like to join Desert Radiology and practice primarily Pediatric Radiology and also Diagnostic Radiology.

Dr. Prabhu stated we do not have enough Pediatric Radiologists in Nevada; they are very badly needed. Additionally, Dr. Rao has a lot of experience teaching residents and fellows, and he knows they are about to start a fellowship in Radiology in Las Vegas, so he thinks Dr. Rao would be a great asset.

Mr. Duxbury moved that the Board grant Dr. Rao a license by endorsement. Dr. Havins seconded the motion, and it passed unanimously.

(f) Robert Joseph Paulino, M.D.

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

Dr. Nagy questioned Dr. Paulino regarding the fact that he had not passed all three steps of the USMLE within seven years.

Dr. Paulino said they do not tell you that it may be an issue when you are applying for licenses in different states if you don't pass all three steps within a certain period of time, so he took his time, and was also doing research during that time for a period of about five years from 2001 to 2006.

- Dr. Nagy asked Dr. Paulino to describe his research, and Dr. Paulino explained that it was in the areas of depression and spinal cord injuries.
- Dr. Nagy asked Dr. Paulino about his activities since completing his residency, and Dr. Paulino described them.
- Dr. Nagy questioned Dr. Paulino regarding his affirmative response to Question 12 on his application for licensure.
- Dr. Paulino described the circumstances surrounding the single case of malpractice that had been filed against him that resulted in his being dismissed from the case.
 - Dr. Nagy asked Dr. Paulino what he planned to do if granted a license in Nevada.
- Dr. Paulino said he had signed up with a company called Platinum Hospitalists, to practice palliative care. The national average is 15 palliative care doctors for 100,000 people, but right now he thinks there are only 5 in Clark County, which has a population of 2 million.
- Dr. Nagy stated there is a shortage of people in Dr. Paulino's specialty. The Board primarily grants licensure by endorsement to people in specialties the state has a significant need for, and Dr. Paulino would qualify under that criterion.
- Mr. Cousineau stated that Dr. Paulino applied in May of last year and in the pendency took the SPEX examination, which he thinks further confirms to the Board his clinical competency.
 - Dr. Prabhu said there is a dire need for doctors like Dr. Paulino.
- Dr. Nagy moved that the Board grant Dr. Paulino a license by endorsement. Dr. Hardwick seconded the motion, and it passed unanimously

(g) John Eric Hughes, RRT

This item was not discussed at the meeting.

(h) Alfonso A. Ortiz, M.D.

- Dr. Ortiz appeared before the Board in Las Vegas. L. Kristopher Rath, Esq. appeared with Dr. Ortiz as his legal counsel.
- Dr. Prabhu asked Dr. Ortiz whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.
- Dr. Edwards explained that Dr. Ortiz had appeared before the Board previously, and was applying for a license by endorsement. During those previous appearances, the Board discussed Dr. Ortiz' arrest and medical malpractice histories with him, so it wasn't necessary to discuss those again. He then asked Dr. Ortiz whether his licensure issues in Illinois had been resolved, and Dr. Ortiz stated they had. Dr. Edwards said since his last appearance, Dr. Ortiz had attended the PACE program, and asked Dr. Ortiz how he found the program.
- Dr. Ortiz said it was mostly computer testing, with some one-on-one testing and a physical examination.

Dr. Edwards stated that the PACE program had found Dr. Ortiz fit for duty, so the only remaining concern to the Board was that Dr. Ortiz had not taken a major examination in the past 10 years. He asked Dr. Ortiz if he had ever been board certified in Internal Medicine.

Dr. Ortiz said he had not, but he planned to sit for the boards in August.

Dr. Edwards stated that licensure by endorsement is usually reserved for those who fill a need in the state, and he thinks everyone would agree there is a need for Endocrinologists in the state, which is what Dr. Ortiz was planning to practice.

Mr. Rath said that Dr. Ortiz would also be working in an underserved community, where he would be seeing Spanish-speaking patients in North Las Vegas.

Dr. Muro said the Board had two questions. One was the cognitive evaluation, which Dr. Ortiz passed successfully, and the other was his clinical fund of knowledge and current information, and that is where testing comes into the picture.

Mr. Duxbury said he agreed with Dr. Muro.

Mr. Cousineau said that Dr. Ortiz may have to reapply because his application may expire before he receives the results of his boards and can come back before the Board.

Mr. Rath stated that Dr. Ortiz had worked in New York up to a little over a year ago in a number of clinics in underserved areas. He was approved to work for Southwest Medical Associates, again in an underserved area, where he was going to be doing adult medicine, not just Endocrinology, so he was ready to treat patients. He had been studying for his boards over the past year and has done a number of CMEs while he was not working. The reason he stopped working had nothing to do with clinical competency; he had an illness. He moved to Nevada, and he got recruited by Southwest Medical Associates. He said that Southwest Medical Associates had extended the time in which Dr. Ortiz could start his employment each time he came before the Board.

Dr. Ortiz explained what he had done while in New York and what he had been doing to keep up to date with his practice, and said he felt competent to practice medicine.

Mr. Rath said Dr. Ortiz currently had an unrestricted license in New York, and had been able to clean up the issues in Illinois and was free to renew his Illinois license. He said we need doctors in these underserved areas, and Dr. Ortiz was ready to start in July if he could get his license. He has shown his clinical competency, he hasn't been out of practice that long, he has studied for his boards and has done 130-something CMEs this year. Further delay would probably mean he couldn't come to Nevada.

Dr. Muro agreed we need doctors in underserved areas, but said we also need doctors who are better qualified, not only clinically, but also academically as far as the knowledge fund. The fact that Dr. Ortiz had done all these other activities was commendable, but he was not comfortable without any recent testing to objectively confirm Dr. Ortiz' medical knowledge base. If Dr. Ortiz takes his boards in August and passes successfully, that would be great. However, the fact that he has a job offer on the table does not necessarily allay any of the concerns he has.

Dr. Havins asked whether Dr. Ortiz had taken, or was willing to take, the SPEX examination.

Dr. Ortiz said he had not taken it and was out of time and money, and he needed to go to work. He came to Nevada because he left the job in New York, the lease on his apartment was up, and he had no place to go, so he came to stay with his son. When he got here, he found out Southwest Medical Associates was recruiting. Southwest Medical Associates was his first job when he moved to Nevada in 1988, and the fact that his son is here and he would like to spend more time with him was the reason he decided to apply. He had no idea it would take so long to get to this point, and he thought everything was taken care of. He asked why no one asked him any more questions last time and just said take this test and that's it.

Dr. Muro apologized if there was any misunderstanding. He said there were two concerns, and they hadn't really changed. One was Dr. Ortiz' ability that was evaluated by the recent testing he took, that came out in his favor. But the knowledge base had always been a question in Dr. Muro's mind. Unfortunately, it has turned out to be a rather protracted process for Dr. Ortiz, but what the Board is doing is to maintain the integrity of the application and licensing process, which is central to what the Board is charged to do.

Ms. Daniels stated that Board staff had been advising Dr. Ortiz to take the SPEX examination the entire time.

Dr. Edwards stated the issue of not having taken a clinical examination in the past 10 years had been there all along; it was not something new, and if Dr. Ortiz took SPEX, even before he sat for his Internal Medicine boards, he thought the Board would look on that favorably as a way to show his clinical competence.

Mr. Rath said he had never heard word about Dr. Ortiz taking SPEX, and the key issue last time, from his understanding, was the Board wanted him to have the evaluation by PACE, which he had done. He hasn't been out of practice that long. He has a full, unrestricted license in New York, and until about a year ago had been practicing in clinics there for quite some time without any competency issues being raised.

Mr. Cousineau suggested that another alternative the Board could consider, in lieu of granting Dr. Ortiz a license by endorsement, was a peer review. He stated the issue with that was there was no guarantee staff could get Dr. Ortiz in front of a peer reviewer in time to get him to work by July 1, or in that general proximity, and there was an associated cost attached to the peer review that would be borne by Dr. Ortiz.

Mr. Rath suggested that Dr. Ortiz could be monitored by another physician at Southwest Medical Associates, and that way he could work, and any concerns would be raised by the monitor. He could be granted a license with the condition that he would be monitored until such time as he took and passed his boards, and then he could move to a full, unrestricted license.

Mr. Cousineau suggested a viable alternative might be to set up a preceptorship, and if Dr. Ortiz were to pass his boards in the pendency, he believes the Board would be satisfied and Dr. Ortiz would get a full, unrestricted license. However, there was a question whether Southwest Medical Associates would balk at that.

Discussion ensued regarding whether it would be appropriate to require Dr. Ortiz to participate in a preceptorship.

Mr. Rath stated that in talking with Dr. Ortiz, it seemed it would be very difficult, if not impossible, for Southwest Medical Associates to take him with a preceptorship.

Dr. Prabhu moved that the Board grant Dr. Ortiz a license by endorsement. Dr. Hardwick seconded the motion.

Dr. Muro asked whether Dr. Ortiz would be practicing Endocrinology or Internal Medicine.

Dr. Ortiz stated that it would be both; that you cannot separate the two.

Dr. Muro asked whether the contract with Southwest Medical Associates was as a general Internal Medicine physician or an Endocrinologist.

Dr. Ortiz said he would be under the Department of Internal Medicine, but they hired him because he has a specialty in Endocrinology.

Discussion ensued regarding the fact that Dr. Ortiz would be practicing as a general Internist, and not as an Endocrinologist.

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

Agenda Item 23

CONSIDERATION AND APPROVAL OF 2017 BOARD ANNUAL REPORT

Mr. Cousineau outlined the contents of the proposed 2017 Annual Report. He noted that the number of disciplinary actions is trending upward, and said it is his expectation those numbers will continue to rise in 2018, due to the adjustments made in the Legal Division.

Mr. Cousineau said the licensee numbers continue to increase in all licensure categories, based mostly on the improving economy. The Licensing Division issued approximately 1,100 new licenses, in addition to approximately 400 residency training licenses, and this was a renewal year. He said he is very proud of their efforts. The Investigations Division has been doing a great job pushing cases, and they are doing such a good job it has put some pressure on the Legal Division to keep up with the cases being advanced their way.

Ms. Peltyn moved that the Board approve the 2017 Annual Report. Dr. Havins seconded the motion, and it passed unanimously.

Agenda Item 24

STAFF COMMENTS/UPDATES

Mr. Fricke briefed the Board on two initiatives that Board staff had undertaken this year. First, AB 474 made many changes to the laws regarding prescribing, and also made some adjustments to the approach the Board must take to prescribing issues. Among those changes is in Section 15 of AB 474, which mandates that the Executive Director or his designee review and evaluate any complaint or information, from any source, that indicates that fraudulent, illegal, unauthorized or otherwise inappropriate prescribing (FlUI) activity is occurring. Accordingly, since January 1, 2018, whenever Board staff receives information that indicates a licensee may have either issued a FIUI prescription or has a pattern of issuing FlUI prescriptions, or that a patient has

engaged in any kind of FIUI activity, Board staff, at the direction of the Executive Director, is reviewing and evaluating that information and, where appropriate, sending a written notice to the licensee at issue. Mr. Fricke then outlined the specific requirements outlined in Section 15 with respect to these cases. He said that staff has collaborated closely over the past several months to develop and refine the process as to how these cases are reviewed, and since January 1st, any complaint or information received that indicates FIUI activity has been subjected to this new process. Staff has received several very helpful referrals from other agencies that it has acted upon and also received very helpful responses from licensees, which has provided helpful feedback to staff regarding how AB 474 compliance is progressing within the community. In accord with AB 474's mandates, in those cases where FIUI activity appears to be present, such cases are being referred to Investigations staff for formal investigation, and Investigative Committee members will soon be seeing these cases coming before them.

Second, Mr. Fricke explained that Board staff had been working very closely with Dr. Melissa Piasecki at the University of Nevada, Reno School of Medicine and several other practitioners and stakeholders in Reno and Las Vegas to develop a comprehensive, intensive, multiday CME course on best practices in prescribing controlled substances. Mr. Fricke attended a similar course at the University of Florida in March, and found it to be exceedingly edifying. What he learned there has helped him immensely in his work in reviewing prescribing cases, and has helped him better understand the many challenges that many practitioners are facing in their personal and professional lives. The curriculum for the course was developed by Vanderbilt University, is tried and true, and we hope to use that approach as a template to develop a Nevadaspecific course that encompasses the unique challenges of practicing here in the state. We are hopeful we can develop such a course and have it readily available in Nevada. Such a course would also allow Board staff to take a more collaborative and rehabilitative approach when dealing with prescribing issues. The course could help us establish a dialog with physicians who may have prescribing issues and help them deal with these issues early and in a helpful way. Additionally, referring a practitioner to the course might be a ready alternative to, or an adjunct to, formal discipline, either before formal disciplinary action is called for or, if it has already begun, as a means to resolve many of these cases without formal sanctions, in cases where that is appropriate. We hope that the members of the Board will provide their support to our efforts in getting the course going.

Discussion ensued regarding specifics of the proposed course, as well as the details of the course Mr. Fricke attended. Mr. Fricke stated that many states are now using a course such as this as either a formal or informal diversion program.

Mr. Cousineau added that Dr. Piasecki is an Associate Dean at the University of Nevada, Reno School of Medicine and a Board-Certified Psychiatrist whom the Board has used for peer reviews over the years.

Further discussion ensued regarding specifics of the proposed course, and the various circumstances for which the course might be utilized.

Dr. Nagy thanked Mr. Fricke for taking the initiative to attend the course in Florida and commended his creativity and efforts in putting together a course for Nevada. Dr. Muro concurred

Mr. Cousineau thanked Ms. Castagnola and Mr. Kilroy, as both their divisions were doing a great job, as well as Libi Anders, who has a very integral part in the FIUI process in accessing the Prescription Monitoring Program through the Pharmacy Board, taking the information, and

putting it into a comprehensive memo for the members of the FIUI Team to use. He then outlined the FIUI process.

Agenda Item 25

PUBLIC COMMENT

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

Agenda Item 26

ADJOURNMENT

Mr. Duxbury moved to adjourn the meeting. Ms. Mastroluca seconded the motion, and it passed unanimously. Dr. Prabhu adjourned the meeting at 2:42 p.m.

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