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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS

F I N A L M I N U T E S

MEETING OF:

STATE BOARD OF MEDICINE

TIME: 10:42 A.M.

Held at

PENNSYLVANIA DEPARTMENT OF STATE

2601 North Third Street

One Penn Center, Board Room C

Harrisburg, Pennsylvania 17110

as well as

VIA MICROSOFT TEAMS

Tuesday, December 12, 2023

State Board of Medicine
December 12, 2023

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BOARD MEMBERS:

- Arion R. Claggett, Acting Commissioner, Bureau of Professional and Occupational Affairs
- Mark B. Woodland, M.S., M.D., FACOG, Chair
- Donald M. Yealy, M.D., Vice Chair - Absent
- Gerard F. Dillon, Ph.D., Public Member
- Michael Ripchinski, M.D., MBA, CPE, FAAFP
- Walter A. Eisenhauer, MMSC, M.Ed., PA-C
- Debra L. Bogen, M.D., FAAP, FABM, Acting Secretary of Health, Pennsylvania Department of Health
- Sirisha Reddy, Special Assistant
- John D. Six, M.D.
- John A. Kutz, M.D., FACS
- Benjamin S. Abella, M.D., MPhil
- Catherine N. Udekwu, M.D.
- Sirisha Reddy, M.D.

BUREAU PERSONNEL:

- Shana M. Walter, Esquire, Senior Board Counsel
- Dana M. Wucinski, Esquire, Board Counsel
- Heather J. McCarthy, Esquire, Senior Board Prosecutor and Prosecution Liaison
- Mark R. Zogby, Esquire, Board Prosecutor
- Jason T. Anderson, Esquire, Board Prosecutor
- Keith E. Bashore, Esquire, Board Prosecutor
- Patrick Greene, Esquire, Board Prosecutor
- Kelsey B. Ashworth, Esquire, Board Prosecutor
- Adam J. Williams, Esquire, Board Prosecutor
- Saiyad Ali, Board Administrator
- Holly Hoffman, Law Clerk, Department of State
- Andrew LaFratte, Deputy Policy Director

State Board of Medicine
December 12, 2023

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ALSO PRESENT:

Angie Armbrust, Senior Associate, McNees-Winter 13
Group LL
Ted Mowatt, CAE, Vice President/Lobbyist, Wanner
Associates, on behalf of the Association for
Professional Acupuncture
Wesley Rish, Esquire, Rish Law Office, LLC
Tanya Miller
Misha Patel, MPAs, PA-C
Kevin Knipe, Program Manager, Professional Health 14
Monitoring Program Kevin Knipe
Atul Kakkar, M.D.
Samar Altamini, M.D.
Dr. Nielufar Varjavand, M.D., Drexel University
College
Bruce Armon, Esquire
Randy Stevens
Robert Provenzano, M.D.
Teri Bass, DEA
Paul Gregorio, M.D.
Angelina Ditri, Director, Continuing Education,
Drexel University College of Medicine
Lauren Doliner, M.D.

1 State Board of Medicine

2 December 12, 2023

3 ***

4 [Pursuant to Section 708(a)(5) of the Sunshine Act,
5 at 8:45 a.m. the Board entered into Executive Session
6 with Shana M. Walter, Esquire, Senior Board Counsel,
7 and Dana M. Wucinski, Esquire, Board Counsel, for the
8 purpose of conducting quasi-judicial deliberations on
9 a number of matters currently pending before the
10 Board and to receive the advice of counsel. The
11 Board returned to open session at 10:30 a.m.]

12 ***

13 The regularly scheduled meeting of the State
14 Board of Medicine was held on Tuesday, December 12,
15 2023. Mark B. Woodland, M.S., M.D., FACOG, Chair,
16 called the meeting to order at 10:42 a.m.

17 ***

18 Acknowledge Public - Turn Off Electronic Devices
19 [Mark B. Woodland, M.S., M.D., FACOG, Chair,
20 acknowledged that everyone present agreed to be
21 recorded and welcomed everyone. He also requested
22 all electronic devices be muted.]

23 ***

24 Introduction of Board Members/Attendees

25 [Mark B. Woodland, M.S., M.D., FACOG, Chair, provided

1 an introduction of Board members and attendees.]

2 ***

3 Approval of minutes of the October 24, 2023 meeting

4 CHAIR WOODLAND:

5 Next is approval of the minutes from
6 our October 24, 2023 meeting. I know
7 that we received discussion and
8 feedback.

9 Do I have a motion to approve?

10 DR. UDEKWU:

11 Aye.

12 DR. KUTZ:

13 Second.

14 CHAIR WOODLAND:

15 Any further discussion on this? Hearing
16 no further discussion - we need to do a
17 roll call.

18
19 Mr. Claggett, aye; Dr. Woodland, aye;
20 Mr. Dillon, aye; Dr. Ripchinski, aye;
21 Mr. Eisenhower, aye; Ms. Reddy, aye;
22 Dr. Six, aye; Dr. Kutz, aye; Dr.
23 Abella, aye; Dr. Udekwu, aye.

24 [The motion carried unanimously.]

25 ***

1 Report of Department of Health

2 [Debra Bogen, M.D., FAAP, reminded all that it is
3 respiratory virus season especially for those working
4 directly in healthcare and noted the public dashboard
5 contains data regarding the current state of RSV, flu
6 and Covid. She noted an increase in RSV especially
7 in children younger than age five and a slight
8 increase in Covid-19 new hospital admissions and over
9 400 Covid-related deaths from PA residents.

10 Dr. Bogen indicated a number of health advisories
11 have been put out including mycoplasma pneumonia,
12 mostly internationally but in a few U.S.
13 jurisdictions as well.

14 The CDC has issued a health advisory notice
15 regarding cases of geographic sexually associated
16 human to human transmission of a different clade of
17 Mpox than seen during Mpox outbreaks in the past.
18 Dr. Bogen noted no cases in the U.S. as of yet but
19 asking providers who are seeing Mpox cases to send in
20 samples.

21 Dr. Bogen reminded all that the CDC and the
22 Pennsylvania Department of Health have both put out
23 warnings and recalls related to the applesauce that
24 contains cinnamon that has high levels of lead in and
25 should have all been removed from the shelves of our

1 grocery stores. The CDC is now collecting data on
2 potentially exposed children or cases, people who
3 might have been exposed through those products.

4 She suggested that everyone review the updated
5 health alert notice that went out reporting that.
6 Dr. Bogen referred to this as another example of why
7 every child should be screened for lead, because you
8 would not actually know that children have lead
9 exposure unless you test their blood. Symptoms are a
10 very late sign and are usually exceeding very high
11 levels.

12 Chair Woodland indicating reading that the recent
13 variant, the JN1 variant, that the recent Omicron
14 vaccine is thought to be effective against that
15 variant, and that is why it is important to get the
16 vaccine.

17 Dr. Bogen indicated it is never too late to get
18 the flu vaccine with the upcoming holidays, and the
19 new vaccine is effective from what we can tell
20 against the new variants that are going around.
21 People that are really high risk are encouraged to
22 get the vaccine. She encouraged discussions with
23 primary care physicians who can offer the best
24 advice. Dr. Bogen noted that she and Dr. Udekwu, who
25 is also a pediatrician, can tell stories about the

1 importance of RSV and the impact it has on children's
2 lives as they are often sick for weeks. She
3 encouraged people to think about that vaccine as
4 well.]

5

6 [Debra Bogen, M.D., FAAP, exited the meeting at 11:00
7 a.m.]

8

9 (WHEREUPON A PAUSE IN THE RECORD WAS HELD DUE TO
10 TECHNICAL DIFFICULTIES.)

11

12 Appointments - Drexel Re-Entry Program Presentation

13 [Nielufar Varjavand, M.D., a professor of medicine at
14 Drexel University, noted being in front of the Board
15 several years ago before the pandemic and was glad to
16 be back again.

17 She stated she would be discussing Drexel's
18 program, but also wanted to hear from the Board any
19 needs they may have. Dr. Varjavand indicated that
20 Drexel used to be Medical College of Philadelphia,
21 then Medical College of Pennsylvania starting in
22 1850. She noted it was the only medical school in
23 the country that gave women the M.D. degree, and 100
24 years later in 1968 they thought that it would be
25 nice to have a refresher for women who needed an

1 update to come back into medicine if they had left
2 for any reason.

3 She stated the program was really successful. It
4 was not that women left; it was men and women left to
5 do other things. She commented the program was
6 vibrant until 1993 when MCP closed its doors and
7 gradually MCP became Drexel, and the program was
8 reignited in 2006. Since that time, changes have
9 been made to improve it.

10 Dr. Varjavand pointed out that currently the
11 program is virtual, which means there are
12 asynchronous components. There are real-time group
13 components. There is also have a program that is in
14 person in Philadelphia.

15 She referred to the college staff as being
16 dedicated clinical educators who work with a current
17 committee who advises and helps with every part of
18 the program and referred to a list of past committee
19 members to highlight a few who are no longer with the
20 university including Doctors Detwiler and Landau.

21 Dr. Varjavand indicated the university likes to
22 do research and to educate. That since the very
23 first peer reviewed paper was published in 1978 there
24 has been much material written about us and written
25 by us. She noted that around the time of Covid there

1 were others who wrote about their program and peer
2 reviewed articles regarding research and outcomes of
3 the program, including the anesthesia department, the
4 program in general, the OBGYN program.

5 Dr. Varjavand discussed types of physicians who
6 are served, including reentering physicians, those
7 who have been inactive and want to get their license,
8 or they can be reentry in that they've been inactive
9 for any reason and want to have a refresher. They can
10 be physicians who are interested in retraining, like
11 physicians who have been doing hospital medicine and
12 now want to transition into doing primary care. Or
13 they could be remediating wherein the board or
14 insurance company deemed that they have an area that
15 they need to focus their learning on so they come for
16 remediation or focused learning.

17 She referred to her PowerPoint for discussion of
18 the many places these physicians come from, including
19 Canada and the United States. She asked for
20 suggestions as to how Drexel can serve the Board.

21 Chair Woodland suggested flexibility and
22 creativity whether it is reentry, refresher,
23 retraining, or just a general update. And also, Chair
24 Woodland suggested some type of clinical exposure
25 because being out of practice and separated from

1 clinical activity for four years, that's where
2 reentry becomes important.

3 Dr. Varjavand noted Drexel's approach is always
4 education, assessment, lifelong learning and various
5 programs based on need.

6 As an example, in-person rotations were brought
7 back after the pandemic. There are assessment only
8 programs and focused programs solely on pain
9 management, substance use disorder, documentation,
10 team communication, professionalism, ethics if
11 someone needs to remediate. There is also a
12 preceptorship with different components based on
13 need.

14 The program is very much individualized and
15 someone can choose to come to Philadelphia to do an
16 in-person rotation, or if they want to find someone
17 locally, that's fine.

18 Dr. Varjavand commented the focus-learning
19 programs are asynchronous online, can be combined or
20 one at a time and everyone is encouraged to spend a
21 few months learning material that we give them on
22 their own time. They have periodic check-ins with
23 us, they come to us, they participate as a group,
24 they do presentations, and we have follow up with
25 them throughout until their completion.

1 She reiterated the preceptorship is based on
2 education, assessment, lifelong learning and is a
3 structured curriculum in which there are certain
4 components to the program, but within that component
5 there is individualized learning. And again,
6 assessment for learning, assessment for grading,
7 feedback. This program contains asynchronous
8 learning, didactics, qualifies for CME and MCQs are
9 incorporated to practice learning and passing tests.

10 Computer search skills are incorporated to become
11 up to date and adept at very fast computer searches.
12 Interactive patient scenarios are incorporated for
13 learning as well assessment on topics of knowledge,
14 reasoning, communication skills, professionalism, and
15 patient care. And in addition to all of this
16 asynchronous, there are virtual real time discussions
17 with dedicated clinician educators dedicated to the
18 program who teach, give feedback and assess.

19 Assessments involves definite peer and faculty
20 criteria to learn as well as to be graded. The
21 components of assessments are on virtual standardized
22 patients with medical topics. Other topics to
23 present on include clinical reasoning, medical
24 documentation, professionalism, and then as needed
25 and based on board requirements, the PLAs, which is

1 an MCQ set of questionnaires put together by FSMB and
2 NBME.

3 She stated they are helped to set up a program of
4 ongoing continued learning and follow up. The
5 facilitate communication with stakeholders so they
6 work with referring organizations to understand what
7 the goals are. She noted that if requested the
8 communicate with the physician throughout the program
9 and a letter is sent upon completion which includes a
10 certification, CME if they want and a letter of
11 completion with details of accomplishments
12 throughout.

13 Dr. Varjavand summarized that she joined the
14 program in 2005 which has been around since 1968, and
15 it is a university-based program with dedicated
16 clinician educators with a passion for teaching and
17 excellence at the level of the practicing physician.
18 She reiterated the various programs which can all be
19 mixed and matched.

20 Dr. Varjavand provided contact information for
21 herself and Ms. Ditri.

22 Chair Woodland thanked Dr. Varjavand and noted he
23 also has had a long affiliation with the program
24 personally.

25 Ms. Wucinski commented that one issue that often

1 comes up is physicians who are trying to reactivate
2 their licenses or obtain an initial license in this
3 Commonwealth but have only practiced
4 administratively. She stated the Board's position
5 has always been that if granting an unrestricted
6 license, there needs to be a reentry evaluation
7 completed and most often a preceptorship is
8 recommended. She asked Dr. Varjavand to explain how
9 preceptorships are handled when a person has only
10 ever practiced administratively.

11 Dr. Varjavand explained the college has a
12 structured curriculum that's individualized and needs
13 are built into the component of the program. She
14 indicated that most choose to do a virtual program,
15 and a virtual program is intensely clinical
16 consisting of medical knowledge and patient care.
17 They are also requested to do interactive,
18 standardized patient evaluations, live or virtual.
19 They are then graded, reviewed and provided feedback.

20 They are also required to do patient
21 documentation including patient charts which are also
22 reviewed. And they have to learn whatever material
23 would be pertinent to them and then present their
24 learning on paper and as a verbal presentation to
25 ensure that they're able to teach their group of

1 peers and make sure that they can write as well.

2 They are also given reassignments before they
3 come on which includes books as well as online
4 modules on communication skills and then have to
5 report on that upon arrival. Dr. Varjavand indicated
6 follow-up learning is also reviewed including
7 lectures, grand rounds and lots of individualized
8 material that they have to learn and report back on
9 to us.

10 A pediatrician on the call had concerns about how
11 the program meets the needs of all the different
12 specialties and how it is streamlined to be pediatric
13 driven.

14 Dr. Varjavand explained there are different
15 patient scenarios based on specialty and physicians
16 can choose which components they want to learn. That
17 a pediatrician would focus on all of the pediatric
18 scenarios and another physician who wants to focus on
19 neurology would learn neurology material.

20 The pediatrician noted another concern in virtual
21 programs is how safe are you which comes down to the
22 safety component of seeing a child and making sure
23 they are cared for properly and then sending them
24 home safely, as opposed to creating a situation where
25 this child could become more sick

1 Dr. Varjavand explained that because physicians
2 have been away for a while, they are encouraged to do
3 the virtual program first and practice on virtual
4 patients without harming anybody. This would involve
5 doing a clinical scenario, evaluating a patient,
6 giving an answer, and managing a patient online,
7 learning pediatric topics by themselves and writing
8 about patients to ensure that their documentation,
9 clinical reasoning is up to date.

10 And then when ready, if dictated by a
11 stakeholder, they can come to Philadelphia and rotate
12 in a pediatrics office as well. But that is
13 encouraged to be done after the virtual component to
14 make sure that they're really up to date. They
15 evaluate standardized patients, and these would be
16 all pediatric topics, pediatric cases, virtually in
17 real time. Feedback is then provided so that they're
18 up to date before they come in person, if the
19 stakeholder requires that they come in person.

20 Dr. Varjaband provided an example of a telephone
21 interaction such as when a parent calls and says her
22 child has been throwing up all night, that a
23 pediatrician has to know how to manage that person.

24 Another example are those who voluntarily want to
25 come and learn since they've been out of practice for

1 a while and will complete a virtual program first to
2 bring themselves up to date, and next doing an in
3 person component. She indicated it is not "cookie
4 cutter" but individualized with a definite structure.

5 Chair Woodland thanked Dr. Varjavand for her
6 presentation and requested a copy of the annual
7 report for Board members to review.]

8 ***

9 Report of Prosecuting Attorneys

10 [Heather McCarthy, Esquire, Senior Board Prosecutor
11 and Board Prosecution Liaison, presented VRP Consent
12 Agreements for Case Nos. 23-49-014551 and 23-49-
13 016270.]

14 MS. WALTER:

15 Prior to that, pursuant to Section
16 708(a)(5) of the Sunshine Act the Board
17 entered into quasi-judicial deliberations
18 at 8:45 a.m. to engage in quasi judicial
19 deliberations and receive advice of
20 Counsel.

21 I believe the Board would entertain a
22 motion to approve the VRP Agreements at
23 Nos. 4 and 5 on the agenda, 23-49-014551
24 and 23-49-016270.

25 CHAIR WOODLAND:

1 Do I have a motion?

2 MR. DILLON:

3 So moved.

4 DR. KUTZ:

5 I'll second.

6 CHAIR WOODLAND:

7 I know I saw your hand go up, Jerry, as
8 far as a question.

9 MR. DILLON:

10 For both of these is the recommendation
11 that the suspension for three or more
12 years, that is being stayed, but I think
13 both times you mentioned stayed in favor
14 of probation. Is that true or just stayed
15 under conditions? Can you clarify?

16 MS. WALTER:

17 The terms are a probation, but it is a
18 confidential - it is not a formal
19 probation. I perhaps misspoke slightly,
20 but it is a VRP with all the VRP
21 conditions which are it is a stayed
22 suspension.

23 CHAIR WOODLAND:

24 Any other further discussion. Hearing
25 none, could we have a roll call, please?

1

2

Mr. Claggett, aye; Dr. Woodland, aye; Mr.

3

Dillon, aye; Dr. Ripchinski, aye; Mr.

4

Eisenhauer, aye; Ms. Reddy, aye; Dr. Six,

5

aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.

6

Udekwu, aye.]

7

[The motion carried unanimously.]

8

9

[Jason Anderson, Esquire, Board Prosecutor, presented

10

a Consent Agreement for Case No. 20-49-010724.]

11

12

{Kelsey Ashworth, Esquire, Board Prosecutor,

13

presented a Consent Agreement for Case No. 21-49-

14

017405.]

15

MS. WALTER:

16

I believe the Board would entertain a

17

motion to entertain the Consent Agreements

18

at Nos. 6 and 7, Case Nos. 20-49-010724

19

and 21-49-017405.

20

CHAIR WOODLAND:

21

Do I have a motion?

22

ACTING COMMISSIONER CLAGGETT:

23

So moved.

24

DR. KUTZ:

25

I'll second.

1 CHAIR WOODLAND:

2 Any other further discussion. Hearing
3 none, could we have a roll call, please?

4

5 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
6 Dillon, aye; Dr. Ripchinski, aye; Mr.
7 Eisenhower, aye; Ms. Reddy, aye; Dr. Six,
8 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
9 Udekwu, aye.]

10 [The motion carried unanimously. The name of the
11 Respondent for No. 6 is Benjamin Hale Woollaston, PA
12 and No. 7 is Paul Charles Serra, M.D.]

13

14 [Keith Bashore, Esquire, Board Prosecutor, presented
15 two Consent Agreements for Case Nos. 23-49-013528 and
16 23-49-012292.]

17 MS. WALTER:

18 I believe the Board would entertain a
19 motion to approve the Consent Agreements
20 at Case Numbers 23-49-013528 and 23-49-
21 012292.

22 CHAIR WOODLAND:

23 Do we have a motion?

24 MR. EISENHAUER:

25 So moved.

1 DR. KUTZ:

2 I'll second.

3 CHAIR WOODLAND:

4 Any further discussion? Hearing none,
5 could we have a roll call?

6

7 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
8 Dillon, aye; Dr. Ripchinski, aye; Mr.
9 Eisenhauer, aye; Ms. Reddy, aye; Dr. Six,
10 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
11 Udekwu, aye.]

12 [The motion carried unanimously. The name of the
13 Respondent for No. 8 is Scott Steven Katzman, M.D.
14 and No. 9 is Valerly Chernov, M.D.]

15

16 MS. WUCINSKI:

17 I believe the Board would entertain a
18 motion to direct Board Counsel to draft an
19 Adjudication and Order addressing
20 Exceptions for Brenda J. Valentine, LRT
21 Case No. 22-49-001900.

22 CHAIR WOODLAND:

23 Do we have a motion?

24 MR. DILLON:

25 So moved.

1 MR. EISENHAUER:

2 Second.

3 CHAIR WOODLAND:

4 Any further discussion? Hearing no
5 further discussion, can we have a roll
6 call vote, please?

7 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
8 Dillon, aye; Dr. Ripchinski, aye; Mr.
9 Eisenhauer, aye; Ms. Reddy, aye; Dr. Six,
10 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
11 Udekwu, aye.]

12 [The motion carried unanimously.]

13 ***

14 [Adam J. Williams, Esquire, Board Prosecutor,
15 presented a Consent Agreement for Case No. 20-49-
16 014401.]

17 MS. -WALTER:

18 I believe the Board would entertain a
19 motion to approve the Consent Agreement,
20 Item No. 10 on the agenda, 20-49-014401.

21 CHAIR WOODLAND:

22 Do I have a motion?

23 ACTING COMMISSIONER CLAGGETT:

24 So moved.

25 CHAIR WOODLAND:

1 Do I have a second?

2 DR. KUTZ:

3 I'll second.

4 CHAIR WOODLAND:

5 Any further discussion? Hearing none, Sai,
6 could we have a roll call please?

7 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
8 Dillon, aye; Dr. Ripchinski, aye; Mr.
9 Eisenhower, aye; Ms. Reddy, aye; Dr. Six,
10 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
11 Udekwu, aye.]

12 [The motion carried unanimously.]

13 ***

14 Applications - Allied Health Professionals

15 MS. WUCINSKI:

16 Agenda Item Nos. 15 and 16, I believe the
17 Board would entertain a motion to
18 Provisionally Deny the Application for a
19 license to practice as a behavior
20 specialist of Jeanette Thomas Brown and
21 the application for a license to practice
22 as a respiratory therapist of Kajal
23 Jaykishan Patel.

24 CHAIR WOODLAND:

25 Do I have a motion?

1 MR. EISENHAUER:

2 So moved.

3 DR. KUTZ:

4 Second.

5 CHAIR WOODLAND:

6 Any further discussion? Hearing none,
7 could we have a roll call please?

8

9 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
10 Dillon, aye; Dr. Ripchinski, aye; Mr.
11 Eisenhauer, aye; Ms. Reddy, aye; Dr. Six,
12 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
13 Udekwu, aye.]

14 [The motion carried unanimously.]

15

16 Applications-Unrestricted Physician and Surgeon

17 MS. WUCINSKI:

18 At agenda Item No. 17, I believe the Board
19 would entertain a motion to grant the
20 application for a license to practice as a
21 physician surgeon of Samar Altamini, M.D.

22 CHAIR WOODLAND:

23 Can I have a motion?

24 ACTING COMMISSIONER CLAGGETT:

25 So moved.

1 CHAIR WOODLAND:

2 Do I have a second?

3 DR. ABELLA:

4 Second.

5 CHAIR WOODLAND:

6 Any further discussion? Hearing none,
7 roll call please?

8

9 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
10 Dillon, aye; Dr. Ripchinski, aye; Mr.
11 Eisenhower, aye; Ms. Reddy, aye; Dr. Six,
12 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
13 Udekwu, aye.]

14 [The motion carried unanimously.]

15

16 MS. WUCINSKI:

17 I believe the Board would entertain a
18 motion to table the application for a
19 license to practice as a physician and
20 surgeon of Paul Gregorio, M.D. to invite
21 him to apply for an institutional license
22 and noting that Dr. Abella and Dr.
23 Ripchinski are recused.

24 ACTING COMMISSIONER CLAGGETT:

25 So moved.

1 MR. DILLON:

2 Second.

3 CHAIR WOODLAND:

4 Any discussion? Hearing none, could we
5 have a roll call please?

6
7 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
8 Dillon, aye; Dr. Ripchinski, recuse; Mr.
9 Eisenhauer, aye; Ms. Reddy, aye; Dr. Six,
10 aye; Dr. Kutz, aye; Dr. Abella, recuse;
11 Dr. Udekwu, aye.]

12 [The motion carried. Dr. Abella and Dr. Ripchinski
13 recused from deliberations and voting on the motion.]

14 ***

15 MS. WUCINSKI:

16 At agenda Item No. 19, I believe the Board
17 would entertain a motion to table the
18 application for the license to practice as
19 a physician and surgeon of Atul Kakkar,
20 M.D. and invite him to apply for an
21 institutional license and noting that Dr.
22 Ripchinski is recused.

23 CHAIR WOODLAND:

24 Do I have a motion?

25 ACTING COMMISSIONER CLAGGETT:

1 So moved.

2 MR. EISENHAUER:

3 Second.

4 CHAIR WOODLAND:

5 Any further discussion? Hearing none,
6 could we have a roll call please?

7

8 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
9 Dillon, aye; Mr. Eisenhauer, aye; Ms.
10 Reddy, aye; Dr. Six, aye; Dr. Kutz, aye;
11 Dr. Abella, aye; Dr. Udekwu, aye.]

12 [The motion carried. Dr. Ripchinski recused from
13 deliberations and voting on the motion.]

14

15 MS. WUCINSKI:

16 I believe the Board would entertain a
17 motion to table the application for a
18 license of practice as a physician and
19 surgeon of Angeli Christy Yu, M.D. and to
20 invite her to apply for an institutional
21 license.

22 CHAIR WOODLAND:

23 Can I have a motion?

24 ACTING COMMISSIONER CLAGGETT:

25 So moved.

1 DR. KUTZ:

2 Second.

3 CHAIR WOODLAND:

4 Any further discussion? Hearing none,
5 could we have a roll call please?

6

7 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
8 Dillon, aye; Dr. Ripchinski, aye; Mr.
9 Eisenhauer, aye; Ms. Reddy, aye; Dr. Six,
10 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
11 Udekwu, aye.]

12 [The motion carried unanimously.]

13

14 MS. WUCINSKI:

15 Agenda Item 21, I believe the Board would
16 entertain a motion to table the
17 application for a license to practice as a
18 physician and surgeon of Rim Zayad, M.D.
19 and to invite him to apply for an
20 institutional license and noting that Dr.
21 Woodland is recused.

22 I need a motion.

23 ACTING COMMISSIONER CLAGGETT:

24 Motion.

25 MR. DILLON:

1 Second.

2 MS. WUCINSKI:

3 Any further discussion? Seeing none, roll
4 call.

5

6 Mr. Claggett, aye; Mr. Dillon, aye; Dr.
7 Ripchinski, aye; Mr. Eisenhauer, aye; Ms.
8 Reddy, aye; Dr. Six, aye; Dr. Kutz, aye;
9 Dr. Abella, aye; Dr. Udekwu, aye.]

10 [The motion carried. Dr. Woodland recused from
11 deliberations and voting on the motion.]

12

13 Applications - Reactivations

14 MS. WUCINSKI:

15 I believe the Board would entertain a
16 motion to grant the application for a
17 license to practice as a respiratory
18 therapist of Brian Glynn.

19 CHAIR WOODLAND:

20 Do I have a motion?

21 ACTING COMMISSIONER CLAGGETT:

22 Motion.

23 DR. KUTZ:

24 Second.

25 CHAIR WOODLAND:

1 Any further discussion? Hearing none, can
2 we have roll call please?

3
4 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
5 Dillon, aye; Dr. Ripchinski, aye; Mr.
6 Eisenhauer, aye; Ms. Reddy, aye; Dr. Six,
7 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
8 Udekwu, aye.]

9 [The motion carried unanimously.]

10 ***

11 MS. WUCINSKI:

12 I believe the Board would entertain a
13 motion to table agenda Items 23 through 25
14 and send standard reentry letters to the
15 following applicants: Robert Cicco, M D.;
16 Robert Provenzano, M.D.; Judy Weinstein,
17 M.D.

18 CHAIR WOODLAND:

19 Do I have a motion?

20 ACTING COMMISSIONER CLAGGETT:

21 So moved.

22 DR. KUTZ:

23 Second.

24 CHAIR WOODLAND:

25 Any further discussion? Hearing none, can

1 we have a roll call please?

2

3 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
4 Dillon, aye; Dr. Ripchinski, aye; Mr.
5 Eisenhower, aye; Ms. Reddy, aye; Dr. Six,
6 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
7 Udekwu, aye.]

8 [The motion carried unanimously.]

9

10 Ratifications

11 MS. WUCINSKI:

12 Agenda Items 26 through 35, I believe the
13 Board would entertain a motion to ratify
14 the granting of the following applications
15 for a license to practice as a physician
16 and surgeon: Margaret Omolara Adejolu,
17 M.D.; Sarah Freeman Brown, M.D.; Avihu
18 Gazit, M.D.; Kim Grace, M.D.; Magis
19 Mandapathil, M.D.; Tharick Ali Pascoal,
20 M.D.; Zeina Mohsen Naguib Salem, M.D.;
21 Jose Del Valle Azocar Silva, M.D.; Jeffrey
22 Snyder, M.D.; Luigi Volpini, M.D.

23 CHAIR WOODLAND:

24 Do I have a motion?

25 ACTING COMMISSIONER CLAGGETT:

1 So moved.

2 MR. EISENHAUER:

3 Second.

4 CHAIR WOODLAND:

5 Any further discussion on any or all of
6 these? Hearing none, could we have a roll
7 call please, Sai?

8

9 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
10 Dillon, aye; Dr. Ripchinski, aye; Mr.
11 Eisenhauer, aye; Ms. Reddy, aye; Dr. Six,
12 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
13 Udekwu, aye.]

14 [The motion carried unanimously.]

15

16 Miscellaneous

17 MS. WUCINSKI:

18 Agenda Item No. 44, I believe the Board
19 would entertain a motion to approve the
20 preceptorship under Penn State Health and
21 grant an unrestricted license limited to
22 practice under the auspices of that
23 preceptorship for Lauren Doliner, M.D.

24 CHAIR WOODLAND:

25 Do I have a motion?

1 ACTING COMMISSIONER CLAGGETT:

2 So moved.

3 DR. KUTZ:

4 Second.

5 CHAIR WOODLAND:

6 Any further discussion? Hearing none,
7 could we have a roll call please, Sai?

8

9 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
10 Dillon, aye; Dr. Ripchinski, aye; Mr.
11 Eisenhower, aye; Ms. Reddy, aye; Dr. Six,
12 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
13 Udekwu, aye.]

14 [The motion carried unanimously.]

15

16 MS. WUCINSKI:

17 I believe the Board would entertain a
18 motion to deny the Petition for Early
19 Termination and Motion to Seal Record of
20 G.F., M.D.

21 CHAIR WOODLAND:

22 Do I have a motion?

23 ACTING COMMISSIONER CLAGGETT:

24 So moved.

25 DR. KUTZ:

1 Second.

2 CHAIR WOODLAND:

3 Any further discussion? Hearing none,
4 could we have a roll call, please, Sai?

5

6 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
7 Dillon, aye; Dr. Ripchinski, aye; Mr.
8 Eisenhauer, aye; Ms. Reddy, aye; Dr. Six,
9 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
10 Udekwu, aye.]

11 [The motion carried unanimously.]

12

13 MS. WUCINSKI:

14 I believe the Board would entertain a
15 motion to approve the Preceptorship under
16 Raymond McAllister, M.D., and to grant an
17 unrestricted license limited to the
18 practice under the auspices of that
19 preceptorship for a period of five weeks
20 for Kimberly Thompson, M.D.

21 CHAIR WOODLAND:

22 Do I have a motion?

23 ACTING COMMISSIONER CLAGGETT:

24 So moved.

25 DR. KUTZ:

1 Second.

2 CHAIR WOODLAND:

3 Any further discussion? Hearing none,
4 could we have roll call please?

5

6 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
7 Dillon, aye; Dr. Ripchinski, aye; Mr.
8 Eisenhower, aye; Ms. Reddy, aye; Dr. Six,
9 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
10 Udekwu, aye.]

11 [The motion carried unanimously.]

12

13 Regulatory Status Report

14 16A-4955 - Physicians Assistants

15 [Dana Wucinski, Esquire, Board Counsel, referred
16 members to discussion of Regulation 16A-4955 voted on
17 by the Board to promulgate as proposed and was
18 approved by the Office of the Attorney General. It
19 will be published shortly and then once all comments
20 are received from all stakeholders, the matter would
21 be placed back on the Board's agenda.]

22

23 Other

24 House Bill 507 of 2023

25 [It was noted this bill was passed and is now Act 31

1 of 2023 that leads to informed consent for pelvic,
2 rectal and prostate examinations when the patient is
3 under anesthesia or otherwise unconscious. There are
4 several exceptions.

5 Chair Woodland commented that informed consent is
6 important for all aspects of a physical exam and not
7 just sensitive areas. He opined that best practice
8 is to have students meet patients ahead of time and
9 talk with them and get that consent in general.]

10

11 2023 - FSMB Board Attorneys Workshop

12 [Dana Wucinski, Esquire, Board Counsel, thanked the
13 Board for sending her to her -third FSMB attorney
14 workshop. She noted the conference included sessions
15 on legal challenges faced by state medical boards
16 which are meant to help board attorneys gain
17 practical insight and strategies that they could
18 immediately put to use as board counsel. Ms.
19 Wucinski indicated the topic discussed during this
20 conference was sexual misconduct and it was helpful
21 to talk with her peers about as she has several of
22 those types of cases pending.

23 Some other issues included topics on AI in the
24 field of medicine, improper use of social media and
25 how it can turn into unprofessional conduct. And the

1 state of the states involved discussion of different
2 issues that each state is facing and how the
3 different states handle them.

4 Chair Woodland commented that it is nice to have
5 our state medical boards represented at the meeting,
6 and the FSMB is always impressed with our thinking,
7 especially by our lawyers on some of the cases, which
8 is great for us going forward. He further commented
9 that sexual misconduct cases are on the rise
10 nationally and have seen a few on this Board.]

11 ***

12 Old Business - New Business

13 [Gerard F. Dillon, Ph.D., reported his attendance at
14 the meeting of the State Board Advisory Committee to
15 the USMLE program which occurred at the end of
16 November which included representatives from nine
17 different state medical boards and the staff of the
18 ECFMG, the NBME, and the FSMB.

19 He noted a summary of the meeting was provided by
20 the federation as an executive summary, which has
21 already been shared with the group. Topics included
22 irregular test taking behavior, in other words,
23 cheating on examinations, which occurs occasionally,
24 research efforts in support of the examination,
25 legislative activity in some of the states that might

1 be impacting their pathways to licensure and how that
2 might have implications with other state boards.

3 He provided further comment regarding two topics
4 relating to the granting of the ECFMG certificate to
5 international medical graduates, the first one being
6 that ECFMG certificate required an IMG to go to a
7 medical school that is accredited by a regional
8 accreditation association approved by the ECFMG and
9 by the World Federation for Medical Education. And
10 the deadline was going to be next year, 2024, but
11 seeing great progress in the accrediting agencies
12 springing up around the globe they're a little bit
13 worried about introducing it as a set requirement in
14 2024.

15 Mr. Dillon noted that in 2024 they will report on
16 each individual's record whether or not they went to
17 a medical school that was accredited by one of these
18 recognized agencies, and that will just be part of
19 the information that'll be included. There may come
20 a time in the future where it will be required but
21 not in 2024.

22 Mr. Dillon indicated the second topic was
23 regarding certificates granted by ECFMG that are time
24 limited and are going to expire. And the reason is
25 part of the examination that ECFMG used to use to

1 grant their certificate, the USMLE step two clinical
2 skills examination, went away, and the ECFMG thought
3 it might be appropriate for them to grant
4 certificates that are time limited. Individuals with
5 expiring certificates would need to enter into and be
6 successful in the first postgraduate year in a
7 training program. ECFMG felt that if that could be
8 completed, a permanent certificate would be granted.

9 Mr. Dillon noted awaiting information from ECFMG
10 as to what that will look like and how that will be
11 communicated. He commented that Board attorneys and
12 staff members are looking at it and it may be back
13 before the Board at a future meeting.]

14

15 Vote to Approve 2025 Medical Board Meeting Dates

16 [The Board discussed possible dates for next year.

17 Chair Woodland questioned December 30 given that is

18 the week between Christmas and New Years and

19 suggested December 23. The matter was tabled pending

20 further information.]

21

22 Election of Officers for 2024

23 [Chair Woodland stated he would be happy to continue

24 on as Chair and after speaking to Dr. Yealy he would

25 be glad to continue on as Vice Chair if the Board

1 desired.

2 MS. WALTER:

3 Are there any nominations for Chair for
4 2024?

5 MR. EISENHAUER:

6 I move that Dr. Woodland be named Chair.

7 DR. KUTZ:

8 Second.

9 MS. WALTER:

10 Are there any other nominations? With
11 that, the nominations close and we'll do a
12 roll call vote.

13

14 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
15 Dillon, aye; Dr. Ripchinski, aye; Mr.
16 Eisenhauer, aye; Ms. Reddy, aye; Dr. Six,
17 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
18 Udekwu, aye.]

19 [The motion carried unanimously.]

20

21 CHAIR WOODLAND:

22 Next is the role of Vice Chair. I would
23 like to nominate Dr. Yealy.

24

25 (WHEREUPON A PAUSE IN THE RECORD DUE TO TECHNICAL

1 DIFFICULTIES.)

2 ---

3 CHAIR WOODLAND:

4 We're back. Is there a second?

5 ACTING COMMISSIONER CLAGGETT:

6 Second.

7 CHAIR WOODLAND:

8 Are there any other nominations? Hearing
9 none, roll call?

10

11 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
12 Dillon, aye; Dr. Ripchinski, aye; Mr.
13 Eisenhower, aye; Ms. Reddy, aye; Dr. Six,
14 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
15 Udekwu, aye.]

16 [The motion carried unanimously.]

17 ***

18 Review of Committee Members

19 [Chair Woodland noted there would be discussion and
20 affirmation at the next meeting of the following
21 Committee members: Probable Cause Screening
22 Committee, Dr. Yealy, Chair; Dr. Ripchinski, Second
23 Primary; Mr. Dillon, Alternate. Allied Health
24 Related Professionals, Mr. Eisenhower is Chair; Dr.
25 Ripchinski is Co-Chair and Mr. Dillon also on the

1 committee. Legislation/Policy Development and
2 Review, Dr. Ripchinski is Chair; Dr. Yealy is a
3 member and Dr. Abella would like to serve. Licensure
4 Qualification Committee, Mr. Dillon, Chair; Mr.
5 Eisenhower and Dr. Yealy are also on that committee.

6 Chair Woodland requested that any Board members
7 who would like to serve on these committees send him
8 an email for further discussion and ratification at
9 the next meeting.]

10 ***

11 Report of Acting Commissioner

12 [Arion Claggett, Acting Commissioner, reminded all
13 that the physical location of the board meetings has
14 changed and will now be held at the Hub Building,
15 2525 North 7th Street, Harrisburg, PA. The website
16 will be updated to reflect this.]

17 ***

18 Report of Committee on Health Related Professionals

19 No Report

20 ***

21 Report of the Committee on Legislation/Policy

22 Development and Review

23 No Report

24 ***

25 Report of Committee on Licensure Qualifications

1 No Report

2 ***

3 Report of the Board Administrator

4 No Report

5 ***

6 Report of Board Chair

7 [Mark B. Woodland, M.S., M.D., FACOG, commented that
8 the health observations for the National Health
9 Observance Month World AIDS Day was December 1. He
10 noted this is Respiratory Awareness Month. Also
11 upcoming in January is the Blood Donor Awareness
12 Month, Glaucoma Awareness Month, and Cervical Cancer
13 Screening Awareness Month, as well as Healthy Weight
14 Awareness Month.

15 He noted previous discussion regarding the Covid
16 variant, the attorneys' workshop and the FSMB
17 highlights. Dr. Woodland stated nominations for
18 physicians on the FSMB Board of Directors was open,
19 and he was very privileged to be supported by the
20 Board to be nominated for a position. The election
21 will take place at the annual meeting in March or
22 April of 2024.

23 Dr. Woodland informed members of an upcoming
24 webinar on Artificial Intelligence as viewed through
25 the Lens of State Regulations. He stated more formal

1 comments from recent meetings from the AAMC include
2 their United States Physician Workforce Data
3 Dashboard which was presented to the Board by the
4 FSMB which was from the perspective of licensed
5 practicing physicians but this is the prediction
6 workforce from the medical school side of things. He
7 noted the website address if anyone was interested.

8 Dr. Woodland indicated that one of the big
9 highlights for the AAMC is to promote diversity
10 medicine and why that is significant which the ACGME
11 also has highlighted with two programs, Back to
12 Bedside which enhances the clinician's relationship
13 with the patient, and Equity Matters and why
14 diversity is important in the medical profession.]

15 ***

16 Board Meeting Dates (cont.)

17 CHAIR WOODLAND:

18 Could I have a motion to move the proposed
19 Board meeting dates for 2025 forward with
20 the change from the 30th of December, to
21 the 23rd of December?

22 DR. ABELLA:

23 So moved.

24 MR. EISENHAUER:

25 Second.

1 CHAIR WOODLAND:

2 Any further discussion? Hearing none,
3 could we have a roll call vote.

4

5 Mr. Claggett, aye; Dr. Woodland, aye; Mr.
6 Dillon, aye; Dr. Ripchinski, aye; Mr.
7 Eisenhauer, aye; Ms. Reddy, aye; Dr. Six,
8 aye; Dr. Kutz, aye; Dr. Abella, aye; Dr.
9 Udekwu, aye.]

10 [The motion carried unanimously.]

11

12 [Chair Woodland asked everyone to keep in mind all
13 the adversity in the world in the Middle East and
14 Europe and feel privileged for what we do have.

15 He noted the State Medical Board does a lot of
16 good, and we should all feel good for what we're
17 doing. He noted appreciation to everyone on the call
18 who help move safety and quality issues forward for
19 the Commonwealth of Pennsylvania. All were wished a
20 Happy and Safe Holiday.]

21

22 Adjournment

23 CHAIR WOODLAND:

24 I'll take a motion to adjourn.

25 ACTING COMMISSIONER CLAGGETT:

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26

So moved.

[There being no other business, the State Board of
Medicine Meeting adjourned at 12:11 p.m.]

CERTIFICATE

I hereby certify that the foregoing summary
minutes of the State Board of Medicine meeting, was
reduced to writing by me or under my supervision, and
that the minutes accurately summarize the substance
of the State Board of Medicine meeting.



Derek Richmond,
Minute Clerk
Sargent's Court Reporting
Service, Inc.

STATE BOARD OF MEDICINE
REFERENCE INDEX

December 12, 2023

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TIME	AGENDA
8:45	Executive Session
10:30	Return to Open Session
10:42	Official Call to Order
10:42	Introduction of Board Members/Attendees
10:42	Acknowledge Public - Turn Off Electronic Devices
10:47	Approval of Minutes
10:47	Applications for Licensure
10:54	Appointment - Drexel Re-entry Program, Nielufar Varjavand, MD.
11:49	Report of Prosecuting Attorneys
11:36	Report of Regulatory Counsel
11:41	Applications for Licensure
11:53	Correspondence
12:03	Report of Acting Commissioner
12:05	Report of Board Chair
12:11	Adjournment