

# Georgia Composite Medical Board Annual News and Report



2015



*Need to renew your license, order a new card or wall certificate, or update your address? Click the above code or scan with your smartphone or device!*

## Inside this issue:

Dr. House elected as new chairperson, page 2

Dr. Sumner to head Mercer medical school, page 3

Annual report data, page 4

Low THC oil, page 7

PA news, page 8

Cosmetic laser FAQs, page 9

Georgia PHP, page 11

E-communication and patient health, page 11

Tips for patient record-keeping, page 14

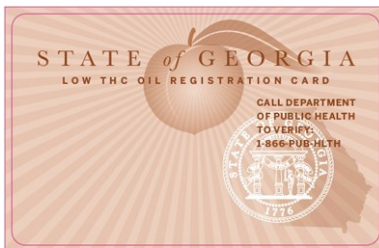
APRN news, page 18

Medical assistants, page 18

Rules FAQs, page 19

Upcoming Board schedule, page 20

## Board, DPH worked together to develop medical marijuana registry



The Georgia Composite Medical Board and the Georgia Department of Public Health teamed up over the past few months to develop a “Low THC Oil Registry” for patients and caregivers who qualify to carry an identification card under [House Bill 1](#), the medical cannabis law.

Under HB 1, patients and caregivers of patients who believe they may be eligible can consult with their physician about the possibility of obtaining a card allowing them to possess 20 fluid ounces of low THC oil within the state of Georgia. If approved by the physician, the patient or patient’s caregivers’ information will be entered into DPH’s secure Low THC Oil Registry, and a card will be issued.

As of August 11, 2015, the DPH had registered 138 patients.

For more information, visit the Low THC Oil Registry website by clicking [here](#).

## Board now files all vaccine protocols



The Georgia Composite Medical Board worked closely with other state agencies to implement [House Bill 504](#), which states all vaccine protocols are to be filed with the Board effective July 1, 2015.

The bill requires pharmacists and nurses who are parties to a vaccine protocol to hold current certification in Basic Cardiac Life Support, complete certain training, and to maintain individual liability insurance of at least \$250,000. Each pharmacist and nurse who is a party to a protocol must also submit a notarized affidavit to the delegating physician attesting to compliance with the law’s liability insurance, certification, and training requirements, and identifying the location or locations in which the pharmacist or nurse will administer vaccinations pursuant to the vaccine protocol agreement.

Each vaccine protocol agreement must be submitted to the Board, along with the affidavits and proof of individual liability insurance. Protocol agreements must be renewed biennially.

For more information including forms and affidavits, click [here](#).

## Board elects Alice House, MD as chairperson, John Antalis, MD as vice-chairperson



On June 4, 2015, the GCMB elected **Alice A. House, MD** of Warner Robins as chairperson of the Board. Originally appointed to the Board by Governor Sonny Perdue in January 2010, Dr. House, a board-certified family practice physician, has served on the faculty of Mercer University School of Medicine since 2002.

Before being named to her current position as dean of Mercer's Columbus Campus in May 2014, Dr. House held the positions of clerkship director, professionalism program director, director of student advising, and senior associate dean for student affairs. Licensed in Georgia since 1997, Dr. House was in private practice in Byron until joining the Mercer University faculty.



The Board also elected **John S. Antalis, MD** of Dalton as vice-chairperson of the Board. Originally appointed to the Board by Governor Nathan Deal in February 2011, Dr. Antalis has been a practicing physician at Dalton Family Practice for 29 years. He is past-president of the Medical Association of Georgia and the Georgia Academy of Family Physicians. He was named Physician of the Year in 1996 and received the Joseph P. Bailey Distinguished Science award for Medical Services in 2013. He serves on the Medical Association of Georgia (MAG) Foundation, MAG Mutual Board, MAG Board and the Patient Safety Institute Board. Antalis earned a medical degree from St. George's University.

## Governor appoints three new members to the Board

**John Downey, DO** was appointed in June to succeed William Sightler, DO. Downey is a pain management specialist and the owner of the Royal Pain Center in Augusta. He is a major in the U.S. Army and trained at Walter Reed Army Medical Center. Downey is board certified in Physical Medicine and Rehabilitation. He earned a bachelor's degree from the University of Pennsylvania and a doctorate in Osteopathic Medicine from the University of New England. He and his wife, Cindy, have four children and four grandchildren. They reside in Augusta.

**J. Jeffrey Marshall, MD** was appointed in December 2014 to succeed Wendy Troyer, MD. Marshall practices at the Heart Center of Northeast Georgia Medical Center, where he is director of the Cardiac Cath Lab and chairman of the Joint Operating Committee. He is the former president of the Society for Cardiovascular Angiography and Interventions and serves on the Cardiovascular Board of the American Board of Internal

Medicine. Marshall earned a medical degree from the University of Florida College of Medicine and completed his Internal Medicine residency and his Cardiology and Interventional Cardiology Fellowships at the Medical College of Virginia (Virginia Commonwealth University). He and his wife, Julie, have four children and two grandchildren and reside in Sandy Springs.

**Joe Sam Robinson, Jr., MD** was appointed in June to succeed Jeffrey Grossman, MD. Robinson is the president of the Georgia Neurosurgical Institute. Robinson is the author of "Toward Healthcare Resources Stewardship" and is currently working on his second book. He is a former member of the Georgia Board of Physician Workforce and Georgia Trauma Care Network Commission. He earned a bachelor's degree from Harvard College and a medical degree from the University of Virginia. He and his wife, Betsy, have two children and reside in Macon.

## Members of the Board

<b>Alice A. House, MD</b> Warner Robins <i>Chairperson</i>	<b>Jane Camille “Cami” McGarity</b> Gainesville <i>Consumer</i>
<b>John S. Antalis, MD</b> Dalton <i>Vice-Chairperson</i>	<b>B.K. Mohan, MD</b> Riverdale
<b>Keisha Callins, MD, MPH</b> Albany	<b>George E. “Trey” Powell III, MD</b> Hahira
<b>E. Daniel DeLoach, MD</b> Savannah	<b>David W. Retterbush, MD</b> Valdosta <i>Immediate Past Chairperson</i>
<b>John Downey, DO</b> Augusta	<b>Joe Sam Robinson, MD</b> Macon
<b>Charmaine Faucher, PA-C</b> Kennesaw <i>Ex-Officio</i>	<b>Ronald “Ronnie” Wallace, MBA</b> Rome <i>Consumer</i>
<b>Alexander S. Gross, MD</b> Dunwoody <i>Past Chairperson</i>	<b>Richard L. Weil, MD</b> Atlanta <i>Past Chairperson</i>
<b>John Jeffrey Marshall, MD</b> Gainesville	<b>Charles L. White, DO</b> Cleveland <i>Past Chairperson</i>

## Board committees

Each member of the Board is assigned to various committees to participate in the decision-making functions of the Board. The committees include:

1. **Investigative** (Five Board members) examines initial complaints, results of all investigations, and medical malpractice reports.
2. **Physician Licensing** (Four Board members) evaluates each applicant's fitness to practice by establishing and applying standards for licensure and practice; reviews all non-routine applications; sets policies for staff on handling of applications.
3. **Wellness** (Five Board members) reviews all cases in which a practitioner's practice might be affected by a behavioral, cognitive, physical, or substance use issue; meets with the practitioner and his or her advocates and treatment providers to assess the individual situation and ability to return to practice; recommends restrictions or sanctions as warranted.
4. **Rules** (all Board members) develops rules to govern the performance of practitioners regulated by the Board; assists the Board in defining, assessing, and assuring the continued competency of all licensees throughout their careers.
5. **Advisory Committees** (each with at least two Board members, plus practitioners from the professional community) for each profession regulated.

## Former Board member and medical director to lead Mercer School of Medicine

Jean Sumner, MD will succeed William F. Bina III, M.D., M.P.H., FAAFP, as dean of Mercer University's School of Medicine effective July 1, 2016. Bina will head the SOM's newest campus in Savannah.

Sumner served as member of the Georgia Composite Medical Board from 2009 until 2012, when she took over as medical director for another year. Sumner was a member of the School of Medicine's first graduating class in 1986 and is a practicing physician in Washington and Johnson counties where she has been playing a major role in telehealth medicine field over past couple of years and currently serves as associate dean for rural health for the School of Medicine.

For more information about Mercer School of Medicine, please click [here](#).

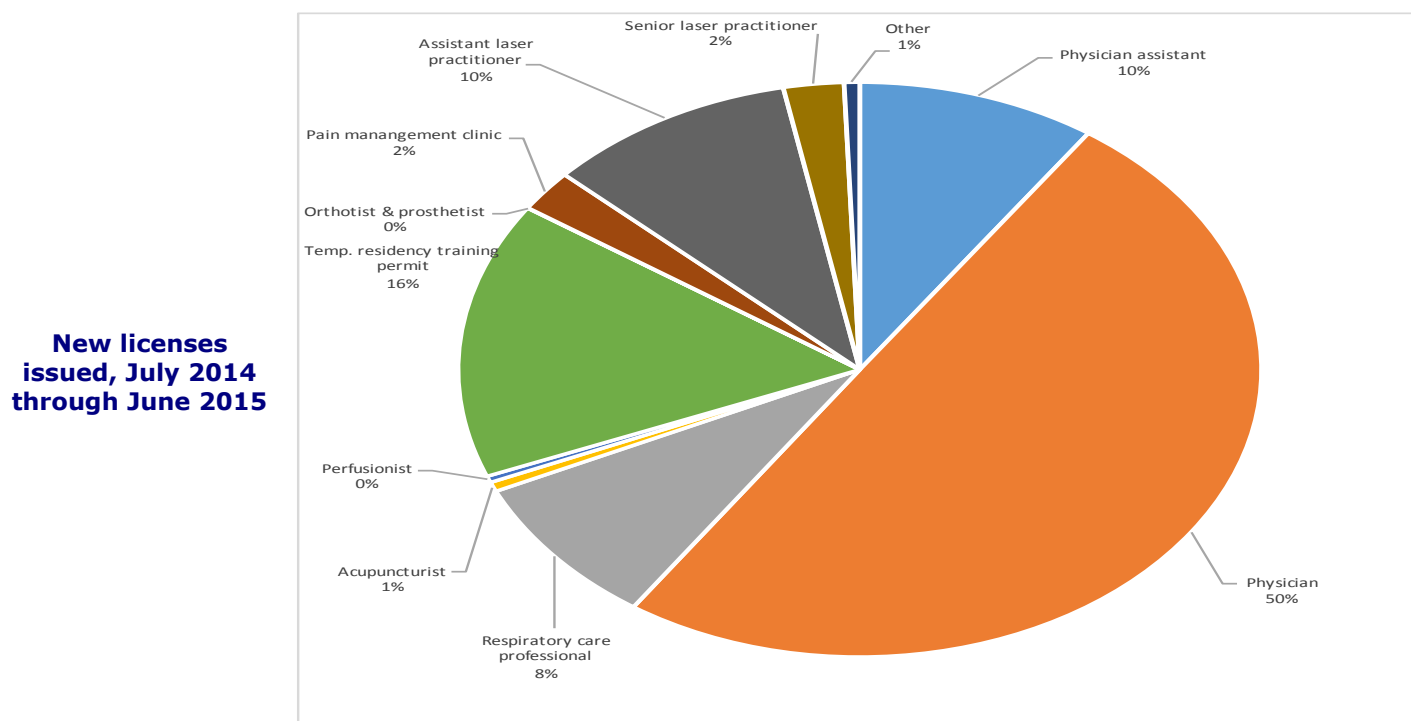


Pictured above, Sumner with Gov. Nathan Deal

## Licensing and nurse protocol reviews

The regulation of the practice of medicine and other professions by the state of Georgia is undertaken for one purpose – to protect Georgians by ensuring that those who practice a particular profession have the education, training, and skill to practice safely. The Board also reviews a physician assistant's (PA) job description, which lists the duties a supervising physician may delegate to the PA, to help ensure that the physician/PA team has the requisite training to practice with reasonable skill and safety, and reviews physicians' protocols with advanced practice registered nurses (APRN).

In Fiscal Year 2015, the Board issued **4,652** new licenses, an increase of over **20** percent over FY 2014. The Board also reviewed **1,150** applications to add or change supervising physicians (an increase of over **8** percent over FY 2014) and **1,984** APRN protocols (an increase of almost **16** percent over FY 2014).



### Profession

### Licenses issued

Physician	2,321
Physician assistant	448
Respiratory care professional	396
Acupuncturist	25
Perfusionist	17
Temp. residency training permit	724
Orthotist & prosthetist	1
Pain management clinic	109
Assistant laser practitioner	469
Senior laser practitioner	113
Other	29

### Total licenses issued in FY 2015

**4,652**

## Enforcement and discipline

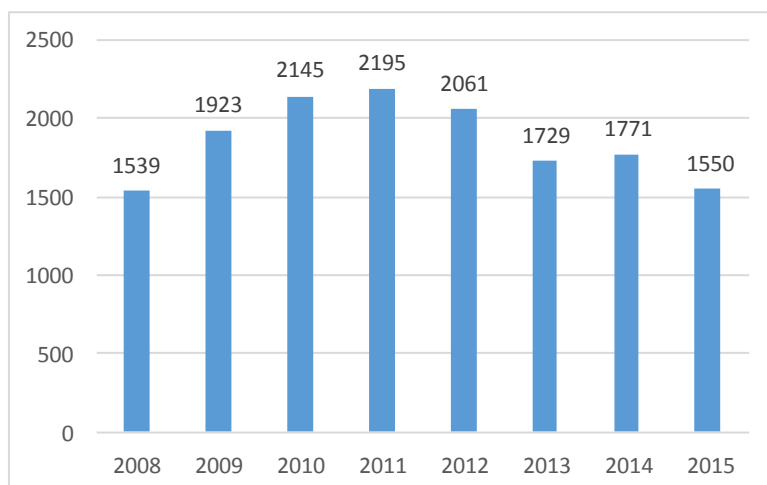
Another way the Board regulates the professions it licenses is through sanctions taken against licensees who fail to comply with the Medical Practice Act and the Board's rules. Patients, family members, fellow practitioners, hospitals, other licensing boards and regulating entities, and law enforcement agencies can file complaints against individual licensees or against individuals who may be practicing without a license. The Board carefully considers each complaint to determine if sanctions against the licensee are warranted. In addition to these complaints, the Board investigates each case in which a malpractice insurer paid any sum on behalf of a Georgia licensee, in order to determine whether the licensee is able to practice medicine safely. As it investigates the allegations, the Board may subpoena patient records, interview the subject of the complaint, interview the complainant and/or other individuals with knowledge of the issues, and have the patient records peer-reviewed. These activities are all taken in the pursuit of patient safety.

In Fiscal Year 2015, the Board received **1,550** complaints (of which **1,202** were within the Board's jurisdiction) and issued **50** sanctions against **48** licensees through various dispositions (public reprimand, probation, revocation, public fine, etc.).

Type of sanction	Number of public sanctions
Suspension	6
Voluntary surrender	7
Revocation	1
Public reprimand	11
Probation	8
Miscellaneous	1
Modification	4
Termination	8
CME	1
Cease and desist	2
Public fine	1
<b>Total</b>	<b>50</b>

### Public sanctions issued in FY 2015

### Complaints received by fiscal year



## Board disciplinary action report

The following report lists public disciplinary actions taken by the Board between July 1, 2014 and June 30, 2015. These cases have been investigated and are now part of the public record. Although every effort is made to ensure that the information is correct, you should read the order in its entirety. The Board may include several provisions in an order, and the description of the discipline in this report may not reflect all the actions in the order. You may view these public orders on our website by clicking [here](#).

### Revocations, voluntary surrenders and suspensions

Name	Profession	License	Order	Date
Atlanta Pain Rehabilitation	Pain Mgt Clinic	222	Voluntary surrender	09/22/2014
Benton, Patricia Lee	Physician	18983	Revocation	06/05/2015
Horton, William Jeffrey	Resp Care Prof	2226	Suspension	10/30/2014
Innovative Pain Management Center	Pain Mgt Clinic	110	Voluntary Surrender	09/18/2014
Jenkins, Marcus Anthony	Physician	48058	Suspension	05/15/2015
Johnson, Nathaniel III	Physician	32336	Voluntary surrender	07/18/2014
Malloy, Tyrone Cecil	Physician	23086	Voluntary surrender	05/12/2015
Mayberry, William Stoy	Physician	22444	Suspension	02/12/2015
Roberts, Paul Albert	Physician	69246	Voluntary surrender	01/23/2015
Shuman, Robert Daniel III	Physician	68465	Suspension	08/25/2014
Tan, Mike Yap	Physician	17494	Voluntary surrender	10/31/2014
Thrasher, Kelly Burton	Physician	52491	Voluntary surrender	02/05/2015
Williams, Norris	Physician Asst	1844	Suspension	10/28/2014
Yost, Robert Brian	Physician	39701	Suspension	09/11/2014

### Orders for continuing medical education

Name	Profession	License	Hours	Date
Weber, Warren McClure	Physician	26677	20	07/10/2014

### Amendments to consent orders

Name	Profession	License	Order	Date
Harding, Susan Mildred	Physician	31013	Amendment to order	07/10/2014
Knight, Vincent Karl	Physician	54912	Amendment to order	09/11/2014



## Public reprimands and probation

Name	Profession	License	Order	Date
Almedom, Stifanos Tesfu	Physician Asst	3619	Probation	09/22/2014
Anegundi, Sudhindra Krishnarao	Physician	17970	Public Reprimand	12/04/2014
Chiriboga, Augusto	Physician	29425	Public Reprimand	11/07/2014
Columbus Pain Center	Pain Mgt Clinic	302	Public Reprimand	09/25/2014
Comprehensive Pain Care	Pain Mgt Clinic	303	Public Reprimand	10/07/2014
Davidson, David Alan	Physician	43916	Probation	09/11/2014
Gibson, Michael Anthony Sr	Physician	57975	Probation	09/02/2014
Holland, Robert Edward	Physician	59662	Probation	12/04/2014
Reddy, Rajashaker	Physician	41934	Probation	11/07/2014
Rodriguez, Gretchen Suzanne	Resp Care Prof	5575	Probation	12/30/2014
Specialty Clinics Spine Intervention - Braselton	Pain Mgt Clinic	291	Public Reprimand	09/11/2014
Thomas, Soren Shia	Physician	26895	Public Reprimand	10/09/2014
Victor, Jules III	Physician	18122	Public Reprimand	10/09/2014
Ward, Gregory	Physician	32835	Probation	04/02/2015
Weber, Warren McClure	Physician	26677	Public Reprimand	07/10/2014
Williams, Norris	Physician Asst	1844	Probation	12/22/2014

## Terminations of public orders

Name	Profession	License	Order	Date
Ellis, Daryl Arthur	Physician	38747	Termination	07/10/2014
Fouch, Scott Ashley	Physician Asst	3334	Termination	08/07/2014
Golightly, Daniel Paul Jr	Physician	12470	Termination	12/24/2014
Gordon, Julian Benjamin	Physician	51763	Termination	07/10/2014
Hall, Hugh Wood	Physician	40088	Termination	08/07/2014
Paterson, Spencer Michael	Physician	33669	Termination	07/10/2014
Reed, Jeffrey Scott	Physician	58580	Termination	09/22/2014
Straub, Robert Jordan	Physician	53183	Termination	07/10/2014

## Public fines

Name	Profession	License	Fine	Date
Weber, Warren McClure	Physician	26677	\$5,000.00	07/10/2014

## Revenue collections

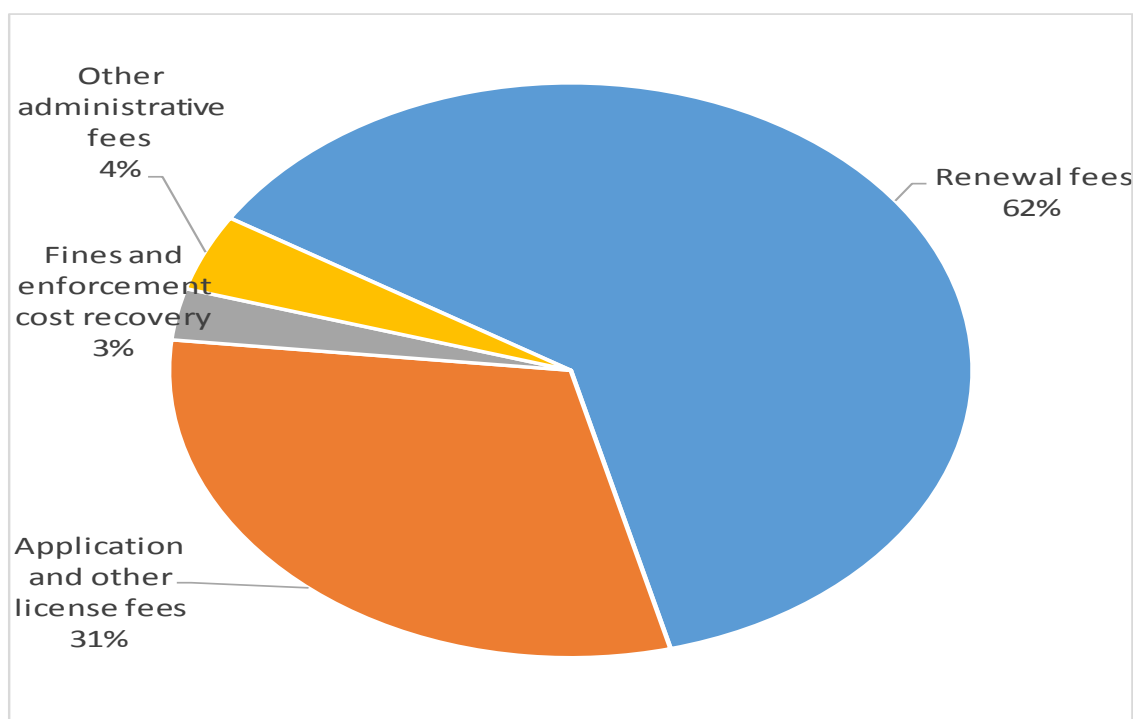
The Georgia Composite Medical Board operates with a budget appropriated by the General Assembly and certain administrative fees. The services that the Board provides to the people of Georgia are delivered in an efficient, cost-effective way.

In FY 2015, the Board's total budget was **\$2,402,124**, appropriated by the General Assembly, with which the Board enhanced the health and safety of Georgia's patients through its licensing and regulatory activities. During the year, the Board collected nearly **three** times that amount in fees, which were turned over to the state's treasury – a return on investment of **165.4** percent.

While application and other license fees appear less than FY 2014, it is likely due to the influx of applications for licensure in FY 2014 during the implementation of the Georgia Pain Management Clinic Act.

### Revenue collected, Fiscal year 2015

Fee category	FY 2015	Pct. change over FY 2014
Renewal fees	\$4,340,040.00	8.16
Application and other license fees	\$2,144,345.00	(2.81)
Fines and enforcement cost recovery	\$202,500.00	55.17
Other administrative fees	\$300,082.49	11.04
<b>Total</b>	<b>\$6,986,967.49</b>	<b>5.55</b>





## What's the deal with the new low THC oil registry?

---

### **Q: What does the new law do?**

**A:** Georgia's new medical marijuana law allows certain qualified persons to legally possess up to 20 fluid ounces of "low THC oil," which is derived from the marijuana plant. It authorizes the Georgia Department of Public Health to issue a "Low THC Oil Registry Card" to qualified persons, which will prove that they are authorized to have the oil and protect them from arrest.

### **Q: Who is eligible for the new "Low THC Oil Registry Card"?**

**A:** There are three categories of persons who may apply for the card:

- (1) an adult who has one or more of the eight diseases specified in the new law, and who has been a resident of Georgia for at least one year;
- (2) legal guardians of an adult who has one of the eight diseases specified in the new law, and who has been a resident of Georgia for at least one year; and
- (3) parents or legal guardians of a minor child who has one or more of the eight diseases specified in the new law, and has been a resident for at least one year or was born in Georgia and is under one year of age.

### **Q: What diseases are covered by the law?**

**A:** The law lists eight diseases which qualify for the Low THC Oil Registry:

- (1) cancer, when the disease has reached end stage, or the treatment produces related wasting illness, recalcitrant nausea and vomiting;
- (2) seizure disorders related to diagnosis of epilepsy or trauma related head injuries;
- (3) severe or end stage amyotrophic lateral sclerosis (also known as ALS, or Lou Gehrig's Disease);
- (4) severe or end stage multiple sclerosis,
- (5) severe or end stage Parkinson's disease;
- (6) severe or end stage sickle cell disease;
- (7) Crohn's disease; and
- (8) mitochondrial disease.

### **Q: How can I help someone obtain a Low THC Registry Card?**

**A:** First, you must have a doctor-patient relationship with someone that you determine to have one of the eight diseases specified in the statute. Next, you will need to fill out a waiver form and certification form and have the patient, parent or legal guardian countersign. Patients or caregivers may bring you partially filled out documents or you may choose to provide them with blank forms. Keep the original waiver form for your files. Finally, you or your staff will enter the information on the certification form into the Georgia Low THC Oil Registry portal. You may choose to retain a hardcopy of the certification form if you wish, but all of the information will be maintained in the online registry and that is considered to be the official record.

For more information, please visit the Low THC Oil Registry website by clicking [here](#).

*Note: The Medical Board cannot provide legal advice to you, so for specific issues, you should consult a qualified attorney.*

## What's new in the PA world?

---

### GOOD NEWS!

The Board has added a new staff member to assist with the increasing workload of the PA application process and are pleased to add Abby Dasilva to the PA team!

Ms. Bell at (404) 647-6495 [kbell2@dch.ga.gov](mailto:kbell2@dch.ga.gov) – for last names beginning A-L

Ms. Dasilva (404) 463-0517 [abeiki.dasilva@dch.ga.gov](mailto:abeiki.dasilva@dch.ga.gov) – for last names beginning M-Z

### REQUEST FOR TEMPORARY LICENSES

The Board will no longer issue temporary licenses on a walk in basis. Please allow 24-hours for processing these types of request.

### URGENT REQUEST FOR TEMPORARY LICENSE

The Board will process an application for a temporary license right away for emergency purposes only (death or unexpected loss of sponsoring physician).

### APPLICATIONS

Application must be received and completed ten (10) days prior to the next Board meeting.

Why is my application incomplete and not going to the Board?

- Failed to get original signatures on the Basic Job Description
- Failed to submit fee for the application
- Failed to submit a new BJD for new supervisor
- Failed to submit alternate physicians for most urgent care, ER and Hospital setting

### ADD/CHANGE APPLICATIONS

When you submit an add change application you must do the following:

\$75 processing fee

Add/Change Application 3 pages (online, mail or fax)

Explanation for any answers checked "YES" with supporting documents

Basic Job Description Forms E or F (mailed only) original signature

### AC1 FORMS (Alternate Physician forms)

As long as you have a signed copy of the Form AC-1, you are good to go. Once the PA, MD and alternate(s) sign the form, they may begin working with alternate(s). The Board receives hundreds of these forms every week. Since the Board does NOT approve alternate physicians, we add the AC-1 Forms to our website as a courtesy. Sometimes the forms may not always be posted. That is why you need to make sure you have a copy of the form(s) in your files.

### BOARD'S WEBSITE

Is there a way to put the separation notice on the Board's website? How do I know if you received my separation? No, separation notices will not go on the website; however, the notice can be emailed, faxed or mailed into our office. It usually takes five to seven business days to process the request. You may go onto website under the PA's license to see if approval letter and job description have been removed.

### CREDENTIALING AGENTS/OFFICE MANAGER

Since so many PAs' application/information is handled by credentialing agents or office managers, please share the information with the person that assists you with your license. NOTE: Ultimately, you are responsible for all phases of your license.

## What you should know before shooting lasers!

---

**I am physician with an active Georgia license. Do I need a laser license?**

No

**Who requires a laser license?**

Anyone who is not a physician with an active Georgia license that provides non-ablative cosmetic laser services. If you are a PA with Board approved additional duties or an APRN with a protocol agreement that includes performing cosmetic laser services AND you ARE NOT supervising an individual that requires an Assistant Laser Practitioner license, you do not need a separate laser license. If you ARE SUPERVISING an individual that requires an Assistant Laser Practitioner license, you need a Senior Laser Practitioner license.

**Which lasers are covered?**

Laser hair removal devices, intense pulsed light devices, and non-ablative light based devices.

**What are the qualifications and requirements for licensure?**

- Assistant Laser Practitioner

Holds a current active license as a PA, LPN, RN, APRN, esthetician, or master cosmetologist; or has previously held a license as a RN, APRN, PA, or physician

Has 3 valid laser training certificates (see #6)

Assistant Laser Practitioners can only treat patients under the supervision of a physician or Senior Laser Practitioner

- Senior Laser Practitioner

Holds a current active license as a RN, APRN, or PA; or has previously held a license as an RN, APRN, PA or physician. The applicant must have three (3) years experience.

Has at least 3 years of clinical or medical technological experience. Clinical rotations in medical, nursing, or PA school would not satisfy this requirement.

Has 2 valid laser training certificates (see #5)

You may not upgrade from an Assistant Laser Practitioner to a Senior Laser Practitioner without a license as a RN, APRN or PA.

**What laser certificates are approved for licensure?**

Certificates should be from courses in the area of cosmetic laser services, equipment safety and operation, procedures, and relative skin modalities, directly taught by a licensed physician or ACCME certified continuing medical education or continuing education educator.

**Do I have to submit an application and pay the fee to obtain the license? Can I apply without the fee and then submit once approved?**

Only complete applications which include all necessary supporting materials and the fee will be considered. Applications received without the fee will not be processed.

**I have a laser license in another state. Is this valid in Georgia?**

No. You will still need to apply for a Georgia license.

**\*\***To access more information including a complete list of FAQs and licensure applications for laser practitioners, you may visit the Board's [website](#).

## Enrollment in PDMP shows promise

In early 2013, the Georgia Drugs and Narcotics Agency, in careful consultation with the Georgia Composite Medical Board and other state agencies, created the Georgia Prescription Drug Monitoring Program which aims to assist in the reduction of the abuse of controlled substances; to improve, enhance, and encourage a better quality of healthcare by promoting the proper use of medications to treat pain and terminal illness; and to reduce duplicative prescribing and overprescribing of controlled substances practices. The data collected is used to enhance patient care by providing prescription drug monitoring information that ensures legitimate use of controlled substances in healthcare, including palliative care, research, and other medical pharmacological uses.

Each time a monitored prescription drug is dispensed, that information must be reported to the PDMP. Dispensers must compile and electronically submit their controlled substance dispensing information to the PDMP at least weekly and no later than ten (10) days after dispensing the prescription; however, dispensers are encouraged to submit more frequently, if they so choose.

As of October 2015, there are **11,958** registrants in the PDMP from various professions in the health care field. If you would like more information about this program, please visit the PDMP [website](#) or call the help desk at 1-855-729-8919.

Profession	Number of Registrants
Nurse Practitioners	604
Dentists	379
Doctors of Osteopathy	350
Medical Doctors	3865
Optometrists	3
Physician Assistants	607
Podiatrists	38
Pharmacists	6112

## Medical professionals: Heal thyself and help your patients!



When was the last time YOU went to the doctor? Are you up to date on your screening exams and immunizations? Do you exercise at least 150 minutes per week? When was the last time you took a vacation? The American Medical Association states that recent studies show that physicians who practice healthy behaviors are more likely to encourage healthy behaviors in their patients. The same preventive measures that you counsel your patients about: 1) get active, 2) control cholesterol, 3) eat better, 4) manage blood pressure, 5) lose weight, 6) reduce blood sugar, and 7) stop smoking... Guess what??? They apply to you too!

Keisha R. Callins, MD, MPH  
Board member

## What is Georgia PHP?

---

The Georgia Professionals Health Program (Georgia PHP, Inc.) is a nonprofit organization formed in 2012 to provide professional health program (PHP) services to all licensees of the Georgia Composite Medical Board (GCMB). We care for the Board's licensees when they develop a potentially impairing condition or disease. Our primary expertise is working with those who develop substance abuse and other addictive disorders, but we do follow some other psychological and psychiatric conditions. We are not a treatment organization, per se. Instead, we provide the initial triage, referral into treatment, treatment quality monitoring, and long-term care for addiction disorders and related problems.

In 2010, the Georgia legislature passed an amendment to the Official Georgia Code that authorizes a program to work with the Georgia Medical Board. In 2012, the Georgia Professionals Health Program became the independent organization that facilitates proper care for physicians, physician assistants and respiratory therapists who practice in our state. Our services are confidential in the vast majority of cases. We are not a licensing or sanctioning body. Our mission is helping Georgia's healthcare providers to remain healthy and in doing so, to improve the health of all citizens of our state. At present, we do not obtain funding from state government or agencies. The majority of our funding comes from the participant fees of those actively enrolled in our monitoring program. As a 501c3 nonprofit organization, we accept charitable contributions from individuals and organizations who wish to improve the quality and safety of Georgia's healthcare delivery systems.

Our mission at the Georgia PHP, Inc. is to improve patient care and safety in Georgia through early detection, referral to treatment and compliance monitoring of potentially impairing conditions in healthcare professionals. We believe healthy providers provide the best healthcare. We are growing rapidly as hospitals, healthcare organizations, medical practices and Georgia's licensees are recognizing that quality care and confidential disease management improves health, rebuilds families and increases the wellness within our provider population in Georgia.

For more information about this organization, please visit their website by clicking [here](#).

*Special to the GCMB newsletter from Paul Earley, MD*

## E-communication may compromise patient health

---

It has come to the attention of the Board that, with the advent of e-communication, there has been an increase in avoidable errors reported. Many errors are now occurring when patients are transferred between departments and institutions. A prime example of this is when a patient is transferred from the ER and admitted to an in-patient bed. Direct communication between ER staff and the hospital staff is essential to ensure that the plan of care has been communicated and understood by the staff receiving the admission. It is strongly recommended that this direct communication be done through person-to-person contact, preferably telephonic, so that questions can be asked and both parties can ensure all critical pieces of information are passed along. Unfortunately, emails and text messages are not always received and read in a timely manner. It is hoped that a return to person-to-person communication will improve patient care and possibly avoid delays and errors.

-Carl Bedingfield, MD, Assistant Medical Director

## Proper patient record-keeping is key to a clean license record, even after retiring from or leaving a practice

---

### Abandoned Medical Records

The Board receives calls each week from patients and their families looking for medical records. You can be sanctioned for unprofessional conduct to fail to maintain a patient's records for at least ten years from the patient's last visit.

In many cases, the physicians have become ill, have died, or have simply moved their practices. In the event of a serious illness or other reason that keeps you from practicing, please make sure that you have made arrangements with your family, business partners, agents, or executors.

### What should I do with my records if I retire or sell my practice?

The 10-year requirement does not apply to you if you are a physician who has retired from or sold your medical practice, and you have notified your patients of your retirement or sale of practice:

1. By mail, to the last known address of your patients;
2. By public notice in the newspaper of greatest circu-

lation in each county in which you practice or practiced, and in a local newspaper that serves the immediate practice area; and

3. By placing a sign, in a conspicuous location in or on the façade of your office, announcing your retirement or sale of the practice at least 30 days prior to the retirement or sale. The sign must remain posted until the date of the retirement or sale, and must advise patients of their opportunity to transfer or receive their records. Each notification method must offer to provide the patient's records (or copies) to another provider of the patient's choice, and, if the patient requests it, to the patient.

### Consult with your own legal counsel for specific issues

The periods specified in Rule 360-3-.02 may be less than the length of time necessary for you to protect yourself against other adverse actions, and pediatric and psychiatric records may have other stipulations. You should consult your own legal counsel or malpractice insurer for advice applicable to your particular circumstances. To read Rule 360-3-.02 in its entirety, click [here](#).

## Diligent documentation: Exercising EHR etiquette

---



It has always been said that if you don't document, then it didn't happen. This is adage is still true and can have significant legal consequences. However, with the advent of electronic health records (EHRs), we are beginning to see the opposite – documentation of things that did NOT happen. EHRs were designed to improve medical documentation and thus improve patient care, coordination of care, cost effectiveness, and patient outcomes. As you complete your EHRs, it is easy to select the default options to document your patient's review of systems, physical exam, and even office procedures. Please take time to modify your template to reflect what you actually did.

Keisha R. Callins, MD, MPH  
Board member



## What constitutes unprofessional conduct?

O.C.G.A. §§43-34-8 and 43-1-19 authorize the Board to take disciplinary action against licensees for unprofessional conduct. "Unprofessional conduct" shall include, but not be limited to, the following:

- Prescribing controlled substances for a known or suspected habitual drug abuser or other substance abuser in the absence of substantial justification.
- Writing prescriptions for controlled substances for personal use or, except for documented emergencies, for immediate family members. For purposes of this rule, "immediate family members" include spouses, children, siblings, and parents.
- Failing to maintain appropriate patient records whenever Schedule II, III, IV or V controlled substances are prescribed. Appropriate records, at a minimum, shall contain the following:
  - The patient's name and address;
  - The date, drug name, drug quantity, and patient's diagnosis necessitating the Schedule II, III, IV, or V controlled substances prescription; and
  - Records concerning the patient's history.
- Committing any act of sexual intimacy, abuse, misconduct, or exploitation of any individual related to the physician's practice of medicine regardless of consent. The rule shall apply to former patients where the licensee did not terminate in writing the physician patient relationship before engaging in a romantic or sexual relationship with the patient and/or where the licensee used or exploited the trust, knowledge, emotions or influence derived from the prior professional relationship. The Board will consider the physician patient relationship terminated if the physician has not evaluated or treated the patient for a period of at least two (2) years.
- Conducting a physical examination of the breast and/or genitalia of a patient of the opposite sex without a chaperone present.
- Continuing to practice after the expiration date of the license.
- Providing a false, deceptive or misleading statement(s) as a medical expert.
- Failing to report to the Board within 30 days of becoming unable to practice medicine with reasonable skill and safety by result of illness or use of alcohol, drugs, narcotics, chemicals, or any other type of material, or as a result of any mental or physical condition, unless the physician has reported to the Physician Health Program.
- (For a physician) Delegating the injection of botulinum toxin and/or dermal fillers to medical assistants.

See the complete list on the Board's website by clicking [here](#).

*The Medical Board cannot provide legal advice to you, so for specific issues, you should consult a qualified attorney.*





## Don't know your user ID or password? Follow these tips.

### Your user ID is an email address.

Your GCMB user ID should be a valid email address. That's because if you ever forget your password and request a new one, the system will send you a new temporary password to your user ID (email address). So try to think of the email address you may have used the last time you accessed our online services.

### You can reset your password online.

If you know your user ID, you can probably reset your password yourself. Go to the login page, and instead of trying to log in, just click the link below the password field. Then, you'll be asked to type your user ID.

Once you enter your user ID and click "Next," you'll be asked to provide the correct answer to the security question you set up.

**What is your mothers maiden name?**

After you provide the correct answer to the security question, the system will reset your password to a temporary password and email that to the email address you used as your user ID. The email message will contain a temporary password you can use to log in.

### If you can't see your license number after you log in successfully, call the Board.

If you logged in successfully, but don't see your license number, you may have logged in as a new user, rather than trying to use your existing user ID and password. This means you created an account as a user who has never before been known to the Board. If you encounter this issue, or cannot log in or reset your password after trying to follow the preceding steps, call the Board at 404-463-8900 or 404-656-3913 for assistance in resetting your account.

### Note for renewing licensees

After you've paid your renewal fee online, click the License Menu button at the top of the screen. If your expiration date has been updated, you're done. If your expiration date hasn't changed, click the Main Menu link and then click "Pending Application Status Inquiry" for instructions.

#### License Menu

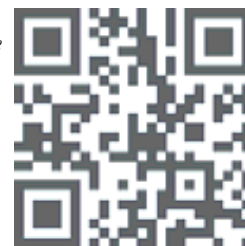
**Trying to renew your license, but do not see a renewal link?** If you do not see a renewal link, check your expiration date. If your license expires more than 60 days from now, it is too early to renew. If it expired more than **90 days ago**, it is too late to renew.

**Already submitted your renewal and payment, but your expiration date is still the same?** Go to the **MAIN MENU** and click "Pending Application Status Inquiry."

Select the function you wish to perform.  
Press "Back" to return to the main menu.

License Status: **Active**  
Expires On: **07/31/2013**  
(mm/dd/yyyy)

*To log in now, click or scan this code with your smartphone or tablet:*



### Updating your contact information can save you time, and thousands of dollars in fees, income, and fines

Approximately 45 to 60 days before your license expires, the Board emails a courtesy reminder to the address you use as your licensee user ID. Each month, many of these notices are returned because the licensee's address has changed.

Almost 7 percent of lapsed licenses are subsequently reinstated. Renewing a physician license costs \$230 for two years and typically takes less than 15 minutes to complete. Reinstating a physician license is a much more costly undertaking, both in time and money, with application fees ranging from \$500 to \$2,000 and often taking two months or more to complete. Add the cost of a fine and reprimand if the licensee practices medicine without a license, as well as lost income from being unable to practice until the license is finally reinstated, and the cost for inadvertently allowing a license to lapse could be \$20,000 or more.

You can view and update your license online any time, and if you are not online, you can fax your update to 404-656-9723. The few minutes you spend keeping the Board updated could save you thousands of dollars down the road.



## Board issues call for advisory committee nominations

---

The **Acupuncture Advisory Committee** has vacancies for acupuncture members. Qualified candidates must be licensed in good standing to practice acupuncture in Georgia, and must provide the Committee with a resume and three reference letters. The Committee typically meets once a month. Please forward your nomination and candidate materials to Carol Dorsey at [cdorsey@dch.ga.gov](mailto:cdorsey@dch.ga.gov).

The **Orthotics & Prosthetics Advisory Committee** has vacancies for orthotist and prosthetist members. Qualified candidates must be licensed in good standing to practice orthotics and/or prosthetics in Georgia, and must provide the Committee with a resume and three reference letters. The Committee typically meets once a month. Please forward your nomination and candidate materials to Carol Dorsey at [cdorsey@dch.ga.gov](mailto:cdorsey@dch.ga.gov).

The **Perfusion Advisory Committee** has vacancies for clinical perfusionist members. Qualified candidates must be licensed to practice clinical perfusion in Georgia, and must provide the Committee with a resume and three reference letters. The Committee typically meets once a month. Please forward your nomination and candidate materials to Carol Dorsey at [cdorsey@dch.ga.gov](mailto:cdorsey@dch.ga.gov).

## Have you updated your profile lately?

---

Updating the physician profile is one of the most important things a physician can do when renewing the license. Not only is this information useful for the Board, but it also serves as a helpful tool for patients seeking more information about their health care providers.

For more information regarding the dos and don'ts of physician profiles, please reference the Board's rules concerning profiles by clicking [here](#).

## APRN protocol reviews

---

The Board is required by O.C.G.A. § 43-34-25 to review APRN protocols that include prescriptive authority. If your protocol with an APRN does not delegate your authority to write and sign prescriptions, order tests, and/or order medical devices, you are not required to send the protocol the Board. In that case, however, you and the APRN must still enter into an agreement to comply with O.C.G.A. § 43-34-23, and you must keep a copy of that agreement onsite at each practice location where the APRN practices pursuant to the agreement.

Protocols that include prescriptive authority must be submitted to the Board before being submitted to the DEA. The DEA will not issue a license to an APRN until the Board has approved the protocol.

In May, the board revised the Form C to where APRNs are no longer required to list the 20 most common drugs the APRN would be prescribing. The previous Form C has always required a listing of medical procedures that are outside the APRN's scope of practice, along with appropriate training documentation and confirmation of competency from the delegating physician. Often the APRN would include nursing procedures or procedures within their scope on the previous Form C. These items do not need to be listed, as the form was changed to clarify what is and has always been required. The Georgia Composite Medical Board developed the new Form C in careful consultation with the board's APRN Committee, which includes three practicing physicians and two APRNs. This form change was done in response to many APRNs not completing the forms correctly for their first submission and in the interest of streamlining part of the application process. In addition to the Form C, documentation of competency for any procedures outside the scope of practice is still required. All APRN forms can be found on the board's [website](#).

The board remains committed to ensuring that all parts of the application process comply with the Medical Practice Act and that nurse protocol agreements under O.C.G.A. § 43-34-25 are crafted with patient safety as a top priority.

## Medical assistants: What can they legally do?

---

The Board frequently receives questions on what duties a medical assistant can or cannot perform in a clinical setting.

Most medical assistants perform administrative and limited clinical work under the direct supervision of a physician, typically in a doctor's office or hospital. Medical assistants are allowed to perform any of the following medical procedures delegated to them by the physician: subcutaneous and intramuscular injections; obtaining vital signs; administering nebulizer treatments; removing sutures and changing dressings.

If you have questions about medical assistants, then please consult O.C.G.A. § 43-34-44 on our [website](#).

## Frequently asked questions about rules and laws

---

Every month, the Board reviews complaints against licensees that arise from a misunderstanding of the governing rules or laws, or a complete ignorance of them. Do you know the rules and laws that you must follow to ensure that your license is kept in good standing?

**Q: Is the placement of micro-dermal implants considered the practice of medicine?**

**A:** The Board considers any alteration of the skin to be a surgical procedure, and therefore the practice of medicine.

**Q: Can I recruit a physician from another state to visit my practice and perform a demonstration on a patient?**

**A:** The visiting physician must obtain a educational training certificate from the Board prior to performing any medical procedure. Requirements for such certification can be found on the Board's [website](#).

**Q: If I change my legal name, may I continue to practice under my “professional name” (old name)?**

**A:** You must use your legal name on your Georgia license. If you are getting married or divorced, you should consider any implications on your “professional name” as you make your decision on a name change.

**Q: At what point is it permissible for me to date a former patient?**

**A:** You should be extremely careful in any situation that could be construed as a boundary violation. Remember that no matter how difficult it may be to maintain appropriate boundaries with a patient, it is **always** the professional's responsibility to maintain those boundaries. You should refer difficult or boundary-testing patients for competent help or counsel. This applies even to former patients, if you did not terminate the physician/patient relationship in writing.

**Q: Can I contract with online coupon or “deal-finder” services to market my medical services?**

**A:** You should be careful to make sure you are not in violation of O.C.G.A. 43-34-8 (a)(9). The law specifically forbids you from dividing fees or agreeing to divide fees received for professional services with any person, firm, association, corporation, or other entity for bringing or referring a patient. As the AMA says in AMA Opinion 6.02, payment by or to a physician solely for the referral of a patient is fee-splitting, and is unethical.

**Q: Can I send labs to other states for interpretation?**

**A:** Labs may be sent to other states for further analysis.

For the entire list of the Board's rules and a copy of the *Medical Practice Act*, please visit the Board's website by clicking [here](#).

*The Medical Board cannot provide legal advice to you, so for specific issues, you should consult a qualified attorney.*



## 2016 Board meetings

January 7	July 7
February 4	August 4
March 3	September 1
April 7	October 6
May 5	November 3
June 9	December 1

All meetings will be at the Board's office in Atlanta unless otherwise noted.

2 Peachtree Street NW  
36th floor  
Atlanta, Georgia 30303

\*Please note: Dates and locations are subject to changes. Updated meeting information and minutes from previous meetings are posted on the Board's [website](#).

In an effort to keep the medical community and the general public informed of its meetings, the Board publishes all meeting dates and agendas as required by Georgia state law. All Board meetings are open to the general public, the press and anyone interested in the activities of the Georgia Composite Medical Board, in compliance with the *Open Meetings Act*.

Agendas will be available no less than 1 week prior to the scheduled Board meeting and can be downloaded by clicking on the meeting date.

Official legal notices for all meetings of the Georgia Composite Medical Board are posted through the Department of Community Health and published in the Fulton County Daily Report.

## 2016 State holidays

The Board office will be closed in observance of the following holidays.

### Friday, January 1

New Year's Day

### Monday, January 18

Martin Luther King Jr.'s birthday

### Monday, April 25

State holiday (observed)

### Monday, May 30

Memorial Day

### Monday, July 4

Independence Day

### Monday, September 5

Labor Day

### Monday, October 10

Columbus Day

### Friday, November 11

Veterans Day

### Thursday, November 24

Thanksgiving Day

### Friday, November 25

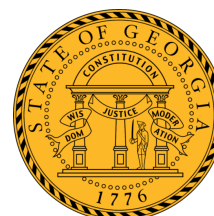
State holiday (observed)

### Monday, December 26

Christmas (observed)

### Tuesday, December 27

Washington's Birthday (observed)



## Contact Information for GCMB Services

---

### Licensure Applications

#### Licensure Unit Manager, Residency Training Permits, Random Audits

**Carol Dorsey**  
404-651-7854; [cdorsey@dch.ga.gov](mailto:cdorsey@dch.ga.gov)

#### Physician (initial licensure only)

**Katonya Reynolds** (last names A-G)  
404-463-6162; [kreynolds@dch.ga.gov](mailto:kreynolds@dch.ga.gov)

**Candis Dickerson** (last names H-O)  
404-657-6491; [cdickerson@dch.ga.gov](mailto:cdickerson@dch.ga.gov)

**Deborah Bruce** (last names P-Z)  
404-656-7067; [dbruce@dch.ga.gov](mailto:dbruce@dch.ga.gov)

#### Physician Assistant

**Kahlilah Bell** (last names A-L)  
404-657-6495; [kbell2@dch.ga.gov](mailto:kbell2@dch.ga.gov)

**Abby Dasilva** (last names M-Z)  
404-463-0517; [abeiki.dasilva@dch.ga.gov](mailto:abeiki.dasilva@dch.ga.gov)

#### Respiratory Care Professional, Orthotist & Prosthetist, Cosmetic Laser Services Practitioner

**Rhonda Thomas**  
404-463-2292; [rthomas3@dch.ga.gov](mailto:rthomas3@dch.ga.gov)

#### Auricular Detoxification Technician, Acupuncturist, Perfusionist, Vaccine Protocol Review

**Jeanette Carter**  
404-463-1015; [jecarter@dch.ga.gov](mailto:jecarter@dch.ga.gov)

#### APRN Protocol Review

**Kia Hargrove**  
404-463-5038; [khargrove@dch.ga.gov](mailto:khargrove@dch.ga.gov)

#### Renewals, Citizenship

**Micahlen Hughes**  
404-473-5013; [mhughes@dch.ga.gov](mailto:mhughes@dch.ga.gov)

#### Renewals, Citizenship, Credit Card and Website Issues

**Tommy Kelly**  
404-463-8900; [tkelly@dch.ga.gov](mailto:tkelly@dch.ga.gov)

### Ordering Verification of Georgia Licensure

Physician: [www.veridoc.org](http://www.veridoc.org)

All other GCMB professions:

**Jeanette Carter**  
404-463-1015; [jecarter@dch.ga.gov](mailto:jecarter@dch.ga.gov)

### Enforcement, Compliance, and Other Services

#### Director of Investigations

**Karl Reimers**  
404-463-0635; [kreimers@dch.ga.gov](mailto:kreimers@dch.ga.gov)

#### Filing Complaints, Malpractice Reports, and Other Enforcement Reports, Obtaining Certified Copies of Public Orders

**Pat Sherman, Enforcement Unit Supervisor**  
404-657-6487; [patricia.sherman@dch.ga.gov](mailto:patricia.sherman@dch.ga.gov)

**Sharon Cloud**  
404-657-6494; [scloud@dch.ga.gov](mailto:scloud@dch.ga.gov)

**Reggie Hawthorne**  
404-463-8903; [reginald.hawthorne@dch.ga.gov](mailto:reginald.hawthorne@dch.ga.gov)

#### Consent Order Compliance Issues, Open Records Requests

**Betsy Cohen, Esq.**  
404-657-3194; [bcohen@dch.ga.gov](mailto:bcohen@dch.ga.gov)

#### Customer Service Issues

**Robert Jeffery, MBA**  
404-657-6492; [rjeffery@dch.ga.gov](mailto:rjeffery@dch.ga.gov)

#### Special Projects

**Jennifer Bass, MS**  
404-807-0811; [jbass@dch.ga.gov](mailto:jbass@dch.ga.gov)

#### Media and Government Relations

**Daniel Dorsey**  
404-657-6488; [ddorsey1@dch.ga.gov](mailto:ddorsey1@dch.ga.gov)

#### Ordering License Cards and Certificates, Ordering a Database of Licensees

**Deionna Harris**  
404-656-3913; [dharris6@dch.ga.gov](mailto:dharris6@dch.ga.gov)



## Georgia Composite Medical Board

2 Peachtree Street NW  
36th Floor  
Atlanta, Georgia 30303

Phone: 404-656-3913

Fax: 404-656-9723

email: [medbd@dch.ga.gov](mailto:medbd@dch.ga.gov)

### Connect with us!

The Georgia Medical Board is  
online! Go to



[www.medicalboard.georgia.gov](http://www.medicalboard.georgia.gov)

### Active Licenses on November 16, 2015:

Physician*	34,432
Residency Training Permit	2,012
Physician Assistant	4,405
Respiratory Care Professional	5,244
Acupuncturist	250
Auricular Detoxification Specialist	1
Clinical Perfusionist	157
Orthotist & Prosthetist**	218
Pain Management Clinic	203
Cosmetic Laser Practitioner***	639

---

**Total, all license types 47,561**

\* Includes Provisional, Institutional, and Volunteer in Medicine Physicians

\*\* Includes professionals who are Orthotists, Prosthetists, and those who hold a dual license for O&P

\*\*\* Includes Senior & Assistant Laser Practitioners

## Georgia Composite Medical Board Management Staff

**LaSharn Hughes, MBA**, Executive Director  
**Robert Jeffery, MBA**, Director of Operations  
**Jennifer Bass, MS**, Director of Special Projects  
**Carol Dorsey**, Licensure Unit Manager  
**Diane Atkinson**, Board Secretary  
**Phyllis White**, Operations Analyst

**Edwin Slappey, MD**, Medical Director  
**Carl Bedingfield, MD**, Assistant Medical Director  
**Karl Reimers**, Director of Investigations  
**Betsy Cohen, JD**, Legal Services Officer  
**Pat Sherman**, Enforcement Unit Supervisor  
**Daniel Dorsey**, Media and Legislative Liaison