**Executive Director** Daniel R. Dorsey, MBA



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January 25, 2024

Sena Able 5665 Peachtree Dunwoody Rd NE Atlanta, GA 30342 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66227

Lucia Alvarez 5665 Peachtree Dunwoody Rd NE Atlanta, GA 30342

Dear Nurse, Able:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66227**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Lucia Alvarez
5665 Peachtree Dunwoody Rd NE
Atlanta, GA 30342

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66186

Carter Adams 2501 N Patterson St Valdosta, GA 31602

**DELEGATING PHYSICIAN:**Brian Pisula
2501 N Patterson St

Valdosta, GA 31602

Dear Nurse, Adams:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66186**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Brian Pisula 2501 N Patterson St Valdosta, GA 31602

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Rholonda Adams 6470 East Jihns Crossing Johns Creek, GA 30097 PROTOCOL NUMBER: 66189

DELEGATING PHYSICIAN:

Thomas Oden 6470 East Jihns Crossing Johns Creek, GA 30097

Dear Nurse, Adams:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66189**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Thomas Oden 6470 East Jihns Crossing Johns Creek, GA 30097

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

India Adkins 106 East Broad St Savannah, GA 31401 PROTOCOL NUMBER: 66247

DELEGATING PHYSICIAN:

Fariborz Zaer 106 East Broad St Savannah, GA 31401

Dear Nurse, Adkins:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66247**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Fariborz Zaer 106 East Broad St Savannah, GA 31401

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Sandra Agoreyo 601 S Eighth St

Griffin, GA 30224

PROTOCOL NUMBER: 66332

**DELEGATING PHYSICIAN:** 

Swetang Desai 601 S Eighth St Griffin, GA 30224

Dear Nurse, Agoreyo:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66332**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Swetang Desai 601 S Eiqhth St Griffin, GA 30224

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66190

Shiyanbola Ajao 1800 Phoenix Blvd Atlanta, GA 30349 **DELEGATING PHYSICIAN:** Eastlyn Haroing-Marin 1800 Phoenix Blvd Atlanta, GA 30349

Dear Nurse, Ajao:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66190**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Eastlyn Haroing-Marin 1800 Phoenix Blvd Atlanta, GA 30349

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66260

**DELEGATING PHYSICIAN:** 

Abimbola Aluko 2201 Derbyshire Dr Marietta, GA 30064

Hassan Bokhari 2201 Derbyshire Dr Marietta, GA 30064

Dear Nurse, Aluko:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66260**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Hassan Bokhari 2201 Derbyshire Dr Marietta, GA 30064

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Jessica Anderson 725 Jesse Jewell Pkwy SE Gainsville, GA 30501 PROTOCOL NUMBER: **66352** 

**DELEGATING PHYSICIAN:** Katherine Herzog 725 Jesse Jewell Pkwy SE Gainsville, GA 30501

Dear Nurse, Anderson:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66352**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Katherine Herzog 725 Jesse Jewell Pkwy SE Gainsville, GA 30501

**Executive Director** Daniel R. Dorsey, MBA



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January 25, 2024

Kristy Badell 1100 Johnson Ferry Rd Ste. 800 Atlanta, GA 30342 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66309

Claire Parker 1100 Johnson Ferry Rd Ste. 800 Atlanta, GA 30342

Dear Nurse, Badell:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66309**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Claire Parker

1100 Johnson Ferry Rd Ste. 800

Atlanta, GA 30342

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Anaya Baeza 1001 Johnson Ferry Rd Atlanta, GA 30342 PROTOCOL NUMBER: **66321** 

**DELEGATING PHYSICIAN:** Louis Casal

1001 Johnson Ferry Rd Atlanta, GA 30342

Dear Nurse, Baeza:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66321**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Louis Casal

1001 Johnson Ferry Rd Atlanta, GA 30342

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jackie Bassong 8 Perimeter Center E Apt. 1414 Atlanta, GA 30045 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66334

Ann Drayton 8 Perimeter Center E Apt. 1414 Atlanta, GA 30045

Dear Nurse, Bassong:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66334**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Ann Drayton 8 Perimeter Center E Apt. 1414 Atlanta, GA 30045

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Amanda Battles 108 Prominence Ct Ste. 200 Dawsonville, GA 30534 PROTOCOL NUMBER: 66351

DELEGATING PHYSICIAN:

George Petro

108 Prominence Ct Ste. 200 Dawsonville, GA 30534

Dear Nurse, Battles:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66351**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

George Petro 108 Prominence Ct Ste. 200 Dawsonville, GA 30534

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Dionna Best 12195 Highway 92 STE. 144 Woodstock, GA 30188 PROTOCOL NUMBER: 66187

DELEGATING PHYSICIAN:

Christopher Greene 12195 Highway 92 STE. 144 Woodstock, GA 30188

Dear Nurse, Best:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66187**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Christopher Greene
12195 Highway 92 STE. 144
Woodstock, GA 30188

**Executive Director** Daniel R. Dorsey, MBA



Chairperson William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66224

Corrin Betsill 130 N Lee St Forsyth, GA 31029

**DELEGATING PHYSICIAN:** Herschel Kessier

130 N Lee St Forsyth, GA 31029

Dear Nurse, Betsill:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is 66224.

You are now eligible to apply for a DEA number. You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the termination of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

Daniel R. Dorsey **Executive Director** 

cc: file

Herschel Kessier 130 N Lee St Forsyth, GA 31029

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Ashley Black 17 S Public Square Ste. B Cartersville, GA 30120 PROTOCOL NUMBER: **66325** 

**DELEGATING PHYSICIAN:** Heather Svenson 17 S Public Square Ste. B Cartersville, GA 30120

Dear Nurse, Black:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66325**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Heather Svenson
17 S Public Square Ste. B
Cartersville, GA 30120

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Kelli Boatright 2015 Alice Srt Waycross, GA 31501 PROTOCOL NUMBER: **66350** 

**DELEGATING PHYSICIAN:** Aristotle Cochon 2015 Alice Srt

Waycross, GA 31501

Dear Nurse, Boatright:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66350**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Aristotle Cochon 2015 Alice Srt Waycross, GA 31501

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66346** 

Endia Boyd 850 Pavilion Pkwy Monroe, GA 30565 **DELEGATING PHYSICIAN:** Hawwa Frazier 850 Pavilion Pkwy

Monroe, GA 30565

Dear Nurse, Boyd:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66346**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Hawwa Frazier 850 Pavilion Pkwy Monroe, GA 30565

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Lori Brady 7 John Maddox Dr NW Rome, GA 30165 PROTOCOL NUMBER: 66228

DELEGATING PHYSICIAN:

Gregory Tanner 7 John Maddox Dr NW Rome, GA 30165

Dear Nurse, Brady:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66228**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Gregory Tanner
7 John Maddox Dr NW
Rome, GA 30165

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66359

Crystal Branch 1200 Memorial Dr Dalton, GA 30720 DELEGATING PHYSICIAN: Jeffrey Atherton 1200 Memorial Dr Dalton, GA 30720

Dear Nurse, Branch:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66359**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Jeffrey Atherton 1200 Memorial Dr Dalton, GA 30720

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66208

Andrew Bridges 1120 15th Street Augusta, GA 30912 DELEGATING PHYSICIAN: Peter Johnson 1120 15th Street Augusta, GA 30912

Dear Nurse, Bridges:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66208**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Peter Johnson 1120 15th Street Augusta, GA 30912

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66364

**DELEGATING PHYSICIAN:** 

Benita Brown 157 Forsyth St. SW Atlanta, GA 30303

Tomie Richardson 157 Forsyth St. SW Atlanta, GA 30303

Dear Nurse, Brown:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66364**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Tomie Richardson 157 Forsyth St. SW Atlanta, GA 30303

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66199** 

Cassie Bugay 800 1st St Ste. 410 Macon, GA 31201 DELEGATING PHYSICIAN: Marcus Weldon 800 1st St Ste. 410 Macon, GA 31201

Dear Nurse, Bugay:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66199**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Marcus Weldon 800 1st St Ste. 410 Macon, GA 31201

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66203** 

Cassie Bugay 800 1st St Ste. 410 Macon, GA 31201 DELEGATING PHYSICIAN: Marcus Weldon 800 1st St Ste. 410 Macon, GA 31201

Dear Nurse, Bugay:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66203**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Marcus Weldon 800 1st St Ste. 410 Macon, GA 31201

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jennifer Butler 725 Jesse Jewell Pkwy SE Gainsville, GA 30501 PROTOCOL NUMBER: 66340

DELEGATING PHYSICIAN:

Devi Sampat

725 Jesse Jewell Pkwy SE Gainsville, GA 30501

Dear Nurse, Butler:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66340**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file
Devi Sampat
725 Jesse Jewell Pkwy SE

Gainsville, GA 30501

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Nicole Camp 810 Sanders Rd Ste F Cumming, GA 30041 PROTOCOL NUMBER: 66229

DELEGATING PHYSICIAN:

Moyra Betuzzi-Teas 810 Sanders Rd Ste F Cumming, GA 30041

Dear Nurse, Camp:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66229**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Moyra Betuzzi-Teas 810 Sanders Rd Ste F Cumming, GA 30041

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66250

Christina Carsello 3651 Wheeler Rd Augusta, GA 30909

**DELEGATING PHYSICIAN:** Muhammad Ismail 3651 Wheeler Rd Augusta, GA 30909

Dear Nurse, Carsello:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66250**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Muhammad Ismail 3651 Wheeler Rd Augusta, GA 30909

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Rena Castlin 398 US 11 SW Monroe, GA 30655 PROTOCOL NUMBER: **66253** 

**DELEGATING PHYSICIAN:** 

Kamal Patel 398 US 11 SW Monroe, GA 30655

Dear Nurse, Castlin:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66253**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Kamal Patel 398 US 11 SW Monroe, GA 30655

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**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66326

DELEGATING PHYSICIAN:

Fady Henein 1007 Mary St aycross, GA 31503

Amy Chaffin 1007 Mary St aycross, GA 31503

Dear Nurse, Chaffin:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66326**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Fady Henein 1007 Mary St aycross, GA 31503

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jenny Childs 459 Highway 119 S Springfield, GA 31329 PROTOCOL NUMBER: 66230

DELEGATING PHYSICIAN:

Kendall Griffith 459 Highway 119 S Springfield, GA 31329

Dear Nurse, Childs:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66230**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file Kendall Griffith

> 459 Highway 119 S Springfield, GA 31329

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Chelsea Clevenger

.00

3755 Sixes Rd Ste 300 Canton, GA 30114 PROTOCOL NUMBER: **66347** 

**DELEGATING PHYSICIAN:** Nasir Asghar

3755 Sixes Rd Ste 300 Canton, GA 30114

Dear Nurse, Clevenger:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66347**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Nasir Asghar 3755 Sixes Rd Ste 300 Canton, GA 30114

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Amanda Close 301 Medical Dr Ste 504 Lagrange, GA 30240 PROTOCOL NUMBER: **66150** 

**DELEGATING PHYSICIAN:** 

Kalyani Rajeev 301 Medical Dr Ste 504 Lagrange, GA 30240

Dear Nurse, Close:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66150**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Kalyani Rajeev 301 Medical Dr Ste 504 Lagrange, GA 30240

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Megan Cole 242 King Ave Ste. 120 Athens, GA 30606 PROTOCOL NUMBER: **66345** 

**DELEGATING PHYSICIAN:** Elizabeth Garcia-Cardenas 242 King Ave Ste. 120 Athens, GA 30606

Dear Nurse, Cole:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66345**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Elizabeth Garcia-Cardenas 242 King Ave Ste. 120 Athens, GA 30606

**Executive Director** Daniel R. Dorsey, MBA



Chairperson William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66225

Jennifer Collins 130 N. Lee Street Forsyth, GA 31029

**DELEGATING PHYSICIAN:** Herschel Kessler 130 N. Lee Street Forsyth, GA 31029

Dear Nurse, Collins:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is 66225.

You are now eligible to apply for a DEA number. You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the termination of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

Daniel R. Dorsey **Executive Director** 

cc: file

Herschel Kessler 130 N. Lee Street Forsyth, GA 31029

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Leonardo Cordero 4850 Sugarloaf Pkwy Lawrenceville, GA 30044 PROTOCOL NUMBER: 66254

**DELEGATING PHYSICIAN:** 

Shruti Patel 4850 Sugarloaf Pkwy Lawrenceville, GA 30044

Dear Nurse, Cordero:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66254**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Shruti Patel
4850 Sugarloaf Pkwy
Lawrenceville, GA 30044

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jenna Cottrell 586 Brannen St Statesboro, GA 30458 PROTOCOL NUMBER: 66323

**DELEGATING PHYSICIAN:** Catherine Dickens 586 Brannen St Statesboro, GA 30458

Dear Nurse, Cottrell:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66323**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Catherine Dickens 586 Brannen St Statesboro, GA 30458

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Christine Covaci 720 Old Snellville Hwy Lawrenceville, GA 30044 PROTOCOL NUMBER: 66257

DELEGATING PHYSICIAN:

Cornell Peters 720 Old Snellville Hwy Lawrenceville, GA 30044

Dear Nurse, Covaci:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66257**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Cornell Peters
720 Old Snellville Hwy
Lawrenceville, GA 30044

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Lisa Crandall 1230 Blad Ridge Marina Rd Ste 400 Cumming, GA 30041 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66266

Sheba Naqvi 1230 Blad Ridge Marina Rd Ste 400 Cumming, GA 30041

Dear Nurse, Crandall:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66266**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Sheba Naqvi 1230 Blad Ridge Marina Rd Ste 400 Cumming, GA 30041

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Lindsi Creel 4880 Lower Roswell Rd Ste. 20 Marietta, GA 30068 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66258

John Turrentine 4880 Lower Roswell Rd Ste. 20 Marietta, GA 30068

Dear Nurse, Creel:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66258**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
John Turrentine

4880 Lower Roswell Rd Ste. 20

Marietta, GA 30068

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCC

PROTOCOL NUMBER: 66320

Thomas Crutchfield 931 E. Winthrope Ave. Millen, GA 30442

**DELEGATING PHYSICIAN:** 

James Cox 931 E. Winthrope Ave. Millen, GA 30442

Dear Nurse, Crutchfield:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66320**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
James Cox
931 E. Winthrope Ave.
Millen, GA 30442

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jason Cucchiara 304 Turner McCall Blvd Rome, GA 30165 PROTOCOL NUMBER: 66198

DELEGATING PHYSICIAN:

Catherine Maetin 304 Turner McCall Blvd Rome, GA 30165

Dear Nurse, Cucchiara:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66198**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Catherine Maetin 304 Turner McCall Blvd Rome, GA 30165

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Joshua Curtis 64 Tammen Dr Blue Ridge, GA 30513 PROTOCOL NUMBER: 66343

DELEGATING PHYSICIAN:

Richard Tammen 64 Tammen Dr Blue Ridge, GA 30513

Dear Nurse, Curtis:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66343**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Richard Tammen 64 Tammen Dr Blue Ridge, GA 30513

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Amber Dale 631 Genesee Pt. Newnan, GA 30263 PROTOCOL NUMBER: 66365

**DELEGATING PHYSICIAN:** 

Thomas Oden 631 Genesee Pt. Newnan, GA 30263

Dear Nurse, Dale:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66365**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Thomas Oden 631 Genesee Pt. Newnan, GA 30263

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Amber Dale 5600 Stonewall Tell Rd Ste219 .B College Park, GA 30349

**DELEGATING PHYSICIAN:**Sheril Kalarithara

5600 Stonewall Tell Rd Ste219 .B College Park, GA 30349

PROTOCOL NUMBER: 66366

Dear Nurse, Dale:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66366**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Sheril Kalarithara

5600 Stonewall Tell Rd Ste219 .B

College Park, GA 30349

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Katherine Daniel 1777 NE Expressway Atlanta, GA 30329 PROTOCOL NUMBER: 66329

**DELEGATING PHYSICIAN:** 

Andrew Ebner 1777 NE Expressway Atlanta, GA 30329

Dear Nurse, Daniel:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66329**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Andrew Ebner 1777 NE Expressway Atlanta, GA 30329

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Terrilyn Daniels 1791 Mulkey Rd Ste. 200 Austell, GA 30106 PROTOCOL NUMBER: 66185

DELEGATING PHYSICIAN:

Sheri Campbell 1791 Mulkey Rd Ste. 200 Austell, GA 30106

Dear Nurse, Daniels:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66185**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file Sheri Campbell 1791 Mulkey Rd Ste. 200

Austell, GA 30106

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66231

January 25, 2027

DELEGATING PHYSICIAN:

Nicole Darrough 1365 Clifton Rd NE Atlanta, GA 30322

Kristin Higgins 1365 Clifton Rd NE Atlanta, GA 30322

Dear Nurse, Darrough:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66231**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Kristin Higgins 1365 Clifton Rd NE Atlanta, GA 30322

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Casey Davis 1968 Peachtree Rd NW Atlanta, GA 30309 PROTOCOL NUMBER: 66232

DELEGATING PHYSICIAN:

Anand Sarma 1968 Peachtree Rd NW Atlanta, GA 30309

Dear Nurse, Davis:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66232**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Anand Sarma 1968 Peachtree Rd NW Atlanta, GA 30309

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Susan Deen 3345 US Hwy 84 W 102 Blackshear, GA 31516 PROTOCOL NUMBER: 66324

DELEGATING PHYSICIAN:

Errol Graham 3345 US Hwy 84 W 102 Blackshear, GA 31516

Dear Nurse, Deen:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66324**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Errol Graham 3345 US Hwy 84 W 102 Blackshear, GA 31516

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Amanda Denson 855 Gaines School Rd Ste G Athens, GA 30605 PROTOCOL NUMBER: 66233

DELEGATING PHYSICIAN:

Henry Morris 855 Gaines School Rd Ste G

Athens, GA 30605

Dear Nurse, Denson:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66233**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Henry Morris
855 Gaines School Rd Ste G
Athens, GA 30605

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Vaishanavi Desai 5669 Whitesville Rd Ste. A Columbus, GA 31904 PROTOCOL NUMBER: 66314

DELEGATING PHYSICIAN:

Kenneth Barngrover 5669 Whitesville Rd Ste. A Columbus, GA 31904

Dear Nurse, Desai:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66314**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Kenneth Barngrover 5669 Whitesville Rd Ste. A Columbus, GA 31904

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Saul Diaz-Marin 2250 Marietta Blvd NW Ste. 306 Atlanta, GA 30318 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66305

Ned Okarter 2250 Marietta Blvd NW Ste. 306 Atlanta, GA 30318

Dear Nurse, Diaz-Marin:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66305**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Ned Okarter

2250 Marietta Blvd NW Ste. 306

Atlanta, GA 30318

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Monique Dunbar 5 Concourse Pkwy NE Sandy Springs, GA 30328 PROTOCOL NUMBER: 66168

**DELEGATING PHYSICIAN:** 

Satish Cheti 5 Concourse Pkwy NE Sandy Springs, GA 30328

Dear Nurse, Dunbar:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66168**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Satish Cheti 5 Concourse Pkwy NE Sandy Springs, GA 30328

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Silvia Dunn 2467 Golden Camp Rd Augusta, GA 30906 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66197

Jones Gresham 2467 Golden Camp Rd Augusta, GA 30906

Dear Nurse, Dunn:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66197**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Jones Gresham 2467 Golden Camp Rd Augusta, GA 30906

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Kizzy Edmond 373 Upper River Rd Hawkinsville, GA 31036 PROTOCOL NUMBER: **66234** 

**DELEGATING PHYSICIAN:** 

Boris Ramirez 373 Upper River Rd Hawkinsville, GA 31036

Dear Nurse, Edmond:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66234**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Boris Ramirez 373 Upper River Rd Hawkinsville, GA 31036

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Emily Edwards 1014 Forsyth St

Macon, GA 31201

PROTOCOL NUMBER: 66192

**DELEGATING PHYSICIAN:** 

Edward Clark 1014 Forsyth St Macon, GA 31201

Dear Nurse, Edwards:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66192**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Edward Clark 1014 Forsyth St Macon, GA 31201

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Emily Edwards 1014 Forsyth Street Macon, GA 31021 PROTOCOL NUMBER: 66297

**DELEGATING PHYSICIAN:** 

Rachel Goodson 1014 Forsyth Street Macon, GA 31021

Dear Nurse, Edwards:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66297**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Rachel Goodson 1014 Forsyth Street Macon, GA 31021

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Ashley Elmore 1114 GA Highway 96 Kathleen, GA 31047 PROTOCOL NUMBER: 66226

DELEGATING PHYSICIAN:

Sandra Kopacz 1114 GA Highway 96 Kathleen, GA 31047

Dear Nurse, Elmore:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66226**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Sandra Kopacz 1114 GA Highway 96 Kathleen, GA 31047

Executive Director Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Yasmine Enmon 2084 Newnan Crossing Blvd E Ste.300 Newnan, GA 30265 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66361

Paul Chukelu 2084 Newnan Crossing Blvd E Ste.300 Newnan, GA 30265

Dear Nurse, Enmon:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66361**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Paul Chukelu 2084 Newnan Crossing Blvd E Ste.300 Newnan, GA 30265

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jacob Evansun 855 Gains School Rd Ste G Athens, GA 30605 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66235

Henry Morris 855 Gains School Rd Ste G Athens, GA 30605

Dear Nurse, Evansun:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66235**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Henry Morris
855 Gains School Rd Ste G
Athens, GA 30605

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Kayla Exum 1350 Walton Way

Augusta, GA 30901

PROTOCOL NUMBER: 66295

DELEGATING PHYSICIAN:

Joseph Lamar 1350 Walton Way Augusta, GA 30901

Dear Nurse, Exum:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66295**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Joseph Lamar 1350 Walton Way Augusta, GA 30901

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Dwanna Falconer 550 Peachtree St NE Atlanta, GA 30308 PROTOCOL NUMBER: **66249** 

DELEGATING PHYSICIAN:

Nabil Saba 550 Peachtree St NE Atlanta, GA 30308

Dear Nurse, Falconer:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66249**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Nabil Saba

550 Peachtree St NE Atlanta, GA 30308

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Rebecca Farrell 1200 Northside Forsyth Dr Cumming, GA 30041 PROTOCOL NUMBER: 66263

DELEGATING PHYSICIAN:

Joshua Thomas 1200 Northside Forsyth Dr Cumming, GA 30041

Dear Nurse, Farrell:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66263**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Joshua Thomas 1200 Northside Forsyth Dr Cumming, GA 30041

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Taylor Fiveash 2501 N. Patterson Street Valdosta, GA 31602 PROTOCOL NUMBER: **66246** 

**DELEGATING PHYSICIAN:** Eric Edgerton

2501 N. Patterson Street Valdosta, GA 31602

Dear Nurse, Fiveash:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66246**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Eric Edgerton 2501 N. Patterson Street Valdosta, GA 31602

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**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66202

Sohna Florence 3995 S. Cobb Dr SE Smyrna, GA 30080

DELEGATING PHYSICIAN: Pramod Kakarala 3995 S. Cobb Dr SE Smyrna, GA 30080

Dear Nurse, Florence:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66202**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Pramod Kakarala 3995 S. Cobb Dr SE Smyrna, GA 30080

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66353

Cody Folsom 302 Shorter Ave.

Rome, GA 30165

Wilma Briones-Mull 302 Shorter Ave.

**DELEGATING PHYSICIAN:** 

Rome, GA 30165

Dear Nurse, Folsom:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66353**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

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Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Wilma Briones-Mull 302 Shorter Ave. Rome, GA 30165

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Nicole Francis-Freckleton 1412 Milstead Ave NE Conyers, GA 30012 PROTOCOL NUMBER: 66313

**DELEGATING PHYSICIAN:** Khadijah Jihad-Albert 1412 Milstead Ave NE Conyers, GA 30012

Dear Nurse, Francis-Freckleton:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66313**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Khadijah Jihad-Albert 1412 Milstead Ave NE Conyers, GA 30012

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Nicole Francis-Freckleton 1412 Milstead Ave NE Conyers, GA 30012 PROTOCOL NUMBER: **66191** 

**DELEGATING PHYSICIAN:** Khadijah Jihad-Albert 1412 Milstead Ave NE Conyers, GA 30012

Dear Nurse, Francis-Freckleton:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66191**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Khadijah Jihad-Albert 1412 Milstead Ave NE Conyers, GA 30012

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Scott Franklin 1350 Walton Way Augusta, GA 30901 PROTOCOL NUMBER: **66296** 

**DELEGATING PHYSICIAN:** 

Joseph Lamar 1350 Walton Way Augusta, GA 30901

Dear Nurse, Franklin:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66296**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Joseph Lamar 1350 Walton Way Augusta, GA 30901

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jennine Frazier 7805 Waters Ave Ste. 7a-4 Savannah, GA 31406 PROTOCOL NUMBER: 66376

DELEGATING PHYSICIAN:

Sarah Cook

7805 Waters Ave Ste. 7a-4 Savannah, GA 31406

Dear Nurse, Frazier:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66376**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Sarah Cook 7805 Waters Ave Ste. 7a-4

Savannah, GA 31406

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**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Marissa Fussell 1111 US Hwy 441N PROTOCOL NUMBER: 66319

DELEGATING PHYSICIAN:

Stephen Burt 1111 US Hwy 441N Pearson, GA 31642

Dear Nurse, Fussell:

Pearson, GA 31642

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66319**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Stephen Burt 1111 US Hwy 441N Pearson, GA 31642

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Amy Garner 800 Gl Maddox Pkwy Chatsworth, GA 30705 PROTOCOL NUMBER: **66355** 

**DELEGATING PHYSICIAN:** 

Tom Bledsoe 800 Gl Maddox Pkwy Chatsworth, GA 30705

Dear Nurse, Garner:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66355**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Tom Bledsoe 800 Gl Maddox Pkwy Chatsworth, GA 30705

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Maya Gebhardt 1561 Lenru Rd Ste A Bogant, GA 30622 PROTOCOL NUMBER: 66333

**DELEGATING PHYSICIAN:** 

Robert Klassen 1561 Lenru Rd Ste A Bogant, GA 30622

Dear Nurse, Gebhardt:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66333**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Robert Klassen 1561 Lenru Rd Ste A Bogant, GA 30622

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Isha Godbold 1120 15th St Augusta, GA 30912 PROTOCOL NUMBER: 66335

**DELEGATING PHYSICIAN:** 

Haitham Hreibe 1120 15th St Augusta, GA 30912

Dear Nurse, Godbold:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66335**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file Haitham Hreibe 1120 15th St Augusta, GA 30912

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**Chairperson**William K. Bostock, MD

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January 25, 2024

Jillian Goro 2570 Holcomb Bridge Rd Ste. 110 Alpharetta, GA 30022 PROTOCOL NUMBER: **66342** 

**DELEGATING PHYSICIAN:** Sowmya Brahmadevi

2570 Holcomb Bridge Rd Ste. 110

Alpharetta, GA 30022

Dear Nurse, Goro:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66342**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Sowmya Brahmadevi 2570 Holcomb Bridge Rd Ste. 110 Alpharetta, GA 30022

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Laura Griffaw 1100 Johnson Ferry Rd Ste. 800 Atlanta, GA 30342 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66318

Jill Henke

1100 Johnson Ferry Rd Ste. 800

Atlanta, GA 30342

Dear Nurse, Griffaw:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66318**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Jill Henke
1100 Johnson Ferry Rd Ste. 800
Atlanta, GA 30342

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**Executive Director** Daniel R. Dorsey, MBA



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January 25, 2024

Scheleda Grimes 5001 Peachtree Blvd Ste 605 Chamblee, GA 30341 PROTOCOL NUMBER: 66259

DELEGATING PHYSICIAN:

Richard Martinez 5001 Peachtree Blvd Ste 605 Chamblee, GA 30341

Dear Nurse, Grimes:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66259**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Richard Martinez
5001 Peachtree Blvd Ste 605
Chamblee, GA 30341

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

PROTOCOL NUMBER: 66362

Shannon Harrell 2209 Pineview Dr Valdosta, GA 31602

**DELEGATING PHYSICIAN:** Deborah Flack 2209 Pineview Dr

Valdosta, GA 31602

Dear Nurse, Harrell:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66362**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Deborah Flack 2209 Pineview Dr Valdosta, GA 31602

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66360

Shannon Harrell 1155 5th St SE Cairo, GA 39828

**DELEGATING PHYSICIAN:** Tovar Escalante 1155 5th St SE Cairo, GA 39828

Dear Nurse, Harrell:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66360**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Tovar Escalante 1155 5th St SE Cairo, GA 39828

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

PROTOCOL NUMBER: 66344

Sarah Harrison 242 King Ave Ste. 120 Athens, GA 30606

**DELEGATING PHYSICIAN:** Austin Evans

242 King Ave Ste. 120 Athens, GA 30606

Dear Nurse, Harrison:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66344**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file
Austin Evans

242 King Ave Ste. 120 Athens, GA 30606

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jessica Harrison 4325 Alexander Dr Ste. 200 Alpharetta, GA 30022 PROTOCOL NUMBER: 66251

DELEGATING PHYSICIAN:

James Greenblatt 4325 Alexander Dr Ste. 200 Alpharetta, GA 30022

Dear Nurse, Harrison:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66251**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

James Greenblatt 4325 Alexander Dr Ste. 200 Alpharetta, GA 30022

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Ana Hauge 449 Pleasant Hill Rd Ste. 104 Lilburn, GA 30047 PROTOCOL NUMBER: 66348

**DELEGATING PHYSICIAN:** Adolofo Molina

449 Pleasant Hill Rd Ste. 104

Lilburn, GA 30047

Dear Nurse, Hauge:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66348**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Adolofo Molina 449 Pleasant Hill Rd Ste. 104 Lilburn, GA 30047

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Thomas Heath 909 S Park St Carrollton, GA 30117 PROTOCOL NUMBER: 66327

**DELEGATING PHYSICIAN:** Christopher Morgan 909 S Park St Carrollton, GA 30117

Dear Nurse, Heath:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66327**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Christopher Morgan 909 S Park St Carrollton, GA 30117

Carrollton, GA 30117

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66188

Tyler Hernandez 80 Jesse Hill Dr. Atlanta, GA 30303

**DELEGATING PHYSICIAN:**Katherine Kohler
80 Jesse Hill Dr.
Atlanta, GA 30303

Dear Nurse, Hernandez:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66188**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Katherine Kohler 80 Jesse Hill Dr. Atlanta, GA 30303

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Casey Higginbotham 215 Curtis Pkwy NE

Calhoun, GA 30701

PROTOCOL NUMBER: 66354

DELEGATING PHYSICIAN:

Cynthia Brown 215 Curtis Pkwy NE Calhoun, GA 30701

Dear Nurse, Higginbotham:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66354**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Cynthia Brown 215 Curtis Pkwy NE Calhoun, GA 30701

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Chantai Hightower 5461 Meridian Mark Rd Atlanta, GA 30342 PROTOCOL NUMBER: 66387

DELEGATING PHYSICIAN:

Heather Short 5461 Meridian Mark Rd Atlanta, GA 30342

Dear Nurse, Hightower:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66387**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Heather Short 5461 Meridian Mark Rd Atlanta, GA 30342

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66331

**DELEGATING PHYSICIAN:** 

Summer Hill 391 Peachtree St Jesup, GA 31545

Stanley Jones 391 Peachtree St Jesup, GA 31545

Dear Nurse, Hill:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66331**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file Stanley Jones 391 Peachtree St

Jesup, GA 31545

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66337

DELEGATING PHYSICIAN:

Summer Hill 391 Peachtree St Jesup, GA 31545

Eddie Thomas 391 Peachtree St Jesup, GA 31545

Dear Nurse, Hill:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66337**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Eddie Thomas 391 Peachtree St Jesup, GA 31545

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Summer Hill 125 Hobbs St Blackshear, GA 31516 PROTOCOL NUMBER: 66338

DELEGATING PHYSICIAN: Caitlyn Coleman 125 Hobbs St Blackshear, GA 31516

Dear Nurse, Hill:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66338**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Caitlyn Coleman 125 Hobbs St Blackshear, GA 31516

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Elizabeth Hortman 2900 Chamblee Tucker Rd Bldg 16 Atlanta, GA 30341 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66236

Douglas Laipple 2900 Chamblee Tucker Rd Bldg 16 Atlanta, GA 30341

Dear Nurse, Hortman:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66236**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Douglas Laipple 2900 Chamblee Tucker Rd Bldg 16 Atlanta, GA 30341

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Rachel Huckaby 3617 Peachtree Rd NW Atlanta, GA 30309 PROTOCOL NUMBER: 66322

DELEGATING PHYSICIAN:

Immanuel Hsu 3617 Peachtree Rd NW Atlanta, GA 30309

Dear Nurse, Huckaby:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66322**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Immanuel Hsu 3617 Peachtree Rd NW

Atlanta, GA 30309

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

PROTOCOL NUMBER: 66367

Clara Huff 256 McMillan Rd Dacula, GA 30019

DELEGATING PHYSICIAN: Lelan Byrd 256 McMillan Rd Dacula, GA 30019

Dear Nurse, Huff:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66367**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file Lelan Byrd

256 McMillan Rd Dacula, GA 30019

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66341** 

Valencia Hunt 1350 Walton Way Augusta, GA 30901

**DELEGATING PHYSICIAN:** Zeeshan Ajimal 1350 Walton Way Augusta, GA 30901

Dear Nurse, Hunt:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66341**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Zeeshan Ajimal 1350 Walton Way Augusta, GA 30901

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jason Hurt 1305 Jennings Mill Rd Ste. 120 Watkinsvile, GA 30677 PROTOCOL NUMBER: 66339

DELEGATING PHYSICIAN:

Darryel Wilson 1305 Jennings Mill Rd Ste. 120 Watkinsvile, GA 30677

Dear Nurse, Hurt:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66339**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Darryel Wilson 1305 Jennings Mill Rd Ste. 120 Watkinsvile, GA 30677

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Naa Okailey Jackson 3915 Harrison Rd SW Ste 300 Loganville, GA 30052 PROTOCOL NUMBER: 66245

DELEGATING PHYSICIAN:

James Granger 3915 Harrison Rd SW Ste 300 Loganville, GA 30052

Dear Nurse, Jackson:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66245**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

James Granger 3915 Harrison Rd SW Ste 300 Loganville, GA 30052

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Laura Jernigan 1485 Jesse Jewell Pkwy NE Ste 240 Gainesville, GA 30501 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66183

Daniel Cobb 1485 Jesse Jewell Pkwy NE Ste 240 Gainesville, GA 30501

Dear Nurse, Jernigan:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66183**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Daniel Cobb
1485 Jesse Jewell Pkwy NE Ste 240
Gainesville, GA 30501

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Shehzeen Jessani 1001 Johnson Ferry Rd Atlanta, GA 30342 PROTOCOL NUMBER: 66223

**DELEGATING PHYSICIAN:** 

Maryann Jacob 1001 Johnson Ferry Rd Atlanta, GA 30342

Dear Nurse, Jessani:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66223**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Maryann Jacob 1001 Johnson Ferry Rd Atlanta, GA 30342

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Afreen Jivani 2941 Piedmont Rd NE Ste B Atlanta, GA 30305 PROTOCOL NUMBER: **66136** 

**DELEGATING PHYSICIAN:** 

Bruce Ramsdell 2941 Piedmont Rd NE Ste B Atlanta, GA 30305

Dear Nurse, Jivani:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66136**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file
Bruce Ramsdell

2941 Piedmont Rd NE Ste B

Atlanta, GA 30305

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Emily John 127 Telfair St Augusta, GA 30901 PROTOCOL NUMBER: **66217** 

**DELEGATING PHYSICIAN:** 

Robert Campbell 127 Telfair St Augusta, GA 30901

Dear Nurse, John:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66217**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file
Robert Campbell
127 Telfair St

Augusta, GA 30901

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66213** 

Jacqueline Johnson 1117 Battle Creek Rd Jonesboro, GA 30236

DELEGATING PHYSICIAN: Mario Majette 1117 Battle Creek Rd Jonesboro, GA 30236

Dear Nurse, Johnson:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66213**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Mario Majette 1117 Battle Creek Rd Jonesboro, GA 30236

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jasmyn Johnson-Hill 1120 15th St Augusta, GA 30912 PROTOCOL NUMBER: 66180

DELEGATING PHYSICIAN:

Avirup Guha 1120 15th St Augusta, GA 30912

Dear Nurse, Johnson-Hill:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66180**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Avirup Guha 1120 15th St Augusta, GA 30912

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Victoria Jones 507 W 3rd Avenue Ste 8A Albany, GA 31701 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66281

Stanford Williamson 507 W 3rd Avenue Ste 8A Albany, GA 31701

Dear Nurse, Jones:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66281**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Stanford Williamson 507 W 3rd Avenue Ste 8A Albany, GA 31701

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Heidi Joung 3535 Piedmont Rd NE Ste 600 Atlanta, GA 30305 **DELEGATING PHYSICIAN:** 

Frederick Burton 3535 Piedmont Rd NE Ste 600 Atlanta, GA 30305

PROTOCOL NUMBER: 66215

Dear Nurse, Joung:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66215**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Frederick Burton 3535 Piedmont Rd NE Ste 600 Atlanta, GA 30305

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Amber Joyner One Meadows Parkway Vidalia, GA 30474 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66149

Henry Cline One Meadows Parkway Vidalia, GA 30474

Dear Nurse, Joyner:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66149**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file Henry Cline One Meadows Parkway Vidalia, GA 30474

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Stephanie Kachin 1960 Peachtree Rd NW Atlanta, GA 30309 PROTOCOL NUMBER: 66221

DELEGATING PHYSICIAN:

Sri Balusu 1960 Peachtree Rd NW Atlanta, GA 30309

Dear Nurse, Kachin:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66221**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Sri Balusu 1960 Peachtree Rd NW Atlanta, GA 30309

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Elleni Kebede 1401 Johnson Ferry Road Marietta, GA 30062 PROTOCOL NUMBER: **66116** 

**DELEGATING PHYSICIAN:** 

Leia Dawson 1401 Johnson Ferry Road Marietta, GA 30062

Dear Nurse, Kebede:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66116**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Leia Dawson

1401 Johnson Ferry Road Marietta, GA 30062

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Rebekah Ketterman 961 Green St NE Gainesville, GA 30501 DE

**DELEGATING PHYSICIAN:** 

PROTOCOL NUMBER: 66117

Nadia Cameron 961 Green St NE Gainesville, GA 30501

Dear Nurse, Ketterman:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66117**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Nadia Cameron 961 Green St NE Gainesville, GA 30501

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Heather Kimsey 4245 Johns Creek Parkway Suwanee, GA 30024 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66200

David Pitts 4245 Johns Creek Parkway Suwanee, GA 30024

Dear Nurse, Kimsey:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66200**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file
David Pitts
4245 Johns Creek Parkway
Suwanee, GA 30024

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66265** 

Amber Knight 106 East Broad St Savannah, GA 31401 DELEGATING PHYSICIAN: Mary Nesbit 106 East Broad St Savannah, GA 31401

Dear Nurse, Knight:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66265**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file Mary Nesbit 106 East Broad St Savannah, GA 31401

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Kathalina LaCoste 5 Concourse Pkwy NE Sandy Springs, GA 30328 PROTOCOL NUMBER: 66097

DELEGATING PHYSICIAN: Solomon Teckle 5 Concourse Pkwy NE Sandy Springs, GA 30328

Dear Nurse, LaCoste:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66097**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Solomon Teckle 5 Concourse Pkwy NE Sandy Springs, GA 30328

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Nina Lagarde 310 Hospital Kennestone Blvd Marietta, GA 30060 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66286

Michelle Park 310 Hospital Kennestone Blvd Marietta, GA 30060

Dear Nurse, Lagarde:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66286**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Michelle Park 310 Hospital Kennestone Blvd Marietta, GA 30060

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66300** 

Sheryl Lamb 1900 Perry Blvd Atlanta, GA 30318 DELEGATING PHYSICIAN: Lucas Golub 1900 Perry Blvd Atlanta, GA 30318

Dear Nurse, Lamb:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66300**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Lucas Golub 1900 Perry Blvd Atlanta, GA 30318

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Armeshia Lawrence 4292 Gray Hwy Gray, GA 31032 PROTOCOL NUMBER: 66330

**DELEGATING PHYSICIAN:** 

Marlene Shivers 4292 Gray Hwy Gray, GA 31032

Dear Nurse, Lawrence:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66330**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Marlene Shivers 4292 Gray Hwy Gray, GA 31032

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Taylor LeBlanc 467 West Doyle Street Toccoa, GA 30577 PROTOCOL NUMBER: 66328

**DELEGATING PHYSICIAN:**Jonathan Williams
467 West Doyle Street
Toccoa, GA 30577

Dear Nurse, LeBlanc:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66328**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Jonathan Williams 467 West Doyle Street Toccoa, GA 30577

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Kimberly Lee 1514 Vernon Rd Lagrange, GA 30240 PROTOCOL NUMBER: 66311

**DELEGATING PHYSICIAN:**Salman Fidahassein
1514 Vernon Rd
Lagrange, GA 30240

Dear Nurse, Lee:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66311**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Salman Fidahassein

> 1514 Vernon Rd Lagrange, GA 30240

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Hadassa Legrand 3950 North Henry Blvd Stockbridge, GA 30281 PROTOCOL NUMBER: **66214** 

DELEGATING PHYSICIAN: Jacqueline O'Kane 3950 North Henry Blvd Stockbridge, GA 30281

Dear Nurse, Legrand:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66214**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Jacqueline O'Kane 3950 North Henry Blvd Stockbridge, GA 30281

Executive Director Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Tashaneca Lewis 6000 N. Terminal Pkwy Atrium Ste DC14-2-A1 Atlanta, GA 30320

Dear Nurse, Lewis:

PROTOCOL NUMBER: 66173

**DELEGATING PHYSICIAN:** 

Karen Bowers 6000 N. Terminal Pkwy Atrium Ste DC14-2-A1 Atlanta, GA 30320

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66173**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Karen Bowers 6000 N. Terminal Pkwy Atrium Ste DC14-2-A1 Atlanta, GA 30320

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66261

Terri Lewis 2122 Cumming Rd Augusta, GA 30904

DELEGATING PHYSICIAN: Luther Thomas 2122 Cumming Rd Augusta, GA 30904

Dear Nurse, Lewis:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66261**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Luther Thomas 2122 Cumming Rd Augusta, GA 30904

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Samantha Lewis 3380 Paddocks Parkway Suwanee, GA 30024 PROTOCOL NUMBER: 66237

**DELEGATING PHYSICIAN:**Samantha Benson
3380 Paddocks Parkway
Suwanee, GA 30024

Dear Nurse, Lewis:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66237**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Samantha Benson 3380 Paddocks Parkway Suwanee, GA 30024

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66179** 

Marivic Llena 3290 Sixes Rd

**DELEGATING PHYSICIAN:** 

Gregory Lawson 3290 Sixes Rd

Canton, GA 30114

Canton, GA 30114

Dear Nurse, Llena:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66179**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Gregory Lawson 3290 Sixes Rd Canton, GA 30114

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Sara Lovette 706 S. Broad Street Thomas, GA 31792 PROTOCOL NUMBER: **66143 DELEGATING PHYSICIAN:** 

Lorraine Williams-Rahming 706 S. Broad Street Thomas, GA 31792

Dear Nurse, Lovette:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66143**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Lorraine Williams-Rahming
706 S. Broad Street

Thomas, GA 31792

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Taylor Maney 1035 Red Bud Rd

Calhoun, GA 30701

PROTOCOL NUMBER: **66184** 

**DELEGATING PHYSICIAN:** 

Jose Gomez 1035 Red Bud Rd Calhoun, GA 30701

Dear Nurse, Maney:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66184**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Jose Gomez 1035 Red Bud Rd Calhoun, GA 30701

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66165** 

Frances Martinez 1400 Tullie Road NE Atlanta, GA 30329 **DELEGATING PHYSICIAN:** Roberta Leu 1400 Tullie Road NE Atlanta, GA 30329

Dear Nurse, Martinez:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66165**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Roberta Leu 1400 Tullie Road NE Atlanta, GA 30329

Executive Director Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Stacy Mastro 798 Lawrenceville-Suwanee Rd Ste 700 Lawrenceville, GA 30043

Dear Nurse, Mastro:

PROTOCOL NUMBER: **66312** 

**DELEGATING PHYSICIAN:** Marcia Riley

798 Lawrenceville-Suwanee Rd Ste 700 Lawrenceville, GA 30043

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66312**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Marcia Riley 798 Lawrenceville-Suwanee Rd Ste 700 Lawrenceville, GA 30043

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Alorna Maxey 1235 Chattahooche Ave Ste 106 Atlanta, GA 30318 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66182

Allyson Maske 1235 Chattahooche Ave Ste 106 Atlanta, GA 30318

Dear Nurse, Maxey:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66182**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Allyson Maske

1235 Chattahooche Ave Ste 106

Atlanta, GA 30318

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Adelaida Mayeta Part 4303 Jodeco Rd McDonough, GA 30253 PROTOCOL NUMBER: **66280** 

DELEGATING PHYSICIAN: Janssen Williams 4303 Jodeco Rd McDonough, GA 30253

Dear Nurse, Mayeta Part:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66280**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Janssen Williams 4303 Jodeco Rd McDonough, GA 30253

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Christopher McCanham 3000 Schatulga Road Columbus, GA 31907 PROTOCOL NUMBER: **66137** 

**DELEGATING PHYSICIAN:** David Morton

3000 Schatulga Road Columbus, GA 31907

Dear Nurse, McCanham:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66137**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

David Morton 3000 Schatulga Road Columbus, GA 31907

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Kofi-Ann McDermott 6300 Hospital Parkway, Ste 300 Johns Creek, GA 30097 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66218

Kathleen Laveaux 6300 Hospital Parkway, Ste 300 Johns Creek, GA 30097

Dear Nurse, McDermott:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66218**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Kathleen Laveaux 6300 Hospital Parkway, Ste 300 Johns Creek, GA 30097

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Kofi-Ann McDermott 5700 Hillandale Drive Ste 250 Lithonia, GA 30058 PROTOCOL NUMBER: **66219** 

**DELEGATING PHYSICIAN:** Celia Mamby

5700 Hillandale Drive Ste 250 Lithonia, GA 30058

Dear Nurse, McDermott:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66219**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Celia Mamby 5700 Hillandale Drive Ste 250 Lithonia, GA 30058

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Sandra McNeal

821 Plaza Avenue Eastman, GA 31023 PROTOCOL NUMBER: **66277** 

**DELEGATING PHYSICIAN:** Tori Grenade

821 Plaza Avenue Eastman, GA 31023

Dear Nurse, McNeal:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66277**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Tori Grenade 821 Plaza Avenue Eastman, GA 31023

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

-

PROTOCOL NUMBER: 66169

Christina McQueen 1405 Clifton Road NE Atlanta, GA 30322 **DELEGATING PHYSICIAN:** Kristin Weinschenk 1405 Clifton Road NE Atlanta, GA 30322

Dear Nurse, McQueen:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66169**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Kristin Weinschenk 1405 Clifton Road NE Atlanta, GA 30322

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Lynda Menelas 5 Concourse Pkwy NE Sandy Springs, GA 30328 PROTOCOL NUMBER: **66096** 

DELEGATING PHYSICIAN: Solomon Teckle 5 Concourse Pkwy NE Sandy Springs, GA 30328

Dear Nurse, Menelas:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66096**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Solomon Teckle 5 Concourse Pkwy NE Sandy Springs, GA 30328

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jadella Mickler 1700 Medical Way Snellville, GA 30078 PROTOCOL NUMBER: 66210

**DELEGATING PHYSICIAN:** Ramesh Swamiappan 1700 Medical Way Snellville, GA 30078

Dear Nurse, Mickler:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66210**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Ramesh Swamiappan 1700 Medical Way Snellville, GA 30078

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jadella Mickler 960 Joe Harris Frank Pkwy SE Cartersville, GA 30120 PROTOCOL NUMBER: 66315

DELEGATING PHYSICIAN:

Demareo Webb 960 Joe Harris Frank Pkwy SE Cartersville, GA 30120

Dear Nurse, Mickler:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66315**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Demareo Webb 960 Joe Harris Frank Pkwy SE Cartersville, GA 30120

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Marla Mikell 101 Harris Industrial Blvd Ste A Vidalia, GA 30474 PROTOCOL NUMBER: **66146** 

**DELEGATING PHYSICIAN:** Albert Burton

101 Harris Industrial Blvd Ste A

Vidalia, GA 30474

Dear Nurse, Mikell:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66146**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Albert Burton 101 Harris Industrial Blvd Ste A Vidalia, GA 30474

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Kimberly Miller 4700 Waters Ave Savannah, GA 31404 PROTOCOL NUMBER: **66106** 

**DELEGATING PHYSICIAN:**Benjamin Mackowiak
4700 Waters Ave
Savannah, GA 31404

Dear Nurse, Miller:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66106**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Benjamin Mackowiak 4700 Waters Ave Savannah, GA 31404

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Cindy Milligan 3379 Peachtree Rd NE Ste 655X58 Atlanta, GA 30326 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66282

Nelson Pichardo 3379 Peachtree Rd NE Ste 655X58 Atlanta, GA 30326

Dear Nurse, Milligan:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66282**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Nelson Pichardo 3379 Peachtree Rd NE Ste 655X58 Atlanta, GA 30326

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Aundre Mitchell 1250 Scenic Hwy S Ste 1260 Lawrenceville, GA 30045 PROTOCOL NUMBER: **66170** 

**DELEGATING PHYSICIAN:** 

Akua Agyei-Owusu 1250 Scenic Hwy S Ste 1260 Lawrenceville, GA 30045

Dear Nurse, Mitchell:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66170**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Akua Agyei-Owusu 1250 Scenic Hwy S Ste 1260 Lawrenceville, GA 30045

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Corie Mitchell 140 Three Rivers Drive Rome, GA 30161 PROTOCOL NUMBER: **66279** 

**DELEGATING PHYSICIAN:** 

Susan Brewer 140 Three Rivers Drive Rome, GA 30161

Dear Nurse, Mitchell:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66279**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Susan Brewer 140 Three Rivers Drive Rome, GA 30161

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Alexis Mitchell 745 Memorial Drive SE Atlanta, GA 30316 PROTOCOL NUMBER: 66241

DELEGATING PHYSICIAN:

Elijah Robinson 745 Memorial Drive SE Atlanta, GA 30316

Dear Nurse, Mitchell:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66241**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Elijah Robinson
745 Memorial Drive SE

Atlanta, GA 30316

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jennifer Monsrud 2340 Patrick Henry Pkwy McDonough, GA 30253 PROTOCOL NUMBER: **66171** 

**DELEGATING PHYSICIAN:** 

Willie Winzer 2340 Patrick Henry Pkwy McDonough, GA 30253

Dear Nurse, Monsrud:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66171**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Willie Winzer

> 2340 Patrick Henry Pkwy McDonough, GA 30253

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Sasha Morton 315 Field St

Bremen, GA 30110

DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66209

La-Shaun Elliott 315 Field St

Bremen, GA 30110

Dear Nurse, Morton:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66209**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

La-Shaun Elliott 315 Field St Bremen, GA 30110

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Carey Mullis 334 Smith Ave Thomasville, GA 31792 PROTOCOL NUMBER: 66134

DELEGATING PHYSICIAN:

Raul Santos 334 Smith Ave

Thomasville, GA 31792

Dear Nurse, Mullis:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66134**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file
Raul Santos
334 Smith Ave

Thomasville, GA 31792

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66176** 

Natalia Muravieva 550 Peachtree St Atlanta, GA 30308

**DELEGATING PHYSICIAN:**Sol Jacobs
550 Peachtree St
Atlanta, GA 30308

Dear Nurse, Muravieva:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66176**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Sol Jacobs 550 Peachtree St Atlanta, GA 30308

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Stella Mwangi 1000 Johnson Ferry Road Atlanta, GA 30342 PROTOCOL NUMBER: 66264

DELEGATING PHYSICIAN:

Jolly Pradeep 1000 Johnson Ferry Road Atlanta, GA 30342

Dear Nurse, Mwangi:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66264**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Jolly Pradeep
1000 Johnson Ferry Road
Atlanta, GA 30342

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Syed Nayer 3850 Windermere Pkwy Ste 105 Cumming, GA 30041 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66147

Laena Karnstedt 3850 Windermere Pkwy Ste 105 Cumming, GA 30041

Dear Nurse, Nayer:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66147**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Laena Karnstedt 3850 Windermere Pkwy Ste 105 Cumming, GA 30041

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Kary Neal 7450 Skidaway Rd Savannah, GA 31406 PROTOCOL NUMBER: 66252

**DELEGATING PHYSICIAN:** 

Ortelio Bosch 7450 Skidaway Rd Savannah, GA 31406

Dear Nurse, Neal:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66252**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Ortelio Bosch 7450 Skidaway Rd Savannah, GA 31406

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Lovie Negrin 1325 Commerce Drive, Ste 200 Peachtree City, GA 30269 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66238

Ray Bennett 1325 Commerce Drive, Ste 200 Peachtree City, GA 30269

Dear Nurse, Negrin:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66238**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Ray Bennett 1325 Commerce Drive, Ste 200 Peachtree City, GA 30269

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66301** 

Katherine Nelson 1405 Clifton Rd NE Atlanta, GA 30322

**DELEGATING PHYSICIAN:** Karen Wasilewski 1405 Clifton Rd NE Atlanta, GA 30322

Dear Nurse, Nelson:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66301**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Karen Wasilewski 1405 Clifton Rd NE Atlanta, GA 30322

**Executive Director** Daniel R. Dorsey, MBA



Chairperson William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66211

Emmalyn Newman 3747 Roswell Rd Marietta, GA 30062

**DELEGATING PHYSICIAN:** 

Peter Jungblut 3747 Roswell Rd Marietta, GA 30062

Dear Nurse, Newman:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is 66211.

You are now eligible to apply for a DEA number. You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the termination of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

Daniel R. Dorsey **Executive Director** 

cc: file

Peter Jungblut 3747 Roswell Rd Marietta, GA 30062

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Tanesha Nobles 9755 Dogwood Road Ste 340 Roswell, GA 30075

Dear Nurse, Nobles:

PROTOCOL NUMBER: **66302** 

**DELEGATING PHYSICIAN:**Michael Rosen
9755 Dogwood Road Ste 340

Roswell, GA 30075

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66302**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Michael Rosen 9755 Dogwood Road Ste 340 Roswell, GA 30075

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jessica Norris 5400 Riverside Drive Ste 202 Macon, GA 31210 PROTOCOL NUMBER: 66239

DELEGATING PHYSICIAN:

Palghat Mohan 5400 Riverside Drive Ste 202 Macon, GA 31210

Dear Nurse, Norris:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66239**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Palghat Mohan 5400 Riverside Drive Ste 202 Macon, GA 31210

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Petra Nozile 1058 Bear Creek Blvd Hampton, GA 30228 PROTOCOL NUMBER: 66148

**DELEGATING PHYSICIAN:** 

Liliana Llopart 1058 Bear Creek Blvd Hampton, GA 30228

Dear Nurse, Nozile:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66148**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Liliana Llopart 1058 Bear Creek Blvd Hampton, GA 30228

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66138

**DELEGATING PHYSICIAN:** 

Paula O'Bear 1200 Memorial Dr Dalton, GA 30720

Wilson Walker 1200 Memorial Dr Dalton, GA 30720

Dear Nurse, O'Bear:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66138**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Wilson Walker 1200 Memorial Dr Dalton, GA 30720

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Joseph Obuba 3459 Acworth Due West Rd Ste 321 Acworth, GA 30064 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66248

Kelvin Burton 3459 Acworth Due West Rd Ste 321

Acworth, GA 30064

Dear Nurse, Obuba:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66248**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Kelvin Burton 3459 Acworth Due West Rd Ste 321 Acworth, GA 30064

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Julie Ogelsby 447 N. Belair Rd Ste 101 Evans, GA 30809 PROTOCOL NUMBER: 66164

DELEGATING PHYSICIAN:

Erich Heinz 447 N. Belair Rd Ste 101 Evans, GA 30809

Dear Nurse, Ogelsby:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66164**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Erich Heinz 447 N. Belair Rd Ste 101

Evans, GA 30809

**Executive Director** Daniel R. Dorsey, MBA



Chairperson William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

**Emily Oliver** 304 Turner McCall Blvd Rome, GA 30165

PROTOCOL NUMBER: 66135

**DELEGATING PHYSICIAN:** Catherine Martin 304 Turner McCall Blvd Rome, GA 30165

Dear Nurse, Oliver:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is 66135.

You are now eligible to apply for a DEA number. You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the termination of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

Daniel R. Dorsey **Executive Director** 

cc: file Catherine Martin

304 Turner McCall Blvd

Rome, GA 30165

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66101** 

**DELEGATING PHYSICIAN:** 

Olivia Oliver 550 Peachtree St NE Atlanta, GA 30308

Julie Mitchell 550 Peachtree St NE Atlanta, GA 30308

Dear Nurse, Oliver:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66101**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Julie Mitchell
550 Peachtree St NE
Atlanta, GA 30308

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66216

Blessing Onyekachi 3188 Atlanta Rd SE Smyrna, GA 30080 DELEGATING PHYSICIAN: Jeffrey Klopper 3188 Atlanta Rd SE Smyrna, GA 30080

Dear Nurse, Onyekachi:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66216**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Jeffrey Klopper 3188 Atlanta Rd SE Smyrna, GA 30080

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Basirat Owolabi 310 Hospital Kennestone Blvd Marietta, GA 30060 PROTOCOL NUMBER: 66244

DELEGATING PHYSICIAN:

Michelle Park

310 Hospital Kennestone Blvd

Marietta, GA 30060

Dear Nurse, Owolabi:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66244**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Michelle Park 310 Hospital Kennestone Blvd Marietta, GA 30060

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Kenny Padron 2383 Pate St Snellville, GA 30078 PROTOCOL NUMBER: 66181

DELEGATING PHYSICIAN:

Jessica Mercer 2383 Pate St Snellville, GA 30078

Dear Nurse, Padron:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66181**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Jessica Mercer 2383 Pate St Snellville, GA 30078

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Celisa Paine 176 Charles Hardy Pkwy Ste C Hiram, GA 30141 PROTOCOL NUMBER: 66163

DELEGATING PHYSICIAN:

Afua Akhi-Gbade 176 Charles Hardy Pkwy Ste C Hiram, GA 30141

Dear Nurse, Paine:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66163**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Afua Akhi-Gbade

176 Charles Hardy Pkwy Ste C

Hiram, GA 30141

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66142

**DELEGATING PHYSICIAN:** 

Robert Monett 6107 Oakbrook Pkwy Norcross, GA 30093

Gina Papa 6107 Oakbrook Pkwy Norcross, GA 30093

Dear Nurse, Papa:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66142**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Robert Monett 6107 Oakbrook Pkwy Norcross, GA 30093

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66108** 

Elijah Paradee 10 Doctors St Metter, GA 30439

**DELEGATING PHYSICIAN:** Thomas Ferrari

10 Doctors St Metter, GA 30439

Dear Nurse, Paradee:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66108**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Thomas Ferrari 10 Doctors St Metter, GA 30439

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Elise Parker 600 Village Trace NE Suite 250 Marietta, GA 30060

Dear Nurse, Parker:

PROTOCOL NUMBER: **66377** 

**DELEGATING PHYSICIAN:** Herbert Kollinger

600 Village Trace NE Suite 250 Marietta, GA 30060

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66377**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Herbert Kollinger

600 Village Trace NE Suite 250

Marietta, GA 30060

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Jamie Parker 215 Curtis Parkway NE Calhoun, GA 30701 PROTOCOL NUMBER: 66222

DELEGATING PHYSICIAN:

Cynthia Brown 215 Curtis Parkway NE Calhoun, GA 30701

Dear Nurse, Parker:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66222**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Cynthia Brown 215 Curtis Parkway NE Calhoun, GA 30701

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Carrie Parson 1007 E 16th Avenue Ste A Cordele, GA 31015 PROTOCOL NUMBER: **66100 DELEGATING PHYSICIAN:** 

Annie Lombardi 1007 E 16th Avenue Ste A Cordele, GA 31015

Dear Nurse, Parson:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66100**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Annie Lombardi 1007 E 16th Avenue Ste A Cordele, GA 31015

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Semon Patel 4025 Lawrenceville Hwy Ste A Lilburn, GA 30047 PROTOCOL NUMBER: 66299

DELEGATING PHYSICIAN:

Aziz Pirani 4025 Lawrenceville Hwy Ste A Lilburn, GA 30047

Dear Nurse, Patel:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66299**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Aziz Pirani
4025 Lawrenceville Hwy Ste A
Lilburn, GA 30047

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Brendon Paul 1479 Brockett Road Suite 101 Tucker, GA 30084 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66099

Shawn Allen 1479 Brockett Road Suite 101 Tucker, GA 30084

Dear Nurse, Paul:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66099**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Shawn Allen 1479 Brockett Road Suite 101 Tucker, GA 30084

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66094** 

Madeline Peebles 1130 15th Street Augusta, GA 30912

DELEGATING PHYSICIAN: Jack Ellis 1130 15th Street Augusta, GA 30912

Dear Nurse, Peebles:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66094**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Jack Ellis 1130 15th Street Augusta, GA 30912

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Kelly Perdomo 3060 Highlands Parkway Ste E,F Smyrna, GA 30082 PROTOCOL NUMBER: 66141

DELEGATING PHYSICIAN:

Nicolas Duchemin 3060 Highlands Parkway Ste E,F Smyrna, GA 30082

Dear Nurse, Perdomo:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66141**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Nicolas Duchemin 3060 Highlands Parkway Ste E,F Smyrna, GA 30082

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Canelda Perry 6300 Hospital Parkway Ste 300 Johns Creek, GA 30097 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66139

Jayanthi Srinivasiah 6300 Hospital Parkway Ste 300 Johns Creek, GA 30097

Dear Nurse, Perry:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66139**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Jayanthi Srinivasiah 6300 Hospital Parkway Ste 300 Johns Creek, GA 30097

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Amanda Petty 485 Canal Road Brunswick, GA 31525 PROTOCOL NUMBER: 66093

**DELEGATING PHYSICIAN:**Babak Saadatmand
485 Canal Road
Brunswick, GA 31525

Dear Nurse, Petty:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66093**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Babak Saadatmand 485 Canal Road Brunswick, GA 31525

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66107

Christine Peverini 1700 Medical Way Snellville, GA 30078

DELEGATING PHYSICIAN: Arjun Ghodasara 1700 Medical Way Snellville, GA 30078

Dear Nurse, Peverini:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66107**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Arjun Ghodasara 1700 Medical Way Snellville, GA 30078

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Sue Phelps 1980 Friendship Rd Ste 104 Hoschton, GA 30548 PROTOCOL NUMBER: 66166

DELEGATING PHYSICIAN:

Aja McCutchen 1980 Friendship Rd Ste 104 Hoschton, GA 30548

Dear Nurse, Phelps:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66166**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Aja McCutchen 1980 Friendship Rd Ste 104 Hoschton, GA 30548

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Amy Phelps 113 W. Hansell St. Thomasville, GA 31792 PROTOCOL NUMBER: **66201** 

**DELEGATING PHYSICIAN:** 

Matthew Lee 113 W. Hansell St. Thomasville, GA 31792

Dear Nurse, Phelps:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66201**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Matthew Lee
113 W. Hansell St.
Thomasville, GA 31792

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**Executive Director** Daniel R. Dorsey, MBA



Chairperson William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66243

Marilee Platzek 807 S. Isabella Street Sylvester, GA 31791

**DELEGATING PHYSICIAN:** Mana Kasongo-Robinson 807 S. Isabella Street Sylvester, GA 31791

Dear Nurse, Platzek:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is 66243.

You are now eligible to apply for a DEA number. You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the termination of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

Daniel R. Dorsey **Executive Director** 

cc: file

Mana Kasongo-Robinson 807 S. Isabella Street Sylvester, GA 31791

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Melissa Pope 7 John Maddox Drive, NW Rome, GA 30165 PROTOCOL NUMBER: 66174

DELEGATING PHYSICIAN:

Kipp Slicker 7 John Maddox Drive, NW Rome, GA 30165

Dear Nurse, Pope:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66174**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Kipp Slicker

7 John Maddox Drive, NW

Rome, GA 30165

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Liberty Powell 3201 Macon Rd Ste 109 Columbus, GA 31906 PROTOCOL NUMBER: **66310** 

DELEGATING PHYSICIAN: Christopher Reddoch 3201 Macon Rd Ste 109 Columbus, GA 31906

Dear Nurse, Powell:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66310**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Christopher Reddoch 3201 Macon Rd Ste 109 Columbus, GA 31906

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

PROTOCOL NUMBER: 66298

**DELEGATING PHYSICIAN:** 

Hannah Pyron 5300 Bowman Rd Macon, GA 31210

Gabriella Kacsoh 5300 Bowman Rd Macon, GA 31210

Dear Nurse, Pyron:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66298**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Gabriella Kacsoh 5300 Bowman Rd Macon, GA 31210

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66098

Julie Quach 3650 Steve Reynolds Blvd. Duluth, GA 30096

DELEGATING PHYSICIAN: David Meyer 3650 Steve Reynolds Blvd. Duluth, GA 30096

Dear Nurse, Quach:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66098**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
David Meyer

3650 Steve Reynolds Blvd.

Duluth, GA 30096

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Michelle Queen 960 Joe Frank Harris Pkwy SE Cartersville, GA 30120 PROTOCOL NUMBER: 66378

DELEGATING PHYSICIAN: Demareo Webb 960 Joe Frank Harris Pkwy SE Cartersville, GA 30120

Dear Nurse, Queen:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66378**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Demareo Webb 960 Joe Frank Harris Pkwy SE Cartersville, GA 30120

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Nancy Quinn 725 Jesse Jewell Pkwy SE Gainesville, GA 30501 PROTOCOL NUMBER: 66220

DELEGATING PHYSICIAN:

Howard Aldridge 725 Jesse Jewell Pkwy SE Gainesville, GA 30501

Dear Nurse, Quinn:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66220**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Howard Aldridge
725 Jesse Jewell Pkwy SE
Gainesville, GA 30501

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Thomas Raduszewski 1404 River Place Ste 501 Braselton, GA 30517 PROTOCOL NUMBER: **66175** 

**DELEGATING PHYSICIAN:** 

Naga Kommuri 1404 River Place Ste 501 Braselton, GA 30517

Dear Nurse, Raduszewski:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66175**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Naga Kommuri 1404 River Place Ste 501 Braselton, GA 30517

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Linda Range 1791 Mulkey Road Ste 200 Austell, GA 30106 PROTOCOL NUMBER: **66162** 

**DELEGATING PHYSICIAN:** Vidya Soundararajan 1791 Mulkey Road Ste 200 Austell, GA 30106

Dear Nurse, Range:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66162**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Vidya Soundararajan 1791 Mulkey Road Ste 200 Austell, GA 30106

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Evelyn Redding 65 Old Jackson Rd McDonough, GA 30252 PROTOCOL NUMBER: **66144** 

**DELEGATING PHYSICIAN:** 

Gregory Lawson 65 Old Jackson Rd McDonough, GA 30252

Dear Nurse, Redding:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66144**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Gregory Lawson 65 Old Jackson Rd McDonough, GA 30252

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66379

Rotrease Regan 2140 MLK Jr Dr SW Atlanta, GA 30310 **DELEGATING PHYSICIAN:** Keylon Glawson 2140 MLK Jr Dr SW Atlanta, GA 30310

Dear Nurse, Regan:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66379**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Keylon Glawson 2140 MLK Jr Dr SW Atlanta, GA 30310

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jana Revels 3226A Hampton Ave Ste A Brunswick, GA 31520 PROTOCOL NUMBER: 66145

DELEGATING PHYSICIAN:

Michael Butler 3226A Hampton Ave Ste A Brunswick, GA 31520

Dear Nurse, Revels:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66145**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Michael Butler 3226A Hampton Ave Ste A Brunswick, GA 31520

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Renita Richardson 1267 Highway 54 West Ste 2200 Fayetteville, GA 30214 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66178

Bashar Al-Turk 1267 Highway 54 West Ste 2200 Fayetteville, GA 30214

Dear Nurse, Richardson:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66178**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Bashar Al-Turk

1267 Highway 54 West Ste 2200

Fayetteville, GA 30214

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Karen Richards-Reynolds 65 Old Jackson Rd McDonough, GA 30252 PROTOCOL NUMBER: **66177** 

DELEGATING PHYSICIAN: Latora Williams 65 Old Jackson Rd McDonough, GA 30252

Dear Nurse, Richards-Reynolds:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66177**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Latora Williams 65 Old Jackson Rd McDonough, GA 30252

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Desiree Riley 135 N. Park Place Ste 101 Stockbridge, GA 30281 PROTOCOL NUMBER: 66115

DELEGATING PHYSICIAN:

Philip Ploska 135 N. Park Place Ste 101 Stockbridge, GA 30281

Dear Nurse, Riley:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66115**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file Philip Ploska 135 N. Park Place Ste 101 Stockbridge, GA 30281

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

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PROTOCOL NUMBER: 66262

Shauna Robinson 86 South Cobb Dr Marietta, GA 30063

**DELEGATING PHYSICIAN:**Sateesh Devagupthapu
86 South Cobb Dr
Marietta, GA 30063

Dear Nurse, Robinson:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66262**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Sateesh Devagupthapu 86 South Cobb Dr Marietta, GA 30063

**Executive Director** Daniel R. Dorsey, MBA



Chairperson William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66052

Kimberley Rodgers 901 E 18th Street Tifton, GA 31794

**DELEGATING PHYSICIAN:** Alpa Ray 901 E 18th Street Tifton, GA 31794

Dear Nurse, Rodgers:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is 66052.

You are now eligible to apply for a DEA number. You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the termination of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

Daniel R. Dorsey **Executive Director** 

cc: file Alpa Ray 901 E 18th Street Tifton, GA 31794

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66240** 

Pamela Rubio 485 Hwy 29 North Athens, GA 30601

**DELEGATING PHYSICIAN:** Tracey Sills

485 Hwy 29 North Athens, GA 30601

Dear Nurse, Rubio:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66240**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Tracey Sills 485 Hwy 29 North Athens, GA 30601

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Amy Schambach 5353 Reynolds Street, Suite 202 Savannah, GA 31405 PROTOCOL NUMBER: **45619 DELEGATING PHYSICIAN:** 

Charles Leewood 5353 Reynolds Street, Suite 202 Savannah, GA 31405

Dear Nurse, Schambach:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **45619**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Charles Leewood 5353 Reynolds Street, Suite 202 Savannah, GA 31405

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66358

Lindsey Seagraves 1007 Greenfield Dr. Tifton, GA 31794 DELEGATING PHYSICIAN: Andrew Nackashi 1007 Greenfield Dr. Tifton, GA 31794

Dear Nurse, Seagraves:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66358**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Andrew Nackashi 1007 Greenfield Dr. Tifton, GA 31794

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Sonya Shaheed 1365 Clifton Road NE Atlanta, GA 30322 PROTOCOL NUMBER: 66278

**DELEGATING PHYSICIAN:** 

Patrick Bowen 1365 Clifton Road NE Atlanta, GA 30322

Dear Nurse, Shaheed:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66278**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Patrick Bowen

1365 Clifton Road NE Atlanta, GA 30322

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jennilyn Simmons 3345 Hwy 34 E Sharpsburg, GA 30277 PROTOCOL NUMBER: **66271** 

**DELEGATING PHYSICIAN:** 

Brian Lewis 3345 Hwy 34 E

Sharpsburg, GA 30277

Dear Nurse, Simmons:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66271**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Brian Lewis
3345 Hwy 34 E

Sharpsburg, GA 30277

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66273

Michael Slaughter 3100 Perimeter Pkwy. Augusta, GA 30909

DELEGATING PHYSICIAN: Diahann Moore 3100 Perimeter Pkwy. Augusta, GA 30909

Dear Nurse, Slaughter:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66273**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Diahann Moore 3100 Perimeter Pkwy. Augusta, GA 30909

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Aaron Smith 4725 Battlefield Pkwy Ringgold, GA 30736 PROTOCOL NUMBER: **66373** 

**DELEGATING PHYSICIAN:** 

William Ballard 4725 Battlefield Pkwy Ringgold, GA 30736

Dear Nurse, Smith:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66373**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

William Ballard 4725 Battlefield Pkwy Ringgold, GA 30736

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Nicols Smith 840 Professional Center Drive Eastman, GA 31023 PROTOCOL NUMBER: 66283

DELEGATING PHYSICIAN:

Stewart Grizzard 840 Professional Center Drive Eastman, GA 31023

Dear Nurse, Smith:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66283**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Stewart Grizzard 840 Professional Center Drive Eastman, GA 31023

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Latersha St. Louis 3465 Macon Rd. Columbus, GA 31907 PROTOCOL NUMBER: 66285

**DELEGATING PHYSICIAN:** Adebowale Akintayo 3465 Macon Rd. Columbus, GA 31907

Dear Nurse, St. Louis:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66285**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Adebowale Akintayo 3465 Macon Rd. Columbus, GA 31907

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Brantley Standard 801 W Gordon St. Thomaston, GA 30286-3426 PROTOCOL NUMBER: **66306** 

**DELEGATING PHYSICIAN:** 

Bader Kashlan 801 W Gordon St.

Thomaston, GA 30286-3426

Dear Nurse, Standard:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66306**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Bader Kashlan 801 W Gordon St.

Thomaston, GA 30286-3426

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Brantley Standard 1070 Country Farm Road Zebulon, GA 30295 PROTOCOL NUMBER: 66349

DELEGATING PHYSICIAN:

Edward Aiken 1070 Country Farm Road Zebulon, GA 30295

Dear Nurse, Standard:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66349**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Edward Aiken

1070 Country Farm Road Zebulon, GA 30295

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Tara Stevens 5310 Matt Highway, Suite 103 Cumming, GA 30028 PROTOCOL NUMBER: **66270** 

**DELEGATING PHYSICIAN:**Morgan Garrett
5310 Matt Highway, Suite 103
Cumming, GA 30028

Dear Nurse, Stevens:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66270**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Morgan Garrett 5310 Matt Highway, Suite 103 Cumming, GA 30028

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66287

Alison Stratton 3696 Wheeler Road Augusta, GA 30909

DELEGATING PHYSICIAN: David Squires 3696 Wheeler Road Augusta, GA 30909

Dear Nurse, Stratton:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66287**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

David Squires 3696 Wheeler Road Augusta, GA 30909

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Nicole Swiger 6000 Joe Frank Harris Pkwy NW, Ste C Adairsville, GA 30103 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66195

Michael Land

 $6000\, Joe \, Frank \, Harris \, Pkwy \, NW, \, Ste \, C$ 

Adairsville, GA 30103

Dear Nurse, Swiger:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66195**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Michael Land 6000 Joe Frank Harris Pkwy NW, Ste C Adairsville, GA 30103

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Hannah Szell 3965 Holcomb Bridge Rd., Suite 100 Peachtree Corners, GA 30092

Dear Nurse, Szell:

PROTOCOL NUMBER: 66268

**DELEGATING PHYSICIAN:** 

Nicholas Kongoasa 3965 Holcomb Bridge Rd., Suite 100 Peachtree Corners, GA 30092

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66268**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Nicholas Kongoasa 3965 Holcomb Bridge Rd., Suite 100 Peachtree Corners, GA 30092

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66369

**DELEGATING PHYSICIAN:** 

Terri Tebo 1449 Temple Road Bremen, GA 30110

Deborah Hansard 1449 Temple Road Bremen, GA 30110

Dear Nurse, Tebo:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66369**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Deborah Hansard 1449 Temple Road Bremen, GA 30110

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Megan Thomas 2151 W. Spring Street Monroe, GA 30655 PROTOCOL NUMBER: **66284** 

**DELEGATING PHYSICIAN:** Rishi Sareen

2151 W. Spring Street Monroe, GA 30655

Dear Nurse, Thomas:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66284**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Rishi Sareen 2151 W. Spring Street Monroe, GA 30655

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66288

Morgan Thomas 820 2nd Ave. Eastman, GA 31023 DELEGATING PHYSICIAN: Ronnie Smith 820 2nd Ave. Eastman, GA 31023

Dear Nurse, Thomas:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66288**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Ronnie Smith 820 2nd Ave. Eastman, GA 31023

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Chiquita Thomas 1719 Russell Parkway, Suite 700 Warner Robins, GA 31088 PROTOCOL NUMBER: **66304** 

**DELEGATING PHYSICIAN:** 

Dinakara Shetty 1719 Russell Parkway, Suite 700 Warner Robins, GA 31088

Dear Nurse, Thomas:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66304**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Dinakara Shetty 1719 Russell Parkway, Suite 700 Warner Robins, GA 31088

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Amy Thomason 110 Banks Crossing Dr., Suite 110 Commerce, GA 30529 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66274

Tracey Sills

110 Banks Crossing Dr., Suite 110 Commerce, GA 30529

Dear Nurse, Thomason:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66274**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Tracey Sills 110 Banks Crossing Dr., Suite 110 Commerce, GA 30529

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Wendy Thompson 902 N 7th Street

Cordele, GA 31015

PROTOCOL NUMBER: 66269

**DELEGATING PHYSICIAN:** 

Sheila Southerland 902 N 7th Street Cordele, GA 31015

Dear Nurse, Thompson:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66269**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Sheila Southerland

> 902 N 7th Street Cordele, GA 31015

**Executive Director** Daniel R. Dorsey, MBA



Chairperson William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66267

Holly Thornton 1199 Prince Avenue Athens, GA 30606

**DELEGATING PHYSICIAN:** Clayton Dunford 1199 Prince Avenue Athens, GA 30606

Dear Nurse, Thornton:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is 66267.

You are now eligible to apply for a DEA number. You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the termination of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

Daniel R. Dorsey **Executive Director** 

cc: file

Clayton Dunford 1199 Prince Avenue Athens, GA 30606

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Lisa Tillman 3300 Macon Tech Dr., Building I, Suite 211 Macon, GA 31206 PROTOCOL NUMBER: 66356

DELEGATING PHYSICIAN:

Matthew Astin

3300 Macon Tech Dr., Building I, Suite 211

Macon, GA 31206

Dear Nurse, Tillman:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66356**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Matthew Astin 3300 Macon Tech Dr., Building I, Suite 211 Macon, GA 31206

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66388

Elisha Tribble 350 Hospital Dr. Macon, GA 31217

DELEGATING PHYSICIAN: Christopher Hogan 350 Hospital Dr. Macon, GA 31217

Dear Nurse, Tribble:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66388**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Christopher Hogan 350 Hospital Dr. Macon, GA 31217

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66196** 

Carmen Turner 15320 Co. Rd 129 Alapaha, GA 31622

DELEGATING PHYSICIAN: Phillip Miller 15320 Co. Rd 129 Alapaha, GA 31622

Dear Nurse, Turner:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66196**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Phillip Miller 15320 Co. Rd 129 Alapaha, GA 31622

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Allison Voight 35 Jesse Hill Jr. Drive Atlanta, GA 30303 PROTOCOL NUMBER: 66363

DELEGATING PHYSICIAN:

Mark Griffiths 35 Jesse Hill Jr. Drive Atlanta, GA 30303

Dear Nurse, Voight:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66363**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Mark Griffiths
35 Jesse Hill Jr. Drive

Atlanta, GA 30303

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Marysa Wallace 132 Old Norton Road, Suite 200 Fayetteville, GA 30215

**DELEGATING PHYSICIAN:** 

PROTOCOL NUMBER: 66272

Shyam Khanwani 132 Old Norton Road, Suite 200 Fayetteville, GA 30215

Dear Nurse, Wallace:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66272**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Shyam Khanwani

132 Old Norton Road, Suite 200

Fayetteville, GA 30215

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Marysa Wallace 747 S. 8th Street, Suite C Griffin, GA 30224 PROTOCOL NUMBER: 66275

DELEGATING PHYSICIAN:

Rao Moravineni 747 S. 8th Street, Suite C Griffin, GA 30224

Dear Nurse, Wallace:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66275**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Rao Moravineni 747 S. 8th Street, Suite C Griffin, GA 30224

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Judy Weaver 1007 Greenfield Drive Tifton, Ga 31794 PROTOCOL NUMBER: 66368

DELEGATING PHYSICIAN:

Andrew Nackashi 1007 Greenfield Drive Tifton, Ga 31794

Dear Nurse, Weaver:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66368**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Andrew Nackashi
1007 Greenfield Drive

Tifton, Ga 31794

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66276

Stephanie Wells 1968 Peachtree Rd. NW Atlanta, GA 30309

**DELEGATING PHYSICIAN:** Keith Peacock

1968 Peachtree Rd. NW Atlanta, GA 30309

Dear Nurse, Wells:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66276**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file
Keith Peacock
1968 Peachtree Rd. NW

Atlanta, GA 30309

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Joshua Wendling 3501 Baker Road NW, Suite 100 Acworth, GA 30101 DELEGATING PHYSICIAN:

PROTOCOL NUMBER: 66317

Steven Lenhard 3501 Baker Road NW, Suite 100 Acworth, GA 30101

Dear Nurse, Wendling:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66317**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Steven Lenhard

3501 Baker Road NW, Suite 100

Acworth, GA 30101

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66161** 

Elizabeth Wheeler 4222 Fairbanks Dr Oakwood, GA 30566

DELEGATING PHYSICIAN: Andrew Reisman 4222 Fairbanks Dr Oakwood, GA 30566

Dear Nurse, Wheeler:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66161**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Andrew Reisman 4222 Fairbanks Dr Oakwood, GA 30566

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Laura Whitfield 21 Commerce Parkway Adairsville, GA 30103 PROTOCOL NUMBER: **66293** 

DELEGATING PHYSICIAN:

Byron Littlefield 21 Commerce Parkway Adairsville, GA 30103

Dear Nurse, Whitfield:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66293**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Byron Littlefield 21 Commerce Parkway Adairsville, GA 30103

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Kemaya Wilburn 777 Hemlock Street Macon, Ga 31201 PROTOCOL NUMBER: 66256

DELEGATING PHYSICIAN:

Leo Noragbon 777 Hemlock Street Macon, Ga 31201

Dear Nurse, Wilburn:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66256**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA</u>, so that your request can be processed.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Leo Noragbon 777 Hemlock Street Macon, Ga 31201

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66357

Savannah Wilkey 6120 Alabama Hwy Ringgold, GA 30736

**DELEGATING PHYSICIAN:**Dorel Bidiuc

6120 Alabama Hwy Ringgold, GA 30736

Dear Nurse, Wilkey:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66357**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Dorel Bidiuc 6120 Alabama Hwy Ringgold, GA 30736

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Jennifer Williams 1365 Clifton Rd NE - Bldg C Atlanta, GA 30322 PROTOCOL NUMBER: **66316** 

**DELEGATING PHYSICIAN:** 

Jason Romanick 1365 Clifton Rd NE - Bldg C Atlanta, GA 30322

Dear Nurse, Williams:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66316**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Jason Romanick 1365 Clifton Rd NE - Bldg C Atlanta, GA 30322

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: 66204

Te'Naria Williams 212A Belleuve Rd Dublin, GA 31021

DELEGATING PHYSICIAN: Mark Durden 212A Belleuve Rd Dublin, GA 31021

Dear Nurse, Williams:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66204**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey** Executive Director

cc: file

Mark Durden 212A Belleuve Rd Dublin, GA 31021

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Emily Windham 11975 Morris Rd Ste. 210 Alpharetta, GA 30005 PROTOCOL NUMBER: **66255** 

**DELEGATING PHYSICIAN:** Albin Oh

11975 Morris Rd Ste. 210 Alpharetta, GA 30005

Dear Nurse, Windham:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66255**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov .

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file
Albin Oh
11975 Morris Rd Ste. 210
Alpharetta, GA 30005

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Carla Winn 1007 Mary Street Waycross, GA 31503 PROTOCOL NUMBER: 66193

**DELEGATING PHYSICIAN:**Kayln Lane
1007 Mary Street
Waycross, GA 31503

Dear Nurse, Winn:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66193**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Kayln Lane

1007 Mary Street Waycross, GA 31503

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Tiara Woodard 1355 South Park Street Carrollton, GA 30117 PROTOCOL NUMBER: **66194** 

**DELEGATING PHYSICIAN:** 

Serena Miller 1355 South Park Street Carrollton, GA 30117

Dear Nurse, Woodard:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66194**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Serena Miller 1355 South Park Street Carrollton, GA 30117

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Sammy Yassin 1201 Peachtree St 400 Colony Sq, Ste 100 Atlanta, GA 30361

Atlanta, GA 30361

Dear Nurse, Yassin:

**DELEGATING PHYSICIAN:** 

PROTOCOL NUMBER: 66160

DeAnn Bing 1201 Peachtree St 400 Colony Sq, Ste 100 Atlanta, GA 30361

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66160**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

DeAnn Bing 1201 Peachtree St 400 Colony Sq, Ste 100 Atlanta, GA 30361

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Stephanie Yelverton 3421 Mike Padgett Hwy Augusta, GA 30906 PROTOCOL NUMBER: 66386

**DELEGATING PHYSICIAN:** Elizabeth Messulam 3421 Mike Padgett Hwy

Augusta, GA 30906

Dear Nurse, Yelverton:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66386**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Elizabeth Messulam 3421 Mike Padgett Hwy Augusta, GA 30906

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

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January 25, 2024

Cori Young 560 Lanier Ave East Fayetteville, Ga 30214 PROTOCOL NUMBER: **66167** 

**DELEGATING PHYSICIAN:**Jeffrey Dowis, MD
560 Lanier Ave East
Fayetteville, Ga 30214

Dear Nurse, Young:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66167**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the <u>termination</u> of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Jeffrey Dowis, MD 560 Lanier Ave East Fayetteville, Ga 30214

**Executive Director** Daniel R. Dorsey, MBA



Chairperson William K. Bostock, MD

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January 25, 2024

PROTOCOL NUMBER: 66242

Joshua Young 1625 Hardeman Ave. Macon, GA 31201

**DELEGATING PHYSICIAN:** William Barnes 1625 Hardeman Ave. Macon, GA 31201

Dear Nurse, Young:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is 66242.

You are now eligible to apply for a DEA number. You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.

Also, on our website please find Form B – the Termination Notification form. This form should be completed and returned to our office within ten (10) working days of the date of the termination of the nurse protocol agreement between the delegating physician and the APRN.

Our website is www.medicalboard.georgia.gov.

If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

Daniel R. Dorsey **Executive Director** 

cc: file

William Barnes 1625 Hardeman Ave. Macon, GA 31201

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

Fang Yu 1240 Hwy 54 W, Building 300 Suite 310 Fayetteville, GA 30214

Dear Nurse, Yu:

PROTOCOL NUMBER: 66336

**DELEGATING PHYSICIAN:**Francis McCafferty, Jr
1240 Hwy 54 W, Building 300 Suite 310
Fayetteville, GA 30214

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66336**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file

Francis McCafferty, Jr 1240 Hwy 54 W, Building 300 Suite 310 Fayetteville, GA 30214

**Executive Director** Daniel R. Dorsey, MBA



**Chairperson**William K. Bostock, MD

Vice Chairperson Sreeni Gangasani, MD

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January 25, 2024

PROTOCOL NUMBER: **66206** 

Kimberly Zaydel 791 Atlanta St Roswell, GA 30075

**DELEGATING PHYSICIAN:**Sohaib Shamsi
791 Atlanta St
Roswell, GA 30075

Dear Nurse, Zaydel:

The Georgia Composite Medical Board reviewed your APRN Protocol Agreement and determined that it meets the provisions of O.C.G.A. 43-34-25. A protocol agreement under O.C.G.A. 43-34-25 supersedes any protocol agreement under O.C.G.A. 43-34-23 that the delegating physician may have with the same APRN. Your APRN Protocol number is **66206**.

You are now <u>eligible</u> to apply for a DEA number. <u>You may be required to submit a copy of this letter as proof of your protocol review to the DEA, so that your request can be processed.</u>

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If you have any questions or concerns, please feel free to send an email to DCH.APRN@DCH.GA.GOV.

Sincerely,

**Daniel R. Dorsey**Executive Director

cc: file Sohaib Shamsi 791 Atlanta St

Roswell, GA 30075