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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). The Board moved, seconded, and voted the following executive session times. During the public session of the meeting, actions were taken on all matters discussed during executive session.

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**RECESSES**

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<td>Recess</td>
</tr>
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I. Call to Order

Dr. Gleeton called the meeting to order at 8:35 a.m.

A. Introduction of New Staff Members

Mr. Smith introduced Gregory Kelly, M.D. the Board’s new Medical Director. Dr. Kelly gave a brief description of his educational background and medical practice.

AAG Miller introduced AAG Lisa Wilson, recently hired by the Attorney General’s Office, and gave a brief description of her educational background and prior work experience.

B. Amendments to Agenda

Dr. Barnhart moved to amend the following items onto the agenda: 1) Dr. Calvin Fuhrmann’s renewal application; 2) a consent agreement for reinstatement of license regarding Dr. David Austin; and 3) a consent agreement amendment regarding CR17-260. Dr. Sacchetti seconded the amendment, which passed unanimously.

C. Scheduled Agenda Items

1. 1:00 p.m. Presentation regarding adjudicatory hearings
2. 2:00 p.m. Gordon Smith, Director of Opioid Response

II. Licensing

A. Applications for Individual Consideration

1. Initial Applications

a. Robert Balestrero, M.D.

Ms. Weinstein moved to preliminarily deny Dr. Balestrero’s license application with leave to withdraw and authorize AAG Miller to negotiate a consent agreement to include a warning. Ms. Dench seconded the motion, which passed 8-2.

b. Sajad Zalzala, M.D.

Dr. Sullivan moved to approve Dr. Zalzala’s license application. Ms. Dench seconded the motion, which passed unanimously.

c. John W. Bedeau, M.D.

Dr. Sullivan moved to table Dr. Bedeau’s license application pending receipt of additional information and to issue a complaint against him. Dr. Wetzel seconded the motion, which passed unanimously.
d. **Humaira Ashraf, M.D.**

Dr. Sullivan moved to preliminarily deny Dr. Ashraf’s license application and authorize AAG Miller to negotiate a consent agreement incorporating Dr. Ashraf’s proposed reentry to practice plan with the addition of reporting requirements. Approval of Dr. Ashraf’s practice monitor is delegated to the Board Chair or Secretary. Ms. Weinstein seconded the motion, which passed unanimously.

2. **Reinstatement Applications (none)**

3. **Renewal Applications**

   a. **David Galbraith, M.D.**

   Dr. Wetzel moved to enter executive session pursuant to 24 M.R.S. § 2510. Dr. Sullivan seconded the motion, which failed 4-5.

   Dr. Barnhart moved to grant a waiver to renew Dr. Galbraith’s license per the Board’s Pending License Renewal Applications policy. Dr. Waddell seconded the motion, which passed 8-2.

   b. **Kathryn Galbraith, M.D.**

   Dr. Barnhart moved to grant a waiver to renew Dr. Galbraith’s license per the Board’s Pending License Renewal Applications policy. Dr. Waddell seconded the motion, which passed 8-2.

   c. **Calvin Fuhrmann, M.D.**

   At 9:19 a.m. Dr. Sullivan moved to enter executive session pursuant to 10 M.R.S. § 8003-B (1). Dr. Fox seconded the motion, which passed 8-1-0-1. Dr. Sacchetti was recused from the matter and left the room.

   At 9:31 a.m. Mr. Ross moved to come out of executive session. Ms. Dench seconded the motion, which passed 9-0-0-1. Dr. Sacchetti was recused from the matter.

   Dr. Sullivan moved to table the matter until the next meeting. Ms. Weinstein seconded the motion, which passed 7-2-0-1. Dr. Sacchetti was recused from the matter.

4. **Requests to Convert to Active Status (none)**

5. **Requests to Withdraw License/License Application**
a. **Hannah Lovallo, P.A.**

Ms. Dench moved to approve Ms. Lovallo’s request to withdraw her license application. Mr. Ross seconded the motion, which passed unanimously.

6. **Requests for Supervisory Relationships**

a. **Amanda Buzzell, P.A.**

Mr. Ross moved to approve registration of a supervisory relationship. Dr. Sacchetti seconded the motion, which passed unanimously.

b. **Julie Wise, P.A.**

Mr. Ross moved to table the request pending receipt of documentation of plan of supervision and chart reviews and delegate approval of the supervisory relationship to the Board Chair or Secretary upon receipt of adequate documentation. Dr. Sullivan seconded the motion, which passed unanimously.

B. **Other Items for Discussion**

1. **Robert Struba, M.D. - Request For Clarification**

Dr. Struba submitted a request for guidance as to whether participation in an ongoing clinical case discussion group is permissible with an emeritus status license.

Dr. Barnhart moved to approve Dr. Struba’s participation in the clinical case discussion group. Ms. Dench seconded the motion. Upon further discussion, Dr. Barnhart withdrew her motion.

Dr. Sullivan moved not to make a determination on the request and to refer Dr. Struba to applicable Board statutes and rules regarding the emeritus status license. Ms. Weinstein seconded the motion, which passed unanimously.

C. **Citations and Administrative Fines (none)**

III. **Consent Agreements/Resolution Documents for Review**

A. **CR17-133 Michael A. Weicker, M.D. [Appendix A]**

Dr. Sacchetti moved to approve the signed consent agreement. Dr. Sullivan seconded the motion, which passed unanimously.
B.  CR18-188 Phillip J. Din, M.D. [Appendix B]

Ms. Dench moved to approve the signed consent agreement. Dr. Sacchetti seconded the motion, which passed unanimously.

C.  David R. Austin, M.D. [Appendix C]

Dr. Sullivan moved to approve the signed consent agreement for reinstatement of license. Ms. Dench seconded the motion, which passed 9-0-0-1. Dr. Barnhart was recused from the matter and left the room.

D.  CR17-260/18-122 G. Paul Savidge, M.D. [Appendix D]

Ms. Dench moved to approve the signed first amendment to consent agreement. Dr. Sacchetti seconded the motion, which passed unanimously.

IV.  Complaints

1.  CR18-56

At 10:18 a.m., Mr. Ross moved to enter executive session pursuant to 1 M.R.S. § 405(6)(F). Dr. Waddell seconded the motion, which passed 9-0-0-1. Dr. Sacchetti was recused from the matter and left the room.

At 10:45 a.m., Mr. Ross moved to come out of executive session. Ms. Weinstein seconded the motion, which passed 9-0-0-1. Dr. Sacchetti was recused from the matter.

The Board took no action regarding this matter.

2.  CR18-125

Dr. Sullivan moved to investigate further and request that the physician voluntarily comply with the recommendations from his recent evaluation. Ms. Weinstein seconded the motion, which passed 9-1.

3.  CR18-207

Dr. Sullivan moved to investigate further and request that the physician voluntarily comply with the recommendations from his recent evaluation. Dr. Fox seconded the motion, which passed unanimously.

4.  CR18-212

Dr. Waddell moved to dismiss the complaint. Dr. Sacchetti seconded the motion, which passed unanimously.
MOTION: A patient’s mother complains that her son did not receive appropriate care of severe injuries sustained in an ATV rollover accident. The complaint is filed against the orthopedic surgeon who performed surgery for the lower extremity fracture, although the written complaint also includes concerns regarding multiple other providers and the hospital. Review of the medical records reveals that appropriate care was provided by the physician.

5. CR18-245

Dr. Barnhart moved to: 1) investigate further; 2) issue a complaint against the patient’s primary care physician (CR19-60); and 3) order that the patient (a licensee of the Board) undergo a § 3286 evaluation with an evaluator approved by the Board Secretary. Ms. Dench seconded the motion, which passed unanimously.

6. CR18-247

Ms. Dench moved to table the matter. Mr. Ross seconded the motion, which passed unanimously.

7. CR18-250

Mr. Ross moved to dismiss the complaint. Ms. Dench seconded the motion, which passed unanimously.

MOTION: The girlfriend of a patient complains the provider proceeded with a rectal exam at the emergency department without an explanation to the patient of what was going to happen and without consent. Review of the records reveals discussion of the patient’s history of hemorrhoids, explanation of performing an external examination and an internal digital rectal examination to which the patient agreed. A plan of care and follow up suggestions were discussed. The provider demonstrated appropriate care.

8. CR18-258

Dr. Sullivan moved to dismiss the complaint. Ms. Dench seconded the motion, which passed unanimously.

MOTION: A patient complains about the medical care he received from a physician in a Maine state correctional facility. Review of the records reveals appropriate care.

9. CR18-259

Dr. Sullivan moved to investigate further and request that the physician complete a professional boundaries course. Dr. Wetzel seconded the motion, which passed unanimously.
10. CR18-260

Dr. Barnhart moved to investigate further and request that the physician complete a professional boundaries course. Ms. Dench seconded the motion, which passed unanimously.

11. CR18-262

Dr. Barnhart moved to investigate further and request that the physician convert her license to inactive status. Dr. Wetzel seconded the motion, which passed 8-0-0-2. Dr. Fox and Dr. Sacchetti were recused from the matter and left the room.

12. CR18-263

Dr. Sullivan moved to table the matter. Dr. Sacchetti seconded the motion, which passed 8-1-0-1. Dr. Waddell was recused from the matter and left the room.

13. CR18-265

Dr. Sacchetti moved to table the matter. Ms. Weinstein seconded the motion, which passed unanimously.

14. CR18-287

Dr. Wetzel moved to dismiss the complaint. Dr. Sullivan seconded the motion, which passed 9-0-0-1. Dr. Barnhart was recused from the matter and left the room.

MOTION: The patient complains that the physician refused to prescribe her Vyvanse because she was also taking Methadone. The physician responded that he saw the patient for an initial evaluation and determined that further clinical information was needed in light of the patient’s presentation and the combination of medications. When this was explained to the patient, she became upset and ended the visit. Review of records reflects appropriate care was provided.

15. CR19-4

Ms. Weinstein moved not to share the physician’s response with the complainant pursuant to 32 M.R.S. § 3282-A(1). Ms. Dench seconded the motion, which passed unanimously.

16. CR19-5

Dr. Sacchetti moved to investigate further. Dr. Sullivan seconded the motion, which passed 9-0-0-1. Dr. Barnhart was recused from the matter.
17. CR18-199 Sarah Welin Kopke, P.A.

Ms. Dench moved to dismiss the complaint with a letter of guidance. Dr. Sacchetti seconded the motion, which passed 8-0-0-1. Dr. Fox was recused from the matter and left the room.

MOTION: In this case, the Board received a complaint from a patient’s daughter who alleged that the physician assistant failed to provide adequate care for her mother’s hypertensive crisis in a walk-in clinic, including failing to perform laboratory testing and failing to arrange for prompt outpatient follow-up or refer her mother to a hospital emergency department. The physician assistant responded that she felt it was more appropriate for a primary care provider to determine if laboratory testing was needed and if medication was needed for a chronic condition, which she did not feel warranted emergent testing or treatment. In response to questions posed by the Board, she described changes that she has made to her practice.

The letter of guidance will advise the physician assistant that clinicians practicing in walk-in clinics should be competent to identify and immediately institute therapies in urgent care situations. In addition, she must recognize urgent care situations in which she needs to consult with her supervising physician and seek additional training.

18. CR18-232

Dr. Sullivan moved to investigate further. Ms. Weinstein seconded the motion, which passed unanimously.

19. CR18-261

Ms. Dench moved to table the matter for six months and request that the physician notify the Board if he plans to move out of state or seek licensure elsewhere. Dr. Barnhart seconded the motion, which passed unanimously.

20. CR18-278

Dr. Fox moved to dismiss the complaint. Dr. Wetzel seconded the motion, which passed unanimously.

MOTION: A patient complains about the care she received from her primary care physician. The patient complains about pain from a neck injury and thumb disease. Review of the records reveals appropriate care and well-founded concern by the physician over narcotic prescription issues.

21. CR19-6

Dr. Sullivan moved to dismiss the complaint. Dr. Fox seconded the motion, which passed unanimously.
**MOTION:** The patient complains of rude and condescending behavior by the physician and failure of the physician to order appropriate testing. Comprehensive review of the complaint, response and medical records reveals that, although more direct communication from the provider to the patient could possibly have improved the situation, the medical care delivered was appropriate.

22. CR19-15

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

**MOTION:** The patient complains that the physician assistant misdiagnosed her lesion and recommended a procedure that took four months to be scheduled. The physician assistant responded that it appeared to be a benign lesion which was referred for laser removal. The lesion ended up being a rare malignant skin lesion. Review of the records reveals that the patient received reasonable care.

23. CR19-20

Dr. Fox moved to dismiss the complaint. Dr. Sacchetti seconded the motion, which passed unanimously.

**MOTION:** The complainant is the stepmother of the patient, an adult male. She complains that her stepson’s physician erroneously prescribed him an antibiotic ear drop to use in his eye. The patient discovered the error and called the physician to make her aware. The physician apologized for the prescribing error and attempted to remedy the situation by correcting the record and by paying for, and dispensing, the correct medication. The patient never returned for the medication as he sought care elsewhere. Although an order error occurred, it was acknowledged by the physician and appropriate attempts were made to correct the error and follow up with the patient.

24. Intentionally left blank

25. Intentionally left blank

V. Assessment and Direction

26. AD18-248

Dr. Sacchetti moved to close the matter with no further action. Dr. Barnhart seconded the motion, which passed unanimously.

27. AD18-283

Ms. Weinstein moved to issue a complaint (CR19-52). Mr. Ross seconded the motion, which passed unanimously.
28. AD18-288

Dr. Sacchetti moved to issue a complaint (CR19-53). Ms. Dench seconded the motion, which passed unanimously.

29. AD19-9

Dr. Barnhart moved to issue a complaint (CR19-55). Ms. Dench seconded the motion, which passed 8-0-0-1. Dr. Sacchetti was recused from the matter and left the room.

30. AD19-27

Dr. Wetzel moved to issue a complaint (CR19-57), order that the physician undergo a § 3286 evaluation, and request that he convert his license to inactive status. Dr. Sullivan seconded the motion, which passed unanimously.

31. Intentionally left blank

32. Intentionally left blank

33. Pending Adjudicatory Hearings and Informal Conferences Report

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

34. Consumer Assistance Specialist Feedback

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

35. Other Items for Discussion (none)

VI. Informal Conference (none)

VII. Minutes for Approval

Dr. Sullivan moved to approve the minutes of the February 12, 2019 meeting. Ms. Dench seconded the motion, which passed 8-0-1-0 with Mr. Ross abstaining.

VIII. Board Orders & Consent Agreement Monitoring

A. Board Orders (none)

B. Monitoring Reports

1. Peter Dollard, M.D.

This material was provided for informational purposes. No Board action was required.
2. **Ronald D. Oldfield, P.A.**

   Mr. Ross moved to terminate the requirement that Mr. Oldfield engage in mental health therapy. Ms. Dench seconded the motion, which passed 8-1.

3. **G. Paul Savidge, M.D.**

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

4. **Elmer H. Lommler, M.D.**

   Ms. Dench moved to issue a complaint. Ms. Weinstein seconded the motion, which passed 8-0-0-1. Dr. Barnhart was recused from the matter and left the room.

5. **Daniel Bobker, M.D.**

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

6. **Malathy Sundaram, M.D.**

   At 4:44 p.m. Mr. Ross moved to enter executive session pursuant to 1 M.R.S. § 405 (6)(F). Ms. Weinstein second the motion, which passed unanimously.

   At 4:47 p.m. Ms. Weinstein moved to come out of executive session. Dr. Barnhart seconded the motion, which passed unanimously.

   Mr. Ross moved to: 1) approve the proposed preceptor; 2) find Dr. Sundaram in compliance with her consent agreement and reinstate her active license; and 3) request that she voluntarily comply with the recommendations from her recent evaluation. Dr. Sullivan seconded the motion which passed 8-0. Dr. Wetzel was out of the room and did not vote.

IX. **Adjudicatory Hearing (none)**

X. **Remarks of Chair (none)**

XI. **Remarks of Executive Director**

A. **Legislative Report**

   Mr. Smith reported on pending legislation.

   Dr. Barnhart moved that the Board support LD 287. Dr. Sullivan seconded the motion, which passed 7-0-1-0 with Dr. Wetzel abstaining.
XII. Assistant Executive Director’s Report

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

A. Complaint Status Report

As of March 1, 2019, there are ninety-nine complaints outstanding. Thirteen complaints were opened during the month of February and fourteen were closed.

B. Licensing Feedback (none)

XIII. Medical Director’s Report (none)

XIV. Remarks of Assistant Attorney General

AAG Miller advised the Board that comments made during discussion of complaints may be a basis for a recusal request if the complaint is ordered to an adjudicatory hearing.

XV. Rulemaking (none)

XVI. Policy Review

A. Draft Duties and Election of Officers policy

The matter was tabled until the April meeting.

XVII. Requests for Guidance (none)

XVIII. Standing Committee Reports

A. Licensure and CME Committee

1. Licensing Status Report [Appendix E]

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

XIX. Board Correspondence (none)

XX. FSMB Material (none)

XXI. FYI

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

A. 1:00 p.m. Presentation Regarding Adjudicatory Hearings

Rebekah Smith made a PowerPoint presentation regarding the adjudicatory hearing process and answered questions from Board members.

B. 2:00 p.m. Gordon Smith, Director of Opioid Response

Gordon Smith spoke with the Board about his new role as Director of Opioid Response and efforts to coordinate the efforts of state agencies to help prevent overdoses and deaths and expand access to treatment for substance misuse.

XXIII. Adjournment 5:20 p.m.

At 5:20 p.m. Mr. Ross moved to adjourn the meeting. Ms. Weinstein seconded the motion, which passed unanimously.

Respectfully submitted,

Maureen S. Lathrop
Administrative Assistant
STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

In re: MICHAEL A. WEICKER, M.D.
Complaint No. CR17-133

) CONSENT AGREEMENT
)
)

This document is a Consent Agreement, effective when signed by all parties, regarding disciplinary action against the license to practice medicine in the State of Maine held by Michael A. Weicker, M.D. The parties to the Consent Agreement are: Michael A. Weicker, M.D. ("Dr. Weicker"), the State of Maine Board of Licensure in Medicine ("the Board"), and the State of Maine Department of the Attorney General. This Consent Agreement is entered into pursuant to 10 M.R.S. § 8003(5)(B) and 32 M.R.S. § 3282-A.

STATEMENT OF FACTS

1. Dr. Weicker held a temporary license to practice medicine in the State of Maine from November 14, 2016 through May 14, 2017 (license number TD161119). Dr. Weicker specializes in neurological surgery.

2. On June 20, 2017, the Board initiated a complaint following receipt of information that Eastern Maine Medical Center ("EMMC") had issued a summary suspension of Dr. Weicker's clinical privileges for "repeatedly failing to accurately and legibly document the clinical services provided to EMMC patients and failing to comply with federal and state law and regulation and hospital policy with regard to patient confidentiality." Information received from EMMC indicated that Dr. Weicker worked at that facility in November and December 2016, and that there were issues with the sufficiency, accuracy, and...
timeliness of Dr. Weicker’s medical record documentation. EMMC alleged that Dr. Weicker cut and pasted incorrect information into the medical records, including patient names not in the system, performed a procedure at the wrong level, and failed to perform an appropriate sign out for a patient. The Board docketed the complaint as CR17-133, and sent it to Dr. Weicker for a response.

3. On September 26, 2017, Dr. Weicker responded to the complaint. In his response, Dr. Weicker stated that he attempted repeatedly to address outstanding documentation at the time of his departure from EMMC, was unable to gain remote access through the IT department, and was provided no alternative to completing the incomplete notes. Dr. Weicker denied that he failed to appropriately sign out patients. Dr. Weicker explained difficulties associated with the referenced surgical procedure which was performed in the lateral decubitis position on a morbidly obese patient.

4. On February 13, 2018, the Board received an independent outside expert review report of fifteen medical records related to Dr. Weicker’s care of EMMC patients. The reviewer did not find issues with Dr. Weicker’s medical decisionmaking and surgical practice, but concluded that Dr. Weicker’s medical recordkeeping was inadequate in some cases.

5. On February 15, 2018, Dr. Weicker underwent a neuropsychological evaluation requested by the Board. On May 17, 2018, Dr. Weicker underwent a neurological evaluation requested by the Board.

6. Pursuant to 32 M.R.S. § 3282-A(2)(F), the Board may impose discipline for unprofessional conduct if the licensee has engaged in conduct
that violates a standard of professional behavior that has been established for
the practice of medicine.

7. On July 10, 2018, the Board reviewed complaint CR17-133, and voted to set the matter for an adjudicatory hearing. In addition, the Board voted to offer Dr. Weicker this Consent Agreement to resolve the matter without further proceedings. Absent Dr. Weicker's acceptance of this Consent Agreement by signing and dating it in front of a notary and mailing it to Maine Board of Licensure in Medicine, 137 State House Station, Augusta, Maine 04333-0137 on or before February 26, 2019, the matter will be scheduled for an adjudicatory hearing.

COVENANTS

8. Dr. Weicker admits the facts stated above and agrees that if the Board were to hold an adjudicatory hearing in this matter, the Board would have sufficient evidence by a preponderance of the evidence by which it could find, and the Board hereby does find, that grounds for discipline exist pursuant to 32 M.R.S. § 3282-A(2)(F) for engaging in unprofessional conduct.

9. As discipline for the foregoing conduct, Dr. Weicker agrees to accept, and the Board imposes:

   a) A REPRIMAND for inadequate medical record documentation;

   b) Within thirty (30) days of the effective date of this Consent Agreement, Dr. Weicker shall enroll in an in-person continuing medical education course on recordkeeping pre-approved by the Board, Board Chair, Board Secretary, or Board designee. The following courses are pre-approved: 1)
Case Western Medical Documentation Course; 2) KSTAR Medical Record Course; 3) PACE Medical Record Keeping Course; and 4) CPEP Medical Recordkeeping Seminar. Dr. Weicker shall successfully complete the medical recordkeeping course required by this subparagraph within six (6) months of the effective date of this Consent Agreement and provide the Board with documentary evidence of his completion of the continuing medical education course within thirty (30) days of his successful completion of the course; and
c) Prior to submitting an application to the Board for any Maine medical license, Dr. Weicker shall undergo a neurological examination arranged by Board staff and simultaneously submit the examination report with his application for a Maine medical license.

10. Dr. Weicker acknowledges that while this Consent Agreement together with any amendments is in effect he must directly communicate with the Board or Board staff and has the obligation to respond to any request for information or documentation within the timeframe specified or requested. If providing notice or supplying information to the Board is required by any provision of this Consent Agreement, Dr. Weicker shall provide such notice in writing to Julie Best, Complaint Coordinator, or her successor. Failure to comply with or respond to any request shall be considered unprofessional conduct and a violation of this Consent Agreement.

11. Any conduct of Dr. Weicker described herein may be considered in future Board action(s) as evidence of a pattern of misconduct.
12. Violation by Dr. Weicker of any of the terms or conditions of this Consent Agreement shall constitute grounds for discipline, including but not limited to modification, suspension, or revocation of licensure or the denial of re-licensure.

13. This Consent Agreement is not appealable and is effective until modified or rescinded in writing by the parties hereto.

14. The Board and the Department of the Attorney General may communicate and cooperate regarding Dr. Weicker or any other matter relating to this Consent Agreement.

15. This Consent Agreement is a public record within the meaning of 1 M.R.S. § 402 and will be available for inspection and copying by the public pursuant to 1 M.R.S. § 408-A.

16. This Consent Agreement constitutes discipline and is an adverse licensing action that is reportable to the National Practitioner Data Bank (NPDB), the Federation of State Medical Boards (FSMB), and other licensing jurisdictions.

17. Nothing in this Consent Agreement shall be construed to affect any right or interest of any person not a party hereto. If any clause of this Consent Agreement is deemed illegal or invalid, then that clause shall be deemed severed from this Consent Agreement.

18. Dr. Weicker acknowledges by his signature hereto that he has read this Consent Agreement, that he has had an opportunity to consult with an attorney before executing this Consent Agreement, that he executed this
Consent Agreement of his own free will and that he agrees to abide by all terms
and conditions set forth herein.

19. Dr. Weicker has been represented by Kenneth W. Lehman, Esq.,
who has participated in the negotiation of the terms of this Consent Agreement.

20. For the purposes of this Consent Agreement, the term “execution”
means the date on which the final signature is affixed to this Consent
Agreement.
I, MICHAEL A. WEICKER, M.D., HAVE READ AND UNDERSTAND THE FOREGOING CONSENT AGREEMENT AND AGREE WITH ITS CONTENTS AND TERMS. I FURTHER UNDERSTAND THAT BY SIGNING THIS AGREEMENT, I WAIVE CERTAIN RIGHTS, INCLUDING THE RIGHT TO A HEARING BEFORE THE BOARD. I SIGN THIS CONSENT AGREEMENT VOLUNTARILY, WITHOUT ANY THREAT OR PROMISE. I UNDERSTAND THAT THIS CONSENT AGREEMENT CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.

DATED: 02/13/2019

MICHAEL A. WEICKER, M.D.

STATE OF West Virginia

County of Cabell, S.S.

Personally appeared before me the above-named Michael A. Weicker, M.D., and swore to the truth of the foregoing based upon his own personal knowledge, or upon information and belief, and so far as upon information and belief, he believes it to be true.

DATED: 02/13/2019

Crystal Kendrick

NOTARY PUBLIC/ATTORNEY

MY COMMISSION ENDS: 12/09/2019

DATED: 2/08/2019

KENNETH W. LEHMAN, Esq.
Counsel for Michael A. Weicker, M.D.
STATE OF MAINE  
BOARD OF LICENSURE IN MEDICINE  

In re:  
PHILLIP J. DIN, M.D.  
Complaint No. CR18-188  

) CONSENT AGREEMENT  
)  
)  

This document is a Consent Agreement, effective when signed by all parties, regarding disciplinary action against the license to practice medicine in the State of Maine held by Phillip J. Din, M.D. The parties to the Consent Agreement are: Phillip J. Din, M.D. ("Dr. Din"), the State of Maine Board of Licensure in Medicine ("the Board"), and the State of Maine Department of the Attorney General. This Consent Agreement is entered into pursuant to 10 M.R.S. § 8003(5)(E) and 32 M.R.S. § 3282-A.

STATEMENT OF FACTS

1. Dr. Din has held a license to practice medicine in Maine since October 19, 2009 (license number MD18293). Dr. Din held a temporary license to practice medicine in Maine from April 27, 2009 through October 27, 2009. Dr. Din specializes in internal medicine.

2. On September 14, 2018, the Board initiated a complaint following a pharmacist report that a member of Dr. Din's extended family attempted to fill a prescription written by Dr. Din using a prescription pad from a medical center at which he was no longer employed. The prescription was for Adderall for the family member's child. The complaint also alleged that Dr. Din prescribed controlled substances to other specified members of his family, and that Dr. Din had answered "no" on his 2017 application to renew his license.
whether he had prescribed controlled substances to himself, family or household members. The Board docketed the complaint as CR18-188, and sent it to Dr. Din for a response.

3. By letter dated October 30, 2018, Dr. Din responded to the complaint. In his response, Dr. Din stated that he no longer had a "familial relation with" this individual or her children because his relationship to them was through another family member who is deceased. Dr. Din stated that he sees the extended family member and her child only once or twice a year when he and his wife are in the area visiting. Dr. Din admitted that he wrote the prescription for Adderall based on his understanding that the medication was a refill, but that he subsequently learned that it was an "incorrect medication" which had never been previously prescribed to the child. Dr. Din denied using the medical center prescription pads, but acknowledged that his prescriptions contained the name, location, and phone number of the medical center. Dr. Din explained his prescribing of controlled substances to family members, and that he mistakenly stated in his 2017 renewal application that he had never prescribed controlled substances for family members. He told the Board that he provided copies of treatment notes directly to family member patients, and it was his understanding that they would provide those records to their regular providers.

4. By letter dated November 20, 2018, Dr. Din responded to questions sent to him on November 7, 2018. Dr. Din explained his attempt to transition care of his spouse's family following their marriage in 2014. Dr. Din
explained why he wrote a prescription for a one month supply of Adderall to an extended family member's child, stated that he did not consider them "family" at the time because his relationship was through a family member who had since deceased, and acknowledged that he wrote the prescription on what the extended family member told him. He acknowledged that he did not attempt to contact the child's normal provider or pharmacy, nor did he check records in the prescription monitoring program prior to issuing the prescription.

5. Pursuant to 32 M.R.S. § 3282-A(2)(A), the Board may refuse to renew or impose other discipline for the practice of fraud, deceit or misrepresentation in obtaining a license or in connection with service rendered within the scope of the license issued.

6. Pursuant to 32 M.R.S. § 3282-A(2)(F), the Board may impose discipline for unprofessional conduct if the licensee has engaged in conduct that violates a standard of professional behavior that has been established for the practice of medicine.

7. On January 8, 2019, the Board reviewed complaint CR18-188, and voted to set the matter for an adjudicatory hearing. In addition, the Board voted to offer Dr. Din this Consent Agreement to resolve the matter without further proceedings. Absent Dr. Din's acceptance of this Consent Agreement by signing and dating it in front of a notary and mailing it to Maine Board of Licensure in Medicine, 137 State House Station, Augusta, Maine 04333-0137 on or before March 1, 2019, the matter will be scheduled for an adjudicatory hearing.
COVENANTS

8. Dr. Din admits the facts stated above and agrees that such conduct constitutes grounds for discipline pursuant to 32 M.R.S. § 3282-A(2)(A) for misrepresentation in obtaining a license, and § 3282(F) for engaging in unprofessional conduct.

9. As discipline for the foregoing conduct, Dr. Din agrees to accept, and the Board imposes:

   a) A REPRIMAND for misrepresentation on his application to renew his license and unprofessional conduct related to his prescribing of controlled substances to family members;

   b) A CIVIL PENALTY in the amount of One Thousand Dollars ($1,000.00), payment of which shall be made by certified check or money order made payable to “Treasurer, State of Maine,” and remitted to Maine Board of Licensure in Medicine, 137 State House Station, Augusta, Maine 04333-0137, within thirty (30) days of the execution of this Consent Agreement;

   c) A License CONDITION that Dr. Din shall not prescribe any medications to self, family or household members; and

   d) A REQUIREMENT that within thirty (30) days of the effective date of this Consent Agreement, Dr. Din shall enroll in an in-person continuing medical education course on the subject or professional ethics pre-approved by the Board Chair, Board Secretary, or Board designee. Dr. Din shall successfully complete the professional ethics course required by this
subparagraph within six (6) months of the effective date of this Consent Agreement and provide the Board with documentary evidence of his completion of the continuing medical education course within thirty (30) days of his successful completion of the course.

10. Dr. Din acknowledges that while this Consent Agreement together with any amendments is in effect he must directly communicate with the Board or Board staff and has the obligation to respond to any request for information or documentation within the timeframe specified or requested. If providing notice or supplying information to the Board is required by any provision of this Consent Agreement, Dr. Din shall provide such notice in writing to Julie Best, Complaint Coordinator, or her successor. Failure to comply with or respond to any request shall be considered unprofessional conduct and a violation of this Consent Agreement.

11. Any conduct of Dr. Din described herein may be considered in future Board action(s) as evidence of a pattern of misconduct.

12. Violation by Dr. Din of any of the terms or conditions of this Consent Agreement shall constitute grounds for discipline, including but not limited to modification, suspension, or revocation of licensure or the denial of re-licensure.

13. This Consent Agreement is not appealable and is effective until modified or rescinded in writing by the parties hereto.
14. The Board and the Department of the Attorney General may communicate and cooperate regarding Dr. Din or any other matter relating to this Consent Agreement.

15. This Consent Agreement is a public record within the meaning of 1 M.R.S. § 402 and will be available for inspection and copying by the public pursuant to 1 M.R.S. § 408-A.

16. This Consent Agreement constitutes discipline and is an adverse licensing action that is reportable to the National Practitioner Data Bank (NPDB), the Federation of State Medical Boards (FSMB), and other licensing jurisdictions.

17. Nothing in this Consent Agreement shall be construed to affect any right or interest of any person not a party hereto. If any clause of this Consent Agreement is deemed illegal or invalid, then that clause shall be deemed severed from this Consent Agreement.

18. Dr. Din acknowledges by his signature hereto that he has read this Consent Agreement, that he has had an opportunity to consult with an attorney before executing this Consent Agreement, that he executed this Consent Agreement of his own free will and that he agrees to abide by all terms and conditions set forth herein.

19. Dr. Din has been represented by John D. Gleason, Esq., who has participated in the negotiation of the terms of this Consent Agreement.
20. For the purposes of this Consent Agreement, the term "execution" means the date on which the final signature is affixed to this Consent Agreement.

I, PHILLIP J. DIN, M.D., HAVE READ AND UNDERSTAND THE FOREGOING CONSENT AGREEMENT AND AGREE WITH ITS CONTENTS AND TERMS. I FURTHER UNDERSTAND THAT BY SIGNING THIS AGREEMENT, I WAIVE CERTAIN RIGHTS, INCLUDING THE RIGHT TO A HEARING BEFORE THE BOARD. I SIGN THIS CONSENT AGREEMENT VOLUNTARILY, WITHOUT ANY THREAT OR PROMISE. I UNDERSTAND THAT THIS CONSENT AGREEMENT CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.

DATED: 2/27/19  
PHILLIP J. DIN, M.D.

STATE OF NEW YORK

Personally appeared before me the above-named Phillip J. Din, M.D., and swore to the truth of the foregoing based upon his own personal knowledge, or upon information and belief, and so far as upon information and belief, he believes it to be true.

DATED: 2/27/2019  
NOTARY PUBLIC/ATTORNEY

MY COMMISSION ENDS: 7/12/2023

DATED: 2/25/19  
JOHN D. GLEASON, Esq.  
Counsel for Phillip J. Din, M.D.
STATE OF MAINE BOARD
OF LICENSURE IN MEDICINE

DATED:  3/14/19

MAROULLA S. GLEATON, M.D., Chair

STATE OF MAINE DEPARTMENT
OF THE ATTORNEY GENERAL

DATED:  4/12/2019

MICHAEL MILLER
Assistant Attorney General

Effective Date:  4/12/2019
STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

In re: )
DAVID R. AUSTIN, M.D. ) CONSENT AGREEMENT FOR
) REINSTATEMENT OF LICENSE

This document is a Consent Agreement, effective when signed by all parties, regarding a pending application to reinstate a medical license in the State of Maine submitted by David R. Austin, M.D. The parties to the Consent Agreement are: David R. Austin, M.D. ("Dr. Austin"), the State of Maine Board of Licensure in Medicine ("the Board") and the State of Maine Department of the Attorney General. This Consent Agreement is entered into pursuant to 10 M.R.S. § 8003(5)(B) and 32 M.R.S. § 3282-A.

STATEMENT OF FACTS

1. Dr. Austin obtained a license to practice medicine in Maine on March 31, 1989 (license number MD12687). Dr. Austin specialized in family practice. On April 14, 2015, the Board issued an Order of Immediate Suspension of Dr. Austin's license upon preliminary findings following a report that, after two months working at an Ebola treatment unit in Liberia, Dr. Austin arrived at the unit inebriated and unable to perform his duties. Dr. Austin was terminated from employment. On May 26, 2015, Dr. Austin entered into an Interim Consent Agreement with the Board that continued his license suspension. On June 9, 2015, Dr. Austin surrendered his Maine medical license pursuant to a Consent Agreement for Surrender of License for
misuse of alcohol that has resulted or may result in the licensee performing services in a manner that endangers the health or safety of patients.

2. On August 20, 2018, Dr. Austin submitted an application to reinstate his Maine medical license. On his application, Dr. Austin disclosed his prior disciplinary action in Maine, but did not disclose disciplinary action taken by the New York State Department of Health Office of Professional Medical Conduct on September 13, 2016 based on his Maine disciplinary history. On his application, Dr. Austin disclosed the surrender of his Drug Enforcement Administration registration, but failed to disclose his exclusions from participation in Medicare and Medicaid programs. On his application, Dr. Austin disclosed his arrest for an alcohol related Driving Under the Influence criminal charge that occurred on March 20, 2018, in Mobile, Alabama, and referred to his prior consent agreement for identification of other past alcohol related criminal charges. On his application, Dr. Austin answered “no” to several questions related to current substance misuse.

3. Dr. Austin has not practiced medicine in the United States since 2015. Dr. Austin's practice of medicine since 2015 has been limited to eight temporary medical missions, primarily in Belize, providing voluntary medical care totaling approximately 53 days. In applying for a medical license in Belize, Dr. Austin informed the Medical Council of Belize that he had not renewed his Maine medical license, but did not disclose his disciplinary history or the termination from his assignment in Liberia.
4. On August 21, 2018, Dr. Austin enrolled in a five year monitoring agreement with the Maine Professionals Health Program ("MPHP").

5. In connection with his application to reinstate his license, Dr. Austin submitted a proposed Re-Entry to Practice Plan.

6. Pursuant to 32 M.R.S. § 3271(5), an applicant may not be licensed unless the Board finds that the applicant is qualified and no cause exists, as set forth in section 3282-A that may be considered grounds for disciplinary action.

7. Pursuant to 32 M.R.S. § 3282-A(2)(A), the Board may deny a license or impose other discipline for misrepresentation in obtaining a license or in connection service rendered within the scope of the license issued.

8. Pursuant to 32 M.R.S. § 3282-A(2)(B), the Board may refuse to issue, or impose other discipline for misuse of alcohol that has resulted or that may result in the licensee performing services in a manner that endangers the health or safety of patients.

9. Pursuant to 32 M.R.S. § 3282-A(2)(E), the Board may refuse to issue, or impose discipline if the licensee has engaged in conduct that evidences a lack of ability or fitness to discharge the duty owed by the licensee to a client or patient or the general public, or that evidences a lack of knowledge or inability to apply principles or skills to carry out the practice for which the licensee is licensed.

10. Pursuant to 32 M.R.S. § 3282-A(2)(F), the Board may refuse to issue, or impose discipline for unprofessional conduct if the licensee has
engaged in conduct that violates a standard of professional behavior that has been established for the practice of medicine.

11. On February 12, 2019, the Board reviewed the foregoing information and voted to preliminarily deny Dr. Austin's application to reinstate his medical license. In lieu of the denial, the Board also voted to offer Dr. Austin this Consent Agreement. Should Dr. Austin decide to accept this Consent Agreement, he should sign it and date it in front of a notary and return it to the Maine Board of Licensure in Medicine, 137 State House Station, Augusta, Maine 04333-0137 on or before April 4, 2019.

COVENANTS

12. Dr. Austin admits the foregoing facts and that such conduct constitutes grounds for denial of licensure and imposition of other discipline pursuant to 32 M.R.S. §§ 3282-A(2)(A), (2)(B), 2(E), and 2(F).

13. As discipline for his conduct, Dr. Austin agrees to, and the Board imposes, the following:

a) a REPRIMAND for misrepresentations made in obtaining a license;

b) a CIVIL PENALTY in the amount of Two Hundred Dollars ($200.00), payment of which shall be made by certified check or money order made payable to "Treasurer, State of Maine," and remitted to Maine Board of Licensure in Medicine, 137 State House Station, Augusta, Maine 04333-0137, within thirty (30) days of the execution of this Consent Agreement;
c) a PROBATION for a period of not less than five (5) years, that includes the following terms and conditions:

1) For at least five (5) years from the effective date of this Consent Agreement, Dr. Austin shall maintain and comply with all requirements of a monitoring agreement with MPHP. Prior to engaging in the practice of medicine, Dr. Austin shall ensure that the Board has received a copy of his MPHP monitoring agreement incorporating the requirements of this Consent Agreement, and shall ensure that the Board receives any subsequent amendments or revisions thereto. The MPHP monitoring agreement shall include a provision that requires for at least five (5) years that Dr. Austin be subjected to random toxicological testing at least twice per month. Dr. Austin hereby authorizes MPHP to disclose and release to the Board all information obtained by MPHP relating to his participation with MPHP, which authorization shall remain in effect for any period during which he has a license to practice medicine in the State of Maine. Dr. Austin shall execute any and all releases necessary for the Board, Board staff, and the Board’s assigned Assistant Attorney General to: a) communicate directly with the MPHP regarding his compliance with that program; b) review and obtain copies of any and all documentation regarding his participation in the MPHP; c) communicate directly with anyone who is involved with his care and treatment; and d) review and obtain copies of any and all documentation regarding his medical care and treatment for substance misuse issues.
Within forty-eight (48) hours of being informed that a toxicology test result has been reported as positive for alcohol or a non-prescribed substance, Dr. Austin shall report such test result to the Board.

So long as this Consent Agreement remains in effect, Dr. Austin agrees and understands that any confirmed positive toxicology result that is reported to the Board for alcohol or any drug not known to be prescribed to him, shall result in the automatic and immediate suspension of his license to practice medicine in Maine, which suspension shall continue so long as determined by the Board, in its sole discretion, and is not appealable:

2) Dr. Austin shall notify the Board within three (3) days of any arrest, summons, information or indictment for any crime, and any summons or other charge for any civil violation that involves alcohol or drugs, including driving or operating under the influence, and any conviction or court finding related thereto;

3) Prior to engaging in the practice of medicine, Dr. Austin must engage a Board-approved Physician Practice Monitor who shall monitor his medical practice. In complying with this requirement, Dr. Austin shall submit to the Board for its approval the name of a licensed physician as a proposed Physician Practice Monitor. The Board, Board Chair, or the Board’s designee has the sole discretion to approve or reject the Physician Practice Monitor. For a period of not less than one (1) year, the Physician Practice Monitor shall review at least five (5) patient charts per week with Dr. Austin by meeting face-to-face and reviewing the care of patients. Dr. Austin
understands that the Physician Practice Monitor is an agent of the Board pursuant to 24 M.R.S. § 2511. The Physician Practice Monitor shall provide the Board with monthly written reports no later than the fifteenth (15th) day of each month. The reports shall include a statement identifying his or her observations of Dr. Austin's practice, the review of patient charts, Dr. Austin's workload, functioning, knowledge, skills and professionalism, and a discussion of any issues related to medical knowledge, judgment, clinical skills, documentation, or professionalism that may impact the ability of Dr. Austin to safely and competently practice medicine. If at any time the Physician Practice Monitor believes that Dr. Austin may not be safely and competently practicing medicine, he or she shall immediately report his/her concerns to the Board. Dr. Austin must provide a copy of this Consent Agreement, together with any amendments hereto, to his Physician Practice Monitor.

After receipt by the Board of six (6) Physician Practice Monitor reports, the Physician Practice Monitor may request that the reports be submitted every two (2) months. Upon receipt of such request, the Board, Board Chair, or the Board's designee shall review all information, and in its/his/her sole discretion grant or deny the request. After a period of one (1) year, Dr. Austin and the Physician Practice Monitor shall meet face-to-face no less than once per month for a period of at least six (6) months, and the Physician Practice Monitor shall submit his/her reports to the Board every three (3) months. Upon conclusion of the six (6) month period, the Physician Practice Monitor shall in his/her report to the Board include a recommendation whether monitoring of Dr.
Austin's practice of medicine should continue. Upon receipt of such report containing the Physician Practice Monitor's recommendation, the Board shall terminate the requirements if this subparagraph unless the Board determines, for good cause shown, that the Physician Practice Monitor requirement shall continue.

14. Dr. Austin acknowledges that while this Consent Agreement is in effect he must directly communicate with the Board or Board staff and has the obligation to respond to any request for information or documentation within the timeframe specified or requested. Failure to comply with or respond to any request shall be considered unprofessional conduct and a violation of this Consent Agreement.

15. Any conduct of Dr. Austin described herein may be considered in future Board action(s) as evidence of a pattern of misconduct.

16. Upon execution of this Consent Agreement, the Board shall issue Dr. Austin's license contingent upon his meeting all other licensure requirements.

17. Violation of any of the terms or conditions of this Consent Agreement by Dr. Austin shall constitute unprofessional conduct and grounds for additional discipline of his Maine medical license by the Board, including but not limited to imposition of civil penalties, or modification, suspension, and revocation of licensure.

18. This Consent Agreement is not appealable, constitutes disciplinary action, is reportable to the National Practitioner Data Bank, the Federation of
State Medical Boards, and other licensing jurisdictions, and is effective until
modified or rescinded in writing by all of the parties hereto.

19. The Board and the Department of Attorney General may
communicate and cooperate regarding any matter related to this Consent
Agreement.

20. This Consent Agreement is a public record within the meaning of
1 M.R.S. § 402 and will be available for inspection and copying by the public
pursuant to 1 M.R.S. § 408-A.

21. Nothing in this Consent Agreement shall be construed to affect any
right or interest of any person not a party hereto.

22. Dr. Austin acknowledges by his signature hereto that he has read
this Consent Agreement, that he has had an opportunity to consult with an
attorney before executing this Consent Agreement, that he executed this
Consent Agreement of his own free will and that he agrees to abide by all terms
and conditions set forth herein.

23. Dr. Austin has been represented by Kenneth W. Lehman, Esq.,
who has participated in the negotiation of the terms of this Consent Agreement.

24. For the purposes of this Consent Agreement, the term “execution”
means the date on which the final signature is affixed to this Consent
Agreement.
I, DAVID R. AUSTIN, M.D., HAVE READ AND UNDERSTAND THE FOREGOING CONSENT AGREEMENT. I UNDERSTAND THAT BY SIGNING IT, THAT I WAIVE CERTAIN RIGHTS. I SIGN THIS CONSENT AGREEMENT VOLUNTARILY, WITHOUT ANY THREAT OR PROMISE. I UNDERSTAND THAT THIS CONSENT AGREEMENT CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.

DATED: March 6, 2019

DAVID R. AUSTIN, M.D.

STATE OF Maine
KENNEBEC, S.S. (County)

Personally appeared before me the above-named David R. Austin, M.D., and swore to the truth of the foregoing based upon his own personal knowledge, or upon information and belief, and so far as upon information and belief, he believes it to be true.

DATED: March 6, 2019

NOTARY PUBLIC
MY COMMISSION ENDS: 14-03-19
Justice of the Peace

DATED: 3.7.2019

KENNETH W. LEHMAN, Esq.
Counsel for David R. Austin, M.D.
STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

DATED: 3/12/19

MAROULLA S. CLEATON, M.D., Chair

STATE OF MAINE DEPARTMENT
OF THE ATTORNEY GENERAL

DATED: March 12, 2019

MICHAEL MILLER
Assistant Attorney General

Effective Date: March 12, 2019
STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

In re: G. PAUL SAVIDGE, M.D. ) FIRST AMENDMENT TO
Complaint Nos. CR17-260, ) CONSENT AGREEMENT
CR18-122 )

This document is a First Amendment to Consent Agreement effective October 9, 2018, regarding disciplinary action imposed upon the license to practice medicine in the State of Maine held by G. Paul Savidge, M.D. ("First Amendment"). The parties to this First Amendment are: G. Paul Savidge, M.D. ("Dr. Savidge"), the State of Maine Board of Licensure in Medicine ("the Board"), and the Department of the Attorney General (the "Attorney General"). This First Amendment is entered into pursuant to 32 M.R.S. § 3282-A and 10 M.R.S. § 8003(5).

BACKGROUND

1. On October 9, 2018, the parties entered into a Consent Agreement for discipline upon the license to practice medicine in the State of Maine held by Dr. Savidge ("the Consent Agreement").

2. On February 12, 2019 the Board considered a monitoring report regarding Dr. Savidge’s compliance with the Consent Agreement and voted to offer Dr. Savidge this First Amendment. Absent acceptance of this First Amendment by Dr. Shea by signing it and dating it in front of a notary and returning it to the Maine Board of Licensure in Medicine, 137 State House Station, Augusta, Maine 04333-0137 on or before
March 11, 2019, the Board may take such further action it deems necessary.

**AMENDMENT**

3. Dr. Savidge, the Board, and the Department of the Attorney General hereby agree to amend the Consent Agreement dated October 9, 2018 by:

.1) Amending paragraph 11(c)(5) to read as follows:

No later than March 14, 2019, Dr. Savidge shall submit for approval by the Case Reporter or designee the name of a Physician Practice Monitor. The Physician Practice Monitor must be currently engaged in treating opioid addiction and prescribing suboxone (buprenorphine) in an office-based treatment program, and may not have any prior disciplinary action by a state licensing board. Until probation or the requirements of this subparagraph are terminated by the Board, Dr. Savidge shall not practice medicine more than thirty (30) consecutive calendar days without an active approved physician monitor. Dr. Savidge must cease active practice immediately upon conclusion of thirty (30) consecutive calendar days without an active approved physician monitor and may not practice thereafter until he has received approval for a Physician Practice Monitor as required by this subparagraph. Dr. Savidge and an approved Physician Practice Monitor must notify the Board within three (3) business days of the
termination of the monitoring of Dr. Savidge by the Physician Practice Monitor or if for any reason the monitoring required by this subparagraph has ceased. The Physician Practice Monitor shall monitor Dr. Savidge's compliance with prescribing and medical recordkeeping standards. The monitoring and medical record review contemplated by this subparagraph may NOT occur solely by telephone, and must include in person communication at least quarterly or via HIPAA compliant shared portal access or interface. The Physician Practice Monitor must randomly select and review at least ten (10) patient charts each month. The Physician Practice Monitor shall submit written reports to the Board every two months following his/her approval. In the reports to the Board, the Physician Practice Monitor shall provide a summary of his or her monitoring activities, Dr. Savidge’s compliance with universal precautions and buprenorphine product prescribing and medical recordkeeping standards, and shall identify any issues with medical decision-making or documentation. Dr. Savidge understands that the Physician Practice Monitor is an agent of the Board pursuant to 24 M.R.S. § 2511. Dr. Savidge shall permit the Physician Practice Monitor full access to his medical practice, including but not limited to all patient information. After receipt by the Board of at least six (6) Physician Practice Monitor reports, Dr. Savidge may request that
the Board modify or eliminate the requirements of this subparagraph. Upon receipt of such request, the Board shall review all information, and in its sole discretion, may maintain, modify, or eliminate the requirements of this subparagraph for any remaining period of probation. Dr. Savidge shall have a written plan for ensuring continuity of patient care in the event that he is unable to engage an approved Physician Practice Monitor and has to cease practicing.

4. Dr. Savidge acknowledges by his signature hereto that all other terms and conditions of the Consent Agreement effective October 9, 2018, as amended, remain in full force and effect.

5. Dr. Savidge acknowledges by his signature hereto that he has read this First Amendment, that he has had an opportunity to consult with an attorney before executing this First Amendment, that he executed this First Amendment of his own free will and that he agrees to abide by all terms and conditions set forth herein.

6. Dr. Savidge has been represented by Taylor D. Fawns, Esq., who has participated in the negotiation of the terms of this First Amendment.
I, G. PAUL SAVIDGE, M.D., HAVE READ AND UNDERSTAND THE FOREGOING FIRST AMENDMENT AND AGREE WITH ITS CONTENTS AND TERMS. I FURTHER UNDERSTAND THAT BY SIGNING THIS FIRST AMENDMENT, I WAIVE CERTAIN RIGHTS, INCLUDING THE RIGHT TO A HEARING BEFORE THE BOARD. I SIGN THIS FIRST AMENDMENT VOLUNTARILY, WITHOUT ANY THREAT OR PROMISE. I UNDERSTAND THAT THIS FIRST AMENDMENT CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.

Dated: 3/11/2019

G. PAUL SAVIDGE, M.D.

STATE OF MAINE
Cumberland, SS.

Before me this 11th day of March, 2019, personally appeared G. Paul Savidge, M.D., who after first being duly sworn, signed the foregoing First Amendment to Consent Agreement in my presence or affirmed that the signature above is his own.

Taylor D. Fawns
Bar #9169
Notary Public/Attorney at Law
My commission expires:

DATED: 3/11/2019

Taylor D. Fawns
TAYLOR D. FAWNS, ESQ.
Attorney for G. Paul Savidge, M.D.
STATE OF MAINE BOARD OF LICENSURE IN MEDICINE

DATED: 3/2/19

MAROULLA S. GLEATON, M.D.,
Chairman

STATE OF MAINE DEPARTMENT OF THE ATTORNEY GENERAL

DATED: March 2, 2019

MICHAEL MILLER
Assistant Attorney General

Effective Date: March 12, 2019
The following information is included:

A summary of all new licenses granted in February 2019 by license type (58);

A list of all individuals granted a new license in February 2019 by license type;

A summary of all pending applications by license type (152);

A list of online vs. paper renewals in February 2019 by license type (91.52%);

The number of licenses expired February 28, 2019 (27)

The number of licenses lapsed for date 11/30/2018 (23); and

The list of licenses withdrawn in February 2019 (2).

In addition, the overall licensing statistics include:

The number of active MD licenses (not including EC) March 1, 2019 (6187);

The number of active MD licenses with a Maine address (not including EC) on March 1, 2019 (3451);

The number of active PA/PAN licenses on March 1, 2019 (899);

The number of active PA/PAN licenses with a Maine address on March 1, 2019 (812); and

The number of licenses pending renewal on March 1, 2019 (32).

We look forward to your feedback.
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