May 2017 Public Board Actions List

Georgia Composite Medical Board
Attn: Ms. Latisha Bias, Public Records Unit
2 Peachtree Street, N.W., 36th Floor
Atlanta, Georgia 30303-3465
PH: (404) 657-3194
FX: (770) 357-1896
Email: latisha.bias@dch.ga.gov

The Board issued Four public orders in May 2017. To view each Board order, click on the licensee's name below.

1. Barry Franklin Powers, R.C.P.
   005863
   Respiratory Care Professional
   Voluntary Surrender

2. Kenneth W. Byers, M.D.
   20969
   Physician
   Public Board Order Terminating Order for Reinstatement

3. Leonid Macheret, M.D.
   25459
   Physician
   Board Order Terminating Public Consent Order

4. Arlon Harm Jahnke, M.D.
   37839
   Physician
   Voluntary Surrender
BEFORE THE GEORGIA COMPOSITE MEDICAL BOARD

STATE OF GEORGIA

IN THE MATTER OF: *
* BARRY FRANKLIN POWERS, R.C.P. *
License No. 005863, *
Respondent. *

VOLUNTARY SURRENDER

I, BARRY FRANKLIN POWERS, holder of License No. 005863 to practice respiratory care in the State of Georgia pursuant to O.C.G.A. Ch. 34, T. 43, as amended, hereby freely, knowingly and voluntarily surrender said license to the Georgia Composite Medical Board. I hereby acknowledge that this surrender shall be considered to be and have the same effect as a revocation of my license, and I knowingly forfeit and relinquish all right, title and privilege of practicing respiratory care in the State of Georgia, unless and until such time as my license may be reinstated, in the sole discretion of the Board.

I acknowledge that I have read and understand the contents of this Voluntary Surrender. I understand that I have a right to a hearing in this matter, and I hereby freely, knowingly and voluntarily waive such right. I also understand that should the Board entertain any request for reinstatement, the Board shall have access to any investigative or medical information regarding me. I further understand that upon applying for reinstatement, it shall be incumbent upon me to demonstrate to the satisfaction of the Board that I am able to practice respiratory care with reasonable skill and safety to patients, and that the Board may investigate my conduct since the time of the surrender of my license. I understand and agree that any reinstatement of my license to practice respiratory care is a matter in the sole discretion of the Board and that the Board may deny any such reinstatement without identifying a reason for said denial.

This surrender shall become effective upon acceptance and docketing by the Board. I understand that this document will be considered to be a public record evidencing disciplinary
action, and that this action shall be considered to be and may be disseminated as a final order of the Board.

[As to Respondent's signature:]  
Sworn to and subscribed before me  
This 29th day of April, 2017.

BARRY FRANKLIN POWERS, R.C.P.  
Respondent

ACCEPtANCE OF SURRENDER

The voluntary surrender of License No. 005863 is hereby accepted by the Georgia Composite Medical Board, this 29th day of April, 2017.

GEORGIA COMPOSITE MEDICAL BOARD

BY:  
JOHN ANTLAS, M.D.  
Chairperson

ATTEST:  
ROBERT JEFFERLY  
Executive Director
BEFORE THE GEORGIA COMPOSITE MEDICAL BOARD

STATE OF GEORGIA

IN THE MATTER OF:

KENNETH W. BYERS, M.D.
License No. 20969,
Respondent.

PUBLIC BOARD ORDER TERMINATING
ORDER FOR REINSTATAMENT

1. The Georgia Composite Medical Board ("Board") entered a Public Consent Order for Reinstatement ("Order") in the above-styled matter on or about June 19, 2014, Docket No. 10130036, which placed terms and conditions on Respondent’s license to practice medicine in the State of Georgia. The Public Consent Order for Reinstatement was amended on August 12, 2015 to allow for the use of physician assistants and nurse practitioners.

2. On or about March 14, 2017, the Board received a petition from the Respondent to terminate probation. The Board reviewed the petition and Respondent’s compliance with the terms of the Order and determined Respondent has complied with the terms and conditions of probation.

Based on the foregoing, the Board hereby terminates the probation of Respondent’s license. Respondent’s license is returned to unrestricted status and is in good standing.

SO ORDERED, this 4th day of May, 2017.

GEORGIA COMPOSITE MEDICAL BOARD

BY: JOHN S. ANTAGS, M.D.
Chairperson

ATTEST: ROBERT JEFFEY, MBA
Executive Director
BEFORE THE GEORGIA COMPOSITE MEDICAL BOARD

STATE OF GEORGIA

IN THE MATTER OF:

LEONID MACHERET, M.D.,
License No. 25459,
Respondent.

BOARD ORDER TERMINATING PUBLIC CONSENT ORDER

1.

The Georgia Composite Medical Board ("Board") entered a Public Consent Order ("Order") in the above-styled matter on or about March 29, 2012, Docket No. 20120042, which placed Respondent’s license to practice medicine in the State of Georgia under a public order.

2.

On or about April 3, 2017, the Board received a petition from the Respondent to terminate the Order. The Board reviewed the petition and Respondent’s compliance with the terms of the Order and determined Respondent has complied with the terms and conditions of said Order.

Based on the foregoing, the Board hereby terminates the restriction on Respondent’s license. Respondent’s license is returned to unrestricted status and is in good standing.

SO ORDERED, this 18th day of May, 2017.

GEORGIA COMPOSITE MEDICAL BOARD

BY: JOHN S. ANTALIS, M.D.
Chairperson

ATTEST: ROBERT JEFFERY, MBA
Executive Director
BEFORE THE GEORGIA COMPOSITE MEDICAL BOARD

STATE OF GEORGIA

IN THE MATTER OF:

ARLON HARM JAHNKE, M.D.
License No. 037839,
Respondent.

VOLUNTARY SURRENDER

I, ARLON HARM JAHNKE, holder of License No. 037839 to practice medicine in the State of Georgia pursuant to O.C.G.A. Ch. 34, T. 43, as amended, hereby freely, knowingly and voluntarily surrender said license to the Georgia Composite Medical Board. I hereby acknowledge that this surrender shall be considered to be and have the same effect as a revocation of my license, and I knowingly forfeit and relinquish all right, title and privilege of practicing medicine in the State of Georgia, unless and until such time as my license may be reinstated, in the sole discretion of the Board.

I acknowledge that I have read and understand the contents of this Voluntary Surrender. I understand that I have a right to a hearing in this matter, and I hereby freely, knowingly and voluntarily waive such right. I also understand that should the Board entertain any request for reinstatement, the Board shall have access to any investigative or medical information regarding me. I further understand that upon applying for reinstatement, it shall be incumbent upon me to demonstrate to the satisfaction of the Board that I am able to practice medicine with reasonable skill and safety to patients, and that the Board may investigate my conduct since the time of the surrender of my license. I understand and agree that any reinstatement of my license to practice medicine is a matter in the sole discretion of the Board and that the Board may deny any such reinstatement without identifying a reason for said denial. I understand that I cannot apply for reinstatement for two years from the date of the surrender of my license under the rules of the Board.

This surrender shall become effective upon acceptance and docketing by the Board. I understand that this document will be considered to be a public record evidencing disciplinary
action, and that this action shall be considered to be and may be disseminated as a final order of the Board.

[As to Respondent’s signature:]
Sworn to and subscribed before me
This 18 day of May, 2017.

ARLON HARM JAHNKE, M.D.
Respondent

ACCEPTANCE OF SURRENDER

The voluntary surrender of License No. 037839 is hereby accepted by the Georgia Composite Medical Board, this 25th day of May, 2017.

GEORGIA COMPOSITE MEDICAL BOARD

BY:  
JOHN ANTALIS, M.D.
Chairperson

ATTEST:  
ROBERT JEFFERY
Executive Director