

Board of Licensure in Medicine
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**Maine Board of Licensure in Medicine
Minutes of March 11, 2025
8:00 a.m. – 11:50 a.m.**

Board Members Present: Secretary Christopher R. Ross, PA; Holly Fanjoy, MD; Renee M. Fay-LeBlanc, MD; David H. Flaherty, PA; Public Member Gregory Jamison, RPh; Noah Nesin, MD; Anthony T. Ng, MD; and Public Member Lynne M. Weinstein

Board Members Absent: Chair Maroulla S. Gleaton, MD, Brad Waddell, MD and Public Member Jonathan Sahrbeck

Board Staff Present: Executive Director Timothy E. Terranova; Assistant Executive Director Valerie Hunt; Medical Director Paul N. Smith, MD; Consumer Assistance Specialist Faith McLaughlin; Investigative Secretary Danielle Magioncalda; Administrative Assistant Maureen S. Lathrop; Licensing Specialist Savannah Okoronkwo and Licensing Specialist Nathan Fitts

Attorney General’s Office Staff Present: Assistant Attorney General Jennifer Willis

The Board met in public session except during the times listed below which were held in executive session. Executive sessions are held to consider matters which, under statute, are confidential (*e.g.*, 1 M.R.S. § 405; 10 M.R.S. § 8003-B; 22 M.R.S. § 1711-C; 24 M.R.S. § 2510; 32 M.R.S. § 3282-A). During the public session of the meeting, actions were taken on all matters discussed during executive session. In addition, though not required by law, the meeting was made virtually available to the public not attending the meeting in person using the platform Zoom. A link for the public to access the Board meeting virtually was included on the Board’s agenda and posted on its website.

EXECUTIVE SESSIONS

PURPOSE

None

RECESSES

9:19 a.m. – 9:30 a.m.

Recess

10:35 a.m. – 10:46 a.m.

Recess

I. Call to Order

Mr. Ross called the meeting to order at 8:00 a.m.

A. Amendments to Agenda

Ms. Weinstein moved to amend a consent agreement in the matter of CR24-74 and a consent agreement in the matters of CR22-121 and CR24-256 onto the agenda and to amend the initial license application of Stephen A. Lazarou, MD off the agenda. Mr. Flaherty seconded the motion, which passed unanimously.

B. Scheduled Agenda Items

1. 10:00 a.m. Meeting with Commissioner Cohen

II. Licensing

A. Applications for Individual Consideration

1. Initial Applications

a. Stephen A. Lazarou, MD (amended off agenda)

b. Marlo Pichardo, PA

Dr. Fanjoy moved to issue PA Pichardo a citation and grant her license upon payment of the fine. Dr. Fay-LeBlanc seconded the motion, which passed unanimously.

c. Glenn W. Currier, MD

Dr. Fay-LeBlanc moved to grant Dr. Currier's license. Dr. Fanjoy seconded the motion, which passed 7-0-0-1. Dr. Ng was recused from the matter and left the room.

d. P. Kent Harman, MD

Dr. Fanjoy moved to grant Dr. Harman's license. Mr. Flaherty seconded the motion, which passed unanimously.

2. Reinstatement Applications (none)

3. Renewal Applications

a. Glauco M. Maresca, MD

Dr. Fanjoy moved to grant Dr. Maresca's license renewal. Dr. Ng seconded the motion, which passed unanimously.

b. Ralph C. Hamill, MD

Dr. Fay-LeBlanc moved to issue Dr. Hamill a citation and grant his license renewal upon payment of the fine. Ms. Weinstein seconded the motion, which passed unanimously.

4. Requests to Convert to Active Status

a. Humaira Ashraf, MD

Dr. Ng moved to accept Dr. Ashraf's withdrawal of her request for conversion to an active license because evidence of clinical skills was insufficient and to communicate to her that

with an inactive license, she may only teach in the classroom setting and in the absence of patients. Ms. Weinstein seconded the motion, which passed unanimously.

5. Requests to Withdraw License/License Application

a. Kristin Ellen Raven, MD

Dr. Fay-LeBlanc moved to accept Dr. Raven's request to withdraw her license application. Dr. Fanjoy seconded the motion, which passed unanimously.

b. Frank A. Stackhouse, MD

Dr. Fay-LeBlanc moved to accept Dr. Stackhouse's request to withdraw his license application. Dr. Ng seconded the motion, which passed unanimously.

6. Requests for Collaborative/Practice Agreements

a. Kathleen I. O'Brien, PA

Dr. Fanjoy moved to approve PA O'Brien's practice agreement. Dr. Fay-LeBlanc seconded the motion, which passed unanimously.

B. Other Items for Discussion (none)

C. Citations and Administrative Fines (none)

D. Licensing Status Report

This material was presented for informational purposes. No Board action was required.

E. Licensing Feedback (none)

F. Complaint Status Report

This material was presented for informational purposes. No Board action was required.

III. Board Orders/Consent Agreements/Resolution Documents for Review

A. CR24-74 Jesus M. Gandarillas, PA

Dr. Nesin moved to approve and ratify the consent agreement. Mr. Jamison seconded the motion, which passed unanimously.

B. CR22-121/CR24-256 Bernard H. Perlman, MD

Dr. Fay-LeBlanc moved to approve and ratify the consent agreement. Mr. Flaherty seconded the motion, which passed unanimously.

IV. Complaints

1. CR23-213

Dr. Fanjoy moved to administratively dismiss the complaint without prejudice. Dr. Fay-LeBlanc seconded the motion, which passed unanimously.

MOTION: The licensee received disciplinary action in Mississippi for failure to establish a valid physician-patient relationship and utilizing a questionnaire in lieu of a physical examination in her telemedicine practice. She failed to report the discipline to the Maine Board of Licensure in Medicine (BOLIM) as well as subsequent disciplinary actions in other states. As part of the Interstate Medical Licensure Compact, her license was automatically suspended. She submitted ten telemedicine charts of Maine patients that utilized the same instant messaging platform, and those charts indicate nonadherence to Chapter 11 telemedicine standards. In response to her Mississippi disciplinary order, she has completed the PROBE course offered by CPEP and has submitted her current standard operating procedure outlining medical provider scope of practice. She has received disciplinary action in multiple other states that requires compliance with the Mississippi order and individual states' telemedicine rules. BOLIM ordered an expert review of her submitted medical records of Maine patients and the expert review identified multiple violations in standard of care. The licensee answered questions from BOLIM and indicated that the company has made changes to be in compliance with telemedicine rules and developed multiple protocols to improve patient care. At BOLIM's request, she voluntarily converted her license to inactive status, and she completed a competency evaluation through CPEP. This evaluation determined that she is safe to practice with recommendation for structured remediation. The IMLC license cannot be renewed, and the licensee has not submitted an application for licensure at this time.

2. CR23-285

Dr. Fanjoy moved to issue the physician a citation and dismiss the complaint upon receipt of payment. Dr. Ng seconded the motion, which passed unanimously.

MOTION: The Board initiated this complaint after receiving notification of a termination from employment during a probationary period based on failure to meet standards of clinical practice and patient safety concerns. Additional information indicated concerns with lengthy operative times, extended tourniquet applications, high number of intra-operative radiography use, patients requiring follow-up care, and potential issues with professionalism. The licensee responds that he was the subject of discrimination, racism and implicit bias. He includes statements from two operating room nurses supporting his clinical care and professionalism. Upon request of the Board, he underwent a neuropsychological evaluation which did not identify any cognitive or psychiatric impairment that would interfere with his ability to practice. He had an expert review of nine cases that did not identify any violations of professional behavior or incompetent medical treatment.

3. CR24-6

Dr. Nesin moved to dismiss the complaint. Mr. Flaherty seconded the motion, which passed unanimously.

MOTION: The complainant underwent an elective pelvic surgery with very serious bleeding complication which required one additional surgery at the original facility and then emergency transfer to another facility for an additional surgery. The complainant asserts that:

- The informed consent process was perfunctory
- The licensee has not followed up with the complainant
- The licensee has harmed other family members of the complainant (there are not complaints related to those allegations)
- The licensee has not contacted the complainant regarding pathology report from the surgery
- The complainant has suffered pain, lifestyle impact and emotional trauma as a result of the experience

The licensee responds that the informed consent process was thorough, that the surgery was appropriate, that the licensee sent a letter to the patient and called the patient twice and that the licensee followed the status of the complainant during the hospitalization at the second facility. The licensee does provide some detail related to one of the unrelated cases referenced by the complainant.

The surgery was complicated by profound post-operative bleeding, and symptoms of pain, tachycardia, hypotension and pale color. The licensee performed a second operation to control bleeding but after closure noted new bleeding in the drainage tubes and called for a surgical consult, who performed additional surgery to control bleeding.

The licensee has indicated a plan to retire and requests conversion to an Emeritus status, and an outside expert review found no deficiencies in care or documentation.

4. CR24-22

Mr. Jamison moved to dismiss the complaint. Dr. Ng seconded the motion, which passed unanimously.

MOTION: This is a progress report based on a complaint from a mother about the treatment of her minor child who had experienced a buckle fracture. The complainant was concerned about the licensee's communication with her about treatment plans. The licensee is an ER physician. The licensee recommended a certain type of treatment while an orthopedist seen subsequently administered a different treatment. The Board decided to investigate further and recommend the licensee take a course in patient communication. The licensee completed this course on January 22, 2025, and has sent the Board a synopsis of what was learned in the course and how it might be applied to practice.

5. CR24-125

Dr. Fay-LeBlanc moved to dismiss the complaint. Dr. Fanjoy seconded the motion, which passed 7-0-0-1. Dr. Nesin was recused from the matter and left the room.

MOTION: The licensee was reported to the Board by their employer for concerns around controlled substance prescribing, HIPAA violation and unprofessional conduct (boundary

violation with a patient). The licensee agrees that he was not able to keep up with universal precautions in prescribing – having a large panel and inheriting a lot of patients on controlled substances and not having adequate staffing support. He also explains the circumstance around the HIPAA violation and about the specific patient relationship and what transpired. He admits that he may have crossed a boundary but is adamant that no physical relationship ever existed with any patient. This allegation was made by another patient who was upset that the licensee would not prescribe him Ativan and was never substantiated. Since this report was made, the licensee has done a number of things. He has taken CME in prescribing, addiction medicine, HIPAA and boundaries. He has engaged with CCPM prescribing program and has successfully weaned over 100 patients off controlled substances. A letter of support indicates that he has been the most successful provider in the program to date. He has several additional support staff, so at a systems level is better able to manage the patient load. He has had a §3286 evaluation that was very reassuring, and no additional treatment has been recommended. The licensee has done everything the Board would ask him to do in this situation and has already showed great improvement.

6. CR24-200

Dr. Nesin moved to offer the licensee a consent agreement to include a civil penalty of \$100.00, a suspension of the licensee’s license until successful completion of a minimum of eight weeks of Board-approved residential or partial hospitalization treatment program and submission of a return-to-work plan for Board approval. If the physician is deemed fit to return to practice, he will be subject to a license probation with conditions for at least five years. Dr. Fay-LeBlanc seconded the motion, which passed unanimously.

7. CR24-208 Katelyn E. Staring, MD

Dr. Ng moved to dismiss the complaint with a letter of guidance. Dr. Fay-LeBlanc seconded the motion, which passed unanimously.

MOTION: The patient’s complaint stated that the physician failed to report the patient’s allegation to her of the patient being sexually assault by another physician. The physician responded to the complaint and explained when the patient made a reasonably clear statement of the sexual assault allegation against the other physician to her and how she promptly reported that allegation within her health care institution. Following this internal report she took no further action.

The guidance is as follows: Every physician should be familiar with and personally responsible for their statutory mandatory reporting responsibilities regarding various specified types of unfitness of, or misconduct by, other physicians and physician assistants, including sexual misconduct. A copy of this statutory provision is attached for your reference. Reporting a physician’s reasonable knowledge of such issues internally within a physician’s organization may be appropriate but does not replace the physician’s mandatory reporting obligations to the relevant Board under the attached statutory provision.

8. CR24-215

Dr. Fanjoy moved to dismiss the complaint. Dr. Fay-LeBlanc seconded the motion, which passed unanimously.

MOTION: The mother of a child alleges that the licensee failed to maintain a safe environment in the emergency department for herself and the patient. She claims that the licensee allowed the patient's father into the room despite being told there was a protection order. The child was seen in the ED for a facial laceration sustained by a dog bite. The licensee indicates that he was not aware of the protection order involving the child and there was no documentation provided. When the child was to be discharged to transfer to another facility, the father had arrived and was in the room. The licensee determined that the situation was safe and interactions were appropriate and that removal of the father may have caused more harm and disruption and delayed treatment of the patient. The treatment rendered by the licensee was within the standard of care. The licensee satisfactorily answered questions from the Board regarding policies surrounding these situations and the hospital response to the case.

9. CR24-234

Dr. Ng moved to dismiss the complaint. Mr. Jamison seconded the motion, which passed unanimously.

MOTION: The complaint alleged that:

- The licensee did not provide a refill for the complainant's medication for three weeks
- The entity for which the licensee works is not refilling prescriptions in a timely manner, causing him to run out of medications
- After two weeks, the refill was not sent to the pharmacy
- He spoke with the pharmacy several times and was told the refill was not processed on the physician side
- He feels that the "the buck stops with the physician"

The licensee is an internal medicine physician who had been seeing the complainant as a patient. He indicated that he and the office did not receive any request from the pharmacy for refills. The licensee stated that once they were notified, he immediately looked into the delay with refills. He did cite some confusion regarding two medications, one related to uncertainty if prescriptions had already been picked up by the complainant, and the second related to dosage of another medication that the complainant had originally self-prescribed. Both medications were eventually refilled. The licensee expressed appreciation for the frustration the complainant experienced.

Review of the records and accompanying documentation shows that the licensee and his office did respond timely once he was aware of the need for refill of medications as well as clarification of the two medication issues. The documentation is detailed.

10. CR24-237

Mr. Flaherty moved to dismiss the complaint. Dr. Ng seconded the motion, which passed unanimously.

MOTION: The complainant asserts that the licensee exhibited unprofessional behavior and was dismissive of the complainant. The licensee's response and medical records indicate appropriate medical care and decision making in a rather complex patient. It appeared in the medical record August 30, 2024, that the licensee recognized the complainant's displeasure with the visit. He

expressed concern regarding the patient's behavior and brought it to the attention of practice management as documented in the record. No rebuttal was submitted to the licensee's response.

11. CR24-240

Ms. Weinstein moved to dismiss the complaint. Dr. Fanjoy seconded the motion, which passed unanimously.

MOTION: A physician assistant continued to practice in a group setting after being advised by Board staff that she did not submit the appropriate paperwork required. Review of the records, including substantial documentation and explanations from the licensee, demonstrated her reluctance to continue practicing, yet her supervisor was advising her repeatedly to do so and continued to enter her into the work rotation. Her supervisor failed to escalate the matter to management immediately, causing a delay in the licensee understanding what was required and further delay of the matter. The licensee relied heavily on her superior's guidance and feared termination and abandonment of her patients. She provided a full explanation and apology to the Board in her very detailed response in a chronological order of events plus communication with her superior and Board staff. The letter of support from the Director of Operations for this large facility clearly substantiates the licensee's dilemma and the untenable position she was drawn into. She provided excellent care for her patients and has since furnished all required documents.

Following further discussion, Dr. Fay-LeBlanc moved to issue a complaint against the supervisor who instructed the physician assistant not to comply with Board staff direction to cease practice while noncompliant. Ms. Weinstein seconded the motion, which passed 7-1.

12. CR24-243

Ms. Weinstein moved to approve the letter of guidance and issue it upon receipt of payment of the fine for the previously issued citation. Dr. Ng seconded the motion, which passed unanimously.

13. CR24-258

Dr. Fanjoy moved to dismiss the complaint. Mr. Flaherty seconded the motion, which passed unanimously.

MOTION: The patient's mother alleges the licensee inappropriately requested genetic testing, made insensitive comments about the patient's obesity, gave inconsistent recommendations for involvement in contact sports, and provided inappropriate recommendations for treatment. The complainant also has multiple other complaints about the care that did not pertain to the licensee. The licensee's response and medical records were appropriate and corroborate treatment that was within the standard of care.

14. CR24-261

Dr. Nesin moved to dismiss the complaint. Dr. Ng seconded the motion, which passed unanimously.

MOTION: The complainant is the adult child of an 87-year-old patient who had a series of serious health events over a short course of time, required three hospitalizations and eventually was discharged for hospice care. According to the complainant, the patient had difficulty with communication with the licensee and asserts that calls were not returned, coverage was insufficient, and, in one instance, hospital discharge papers stated that the doctor's office had been informed and would be contacting the patient for a follow up appointment, which never occurred. The complainant also asserts that the licensee delayed signing the death certificate after the patient had died.

The licensee responds that they did receive timely notification of care at the hospital and with all involved specialists, that the patient preferred only to see the licensee, that the practice had absorbed patients from another practice and that appointment availability was challenging, that visits were scheduled and that repeated hospitalizations in a short time frame further complicated follow up plans. In addition, the licensee was on vacation during some of this time span. Medical records indicate timely and appropriate responses by the practice coverage system. The licensee states that he signed the death certificate as soon as he was made aware that it hadn't yet been signed.

15. CR24-262

Dr. Nesin moved to dismiss the complaint. Dr. Fay-LeBlanc seconded the motion, which passed unanimously.

MOTION: The complainant is the adult child of an 87-year-old patient who had a series of serious health events over a short course of time, required three hospitalizations and eventually was discharged for hospice care. According to the complaint, the patient had difficulty with communication with the licensee and that the patient had repeatedly left messages requesting an appointment with no response and had similar concerns after two hospitalizations which occurred within a three-week period. At the time of a third hospitalization the complainant herself called and was told by the answering service that her call would be returned by the end of the day and that she did not receive a call. The complainant also asserts that it took 24 hours for a medication order for symptom control while the patient was in hospice (this was managed by practice coverage since the licensee was away).

The licensee responds that they did receive timely notification of care at the hospital and with all involved specialists, that the patient preferred only to see the licensee, that the practice had absorbed patients from another practice and that appointment availability was challenging, that visits were scheduled and that repeated hospitalizations in a short time frame further complicated follow up plans. In addition, the licensee was on vacation during some of this time span. Medical records indicate timely and appropriate responses by the practice coverage system.

16. CR24-263

Dr. Fay-LeBlanc moved to dismiss the complaint. Dr. Ng seconded the motion, which passed unanimously.

MOTION: The patient complains that the provider caused pain during a cystoscopy. By way of background, the patient reports he had a foley catheter placed without his knowledge or consent

during an inguinal hernia repair in 2023. After the repair, he developed pain with urination which did not improve. In 2024, he was referred to the licensee who met with the patient and recommended cystoscopy to evaluate for a stricture. The patient disagrees with some of the language used to describe his level and location of pain in the licensee's notes. He also reports that the licensee caused additional pain when doing the cystoscopy. The licensee responds that his documentation was a good reflection of his interaction with the patient and was apologetic that the procedure caused the patient pain. The patient is understandably upset that he continues to have pain, and at the same time, the records indicate appropriate care was provided by this licensee.

17. CR24-276

Dr. Fay-LeBlanc moved to investigate further and request that the physician complete a communication course and report to the Board what he gained from the course, provide the practice policies/procedures regarding the process to discharge a patient, and apologize to the patient. Ms. Weinstein seconded the motion, which passed unanimously.

18. CR24-283

Mr. Ross moved to dismiss the complaint. Dr. Fanjoy seconded the motion, which passed unanimously.

MOTION: A patient complains that the physician assistant ordered unnecessary testing and caused unnecessary financial burden. The physician assistant responded that he ordered tests to confirm the diagnosis of a tick-borne disease and followed the standard of care. Review of the records revealed that the patient received reasonable care.

19. CR25-5

Mr. Flaherty moved to dismiss the complaint. Dr. Ng seconded the motion, which passed unanimously.

MOTION: The complainant asserts that the licensee has violated HIPPA standards by submitting medical records to the Board of Licensure in Medicine in response to her previously filed complaint. She indicated that she feels that it includes protected behavioral health information. A secondary concern brought by the complainant of retaliatory behavior by the licensee.

The licensee's response and medical records indicate appropriate medical care and decision making, and it appears that no protected behavioral health information was inappropriately released to the board.

20. CR25-9

Mr. Jamison moved to provide information to the Louisiana Board of Medical Examiners, offer the physician a consent agreement with a warning and practice prohibition that he may not provide medical care nor prescribe to self or others in Maine with an emeritus license, and to set the matter for an adjudicatory hearing if the physician does not accept the consent agreement. Mr. Flaherty seconded the motion, which passed unanimously.

21. CR25-10

Dr. Ng moved to offer the physician one week to withdraw his renewal application while under investigation and to issue the order directing a § 3286 evaluation approved at the meeting if he chooses not to withdraw his renewal application. Dr. Fay-LeBlanc seconded the motion, which passed unanimously.

22. CR25-13

Dr. Fay-LeBlanc moved to offer the physician a consent agreement incorporating recommendations from his neuropsychological evaluation, requiring participation in the MPHP for at least two years, counseling for at least one year, and if he returns to practice, he must engage a practice monitor. Mr. Flaherty seconded the motion, which passed unanimously.

23. CR25-19

Mr. Ross moved to issue the physician assistant a citation and dismiss the complaint upon payment of the fine. Dr. Ng seconded the motion, which passed unanimously.

24. Intentionally left blank

25. Intentionally left blank

V. Assessment and Direction

26. AD24-277

Dr. Fay-LeBlanc moved to issue a complaint and direct that the physician have a §3286 neurocognitive and substance misuse evaluation. Dr. Fanjoy seconded the motion, which passed unanimously.

27. AD24-284

Dr. Nesin moved to allow the physician to withdraw his license while under investigation and to issue a complaint, obtain an expert review, and direct that the physician have a §3286 neurocognitive and substance misuse evaluation if he chooses not to withdraw his license. Dr. Ng seconded the motion, which passed unanimously.

28. AD25-20

Dr. Nesin moved to issue a citation and close the matter with no further action upon payment of the fine. Dr. Fay-LeBlanc seconded the motion, which passed unanimously.

29. Intentionally left blank

30. Intentionally left blank

31. Pending Adjudicatory Hearings and Informal Conferences report

This material was presented for informational purposes. No Board action was required.

32. Consumer Assistance Specialist Feedback

This material was presented for informational purposes. No Board action was required.

VI. Informal Conference (none)

VII. Minutes for Approval

A. February 11, 2025

Ms. Weinstein moved to approve the minutes of the February 11th meeting. Mr. Flaherty seconded the motion, which passed unanimously.

VIII. Consent Agreement Monitoring

A. Monitoring Reports

1. Albert W. Adams, MD

Dr. Fay-LeBlanc moved to find Dr. Adams in substantial and material noncompliance with his existing consent agreement and imposed a reprimand, and to offer a consent agreement amendment to permit structured wind-down of his practice within six months. Mr. Flaherty seconded the motion, which passed 7-0-0-1. Dr. Nesin was recused from the matter and left the room.

2. Ramon E. Cheleutte, MD

Dr. Fay-LeBlanc moved to request that Dr. Cheleutte complete a medical recordkeeping course to meet the practice mentor's suggestion for more formalized training and to report to the Board what he gained from the course. In addition, the Board strongly encourages him to consider additional support for recordkeeping such as the scribe options recommended by the practice mentor. Dr. Ng seconded the motion, which passed 7-0-0-1. Dr. Nesin was recused from the matter and left the room.

3. David L. Conner, MD

Dr. Fay-LeBlanc moved to find Dr. Conner in substantial and material noncompliance with his existing consent agreement and imposed a reprimand, and to offer a consent agreement amendment formalizing a structured wind-down of practice and transition of patients within six months. Dr. Fanjoy seconded the motion, which passed 7-0-0-1. Dr. Nesin was recused from the matter and left the room.

4. Michael V. Delahunt, MD

The Board reviewed the monitoring report and took no action. Dr. Nesin was recused from the matter and left the room.

5. Susan Paul, MD

The Board reviewed the monitoring report and took no action. Dr. Nesin was recused from the matter and left the room.

6. Stacey L. Anderson, MD

The Board reviewed the monitoring report and took no action.

7. Jake N. Cho, MD

Dr. Fay-LeBlanc moved to deny Dr. Cho's request to remove the word restriction from the consent agreement and NPDB report because that word is not in either document and grant his request for a six-month extension to obtain a work site physician monitor. Mr. Flaherty seconded the motion, which passed unanimously.

8. John L. Davis, Jr. MD

The Board reviewed the monitoring report and took no action.

9. Liam E. Funte, MD

The Board reviewed the monitoring report and took no action.

10. Dashiell Jordan, MD

The Board reviewed the monitoring report and took no action.

11. Cristel L. Palma-Vargas, PA

The Board reviewed the monitoring report and took no action.

12. Rachel C. Stadler, PA

The Board reviewed the monitoring report and took no action.

13. Justin M.B. Taylor, MD

The Board reviewed the monitoring report and took no action.

IX. Adjudicatory Hearing (none)

X. Remarks of Chair (none)

XI. Executive Director's Monthly Report

The Board reviewed Mr. Terranova's written report.

A. ABMS Material

This material was presented for informational purposes. No Board action was required.

B. BOLIM-BOL Workgroup

Mr. Terranova reported that a hearing on the legislative bill will be held on Thursday, March 13th.

C. Legislative Update

Mr. Terranova briefed the Board regarding several bills.

XII. Assistant Executive Director's Monthly Report

Ms. Hunt reported that the Board has funds remaining from the FSMB Foundation grant and received an extension of the deadline to use the funds to create additional educational videos.

XIII. Medical Director's Report (none)

XIV. Remarks of Assistant Attorney General (none)

XV. Rulemaking

A. Chapter 1 Rule Regarding Physicians

Dr. Ng moved to approve the rule as amended and proceed with rulemaking. Dr. Fanjoy seconded the motion, which passed unanimously.

XVI. Policy Review (none)

XVII. FSMB Material (none)

XVIII. FYI

This material was presented for informational purposes. No Board action was required.

XIX. Other Business

A. Meeting with Commissioner Cohen (8:40 a.m.)

Board members had the opportunity to meet with Commissioner Cohen. Commissioner Cohen joined DPF in 2019 as Deputy Commissioner and served as the department's liaison with the legislature and the Governor's Office. She was nominated to be Commissioner of DPF by Governor Mills in December 2024 and was confirmed by the Senate in January 2025.

B. NPDB Dispute Request


The Board reviewed a request from a physician to rescind its report to the National Practitioner Data Bank (NPDB) regarding an adverse action. The Board reviewed the physician's request to rescind the report, the NPDB report, the physician's request to withdraw his license, related investigation materials and the January 14, 2025, Board meeting minutes.

Following review, Dr. Fanjoy moved that the Board's report to the NPDB was factually accurate, and no basis exists to rescind the report. Dr. Fay-LeBlanc seconded the motion, which passed 7-0-0-1. Dr. Nesin was recused from the matter and left the room.

XX. Adjournment 11:50 a.m.

At 11:50 a.m. Mr. Flaherty moved to adjourn the meeting. Dr. Ng seconded the motion, which passed unanimously.

Respectfully submitted,



Maureen S. Lathrop
Administrative Assistant