State of Maine
Board of Licensure in Medicine
137 SHS, 161 Capitol Street
Augusta, Maine 04333-0137
March 8, 2011 Meeting
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State of Maine  
Board of Licensure in Medicine  
137 SHS, 161 Capitol Street  
Augusta, Maine 04333-0137  
March 8, 2011 Meeting

BOARD MEMBERS PRESENT  
Sheridan R. Oldham, M.D., Chairman  
Gary R. Hattfield, M.D., Board Secretary  
Cheryl Clukey  
George K. Dreher, M.D.  
Maroulla Gleaton, M.D.  
David D. Jones, M.D.  
David Nyberg, Ph.D.

BOARD STAFF PRESENT  
Randal C. Manning, Executive Director  
Mark C. Cooper, M.D., Medical Director  
Jean M. Greenwood, Board Coordinator  
Dan Sprague, Assistant Executive Director  
Tim Terranova, Consumer Assistant  
Maria MacDonald, Board Investigator

ATTORNEY GENERAL’S OFFICE  
Dennis Smith, Assistant Attorney General  
Detective Peter Lizanecz

Dr. Dumont and Ms. Baxter were excused.

The Board meets in public session with the exception of the times listed below, which are held in executive session. Executive sessions are held to consider matters which, under statute, are confidential (1 M.R.S.A. §405) and 10 M.R.S.A. §8003-B, and 22 M.R.S.A. § 1711-C.) The Board moved, seconded, and voted the following executive session times. During the public session portions of the meeting actions are taken on all matters discussed during executive session. Discussions are projected on a screen by PowerPoint projection.

PUBLIC SESSIONS
9:11 a.m. – 9:12 a.m.  
PURPOSE  
Call to Order
10:00 a.m.  
Public Session
10:11 a.m. - 10:12 a.m.  
Public Session
10:47 a.m. – 10:48 a.m.  
Public Session
12:07 p.m. - 12:07 p.m.  
Public Session
12:51 p.m. – 2:29 p.m.  
Public Session & Adjournment 2:29 p.m.

EXECUTIVE SESSION
9:12 a.m. – 10:00 a.m.  
Progress Reports & New Complaints
10:12 a.m. – 10:47 a.m.  
New Complaints and Assessment & Direction
11:04 a.m. – 12:07 p.m.  
Informal Conferences

RECESS
10:00 a.m. – 10:11 a.m.  
10:48 a.m. – 11:04 a.m.  
12:07 p.m. – 12:51 p.m.

I. CALL TO ORDER

Dr. Oldham called the meeting to order at 9:12 a.m.
A. AMENDMENTS TO AGENDA

1. Amend to the agenda in Section VII. (B) (3) A Consent Agreement for approval Venkatram Nethala, M.D.

B. SCHEDULED AGENDA ITEMS

1. INFORMAL CONFERENCE(S)
   11:00 a.m. CR 09-308
   11:00 a.m. CR 10-145

2. ADJUDICATORY HEARING
   CR 10-267 Timothy P. Toto, P.A.-C (Appeal Withdrawn)

II. PROGRESS REPORTS

1. CR 10-430

Dr. Hatfield moved to dismiss CR 10-430. Dr. Gleaton seconded the motion, which passed 6-0-0-1 with Dr. Dreher recused.

The complainant is upset that the physician refused to fill out forms pertaining to his employment and disability, and states that this refusal worsened the complainant’s ongoing anxiety.

The physician replies that he does not feel he is able to fill out such paperwork, and that he made this clear at their first appointment, discussing other possible alternatives and referring him to his primary care physician for further help. He also states that at each subsequent appointment he had a similar conversation with the patient, as the patient continued to request that the physician fill out similar paperwork at each appointment.

A review of the records shows good documentation that the physician did indeed tell the complainant that he was unable fill out his employment and disability related paperwork, and that he asked the complainant to bring this paperwork to his primary care physician for further assistance.

2. CR 10-051

Dr. Dreher moved to investigate further CR 10-051. Dr. Gleaton seconded the motion, which passed 6-0-0-1 with Dr. Nyberg recused.

3. CR 10-141

Dr. Dreher moved to dismiss CR 10-141. Dr Hatfield seconded the motion, which passed unanimously.
This complaint refers to an incident where the physician became upset regarding a problem with an order. She entered into an argument with a nurse resulting in investigations and legal charges which were resolved without official discipline or findings of guilt in the legal system. The Board feels the physician has had ample opportunity to consider her actions and understands the need to ensure she maintains a professional demeanor in all her clinical activities.

4. CR 10-435

Dr. Jones moved to order an Informal Conference in the matter of CR 10-435. Dr. Gleaton seconded the motion, which passed 6-0-0-1 with Dr. Dreher recused.

5. CR 10-486

Dr. Jones moved to order an Informal Conference in the matter of CR 10-486. Dr. Dreher seconded the motion, which passed 6-0-0-1 with Dr. Gleaton recused.

6. CR 10-163 PATRICK FALLON, M.D.

Dr. Gleaton moved to order an Adjudicatory Hearing in the matter of CR 10-163 Patrick Fallon, M.D. Dr. Dreher seconded the motion, which passed 5-0-0-2 with Dr. Hatfield and Dr. Jones recused.

7. COMPLAINT STATUS REPORT (FYI)

8. REVIEW DRAFT LETTERS OF GUIDANCE

A. CR 10-427 JENNIFER A. DIEHL, M.D.

Dr. Hatfield moved to approve the letter of guidance as edited in the matter of Jennifer A. Diehl, M.D. Dr. Gleaton seconded the motion, which passed unanimously.

B. CR 10-535 BEVERLY A. STOOPS, M.D.

Ms. Clukey moved to approve the letter of guidance in the matter of Beverly A. Stoops, M.D. Dr. Gleaton seconded the motion, which passed unanimously.

9. CONSUMER ASSISTANT FEEDBACK (FYI)

III. NEW COMPLAINTS

10. CR 10-536

Dr. Hatfield moved to dismiss CR 10-536. Dr. Nyberg seconded the motion, which passed unanimously.
The mother of a pediatric oncology patient complains that a surgeon improperly placed a portacath catheter. There were technical problems accessing the port, but x-rays confirmed the catheter was in proper position.

11. CR 10-537

Dr. Hatfield moved to dismiss CR 10-537. Dr. Nyberg seconded the motion, which passed unanimously.

The mother of a pediatric oncology patient complains that an oncologist ignored problems with a portacath catheter and made unprofessional comments to the mother. Review of the medical records shows the doctor did respond to problems with the portacath. The doctor denies making the alleged comments. The Board cannot make a judgment on the content of an unwitnessed conservation between two people.

12. CR 10-349

Dr. Hatfield moved to dismiss CR 10-349. Dr. Nyberg seconded the motion, which passed unanimously.

The complainant alleges that the physician neglected him and inappropriately refused to permit him “feed in” status as a result of his medical problems. The physician denied neglecting the patient, and denied inappropriately refusing to permit the patient “feed in” status. A review of the medical records corroborates the physician’s response.

13. CR 10-487

Dr. Gleaton moved to dismiss CR 10-487. Dr. Hatfield seconded the motion, which passed unanimously.

A patient complains the physician, who is an institutional Medical Director, refused to provide appropriate care following an injury to his knee. He states an outside consultant recommended surgery; however, the physician determined surgery was not necessary and recommended physical therapy. The complainant alleges that three months of physical therapy prior to the recommendation for surgery had been ineffective.

The physician responded that the injury can appropriately be treated by surgical and non-surgical means. He states he reviewed the patient’s medical record and felt that the injury could be managed non-surgically. A review of the medical record indicates the care was appropriate.

14. CR 10-457

Dr. Dreher moved to dismiss CR 10-457. Dr. Nyberg seconded the motion, which passed unanimously.
The patient states she saw the physician only once for less than five minutes and during that time he was unprofessional both in his attitude and in inappropriately suggesting a medication she has had an adverse response to. The physician’s reply, which is supported by the medical record, indicates he saw the patient at least twice for periods of 15 – 30 minutes, that he does not favor or recommend the medication in question and prescribed another medication in collaboration with the patient, and that the patient had expressed no dissatisfaction with his professionalism either to himself or to his nurse who saw the patient after she had seen the physician.

15. CR 10-509

Dr. Jones moved to dismiss CR 10-509. Dr. Gleaton seconded the motion, which passed unanimously.

In this case a patient complains the physician caused her to miscarry her pregnancy. The patient states the physician told her that her uterus was stuck and he pushed on it from the inside. She states he did this on several occasions, and once his hand was covered in blood.

The physician responded by explaining that the patient’s uterus was retroflexed and he manipulated it on one occasion 17 days prior to the miscarriage. He states her cervix was friable and frequently bled on examination. He states that the pathology report indicates that the miscarriage was the result of infection.

A review of the medical record indicates complaints of cramping and light bleeding throughout the pregnancy and the presence of infection. The miscarriage occurred seven days following the last office visit and four days following a normal ultrasound. This makes it unlikely that the pregnancy loss was caused by any intervention by the physician.

16. CR 10-510

Dr. Gleaton moved to dismiss CR 10-510. Dr. Nyberg seconded the motion, which passed unanimously.

This is essentially a billing complaint that should have been filed against the Professional Association (PA) which the treating physician once belonged to as a partner. The patient did not pay her 2003 bill and was subsequently discharged from the practice by the PA, not the physician. The complaint stems from the patient’s recent request for an appointment being denied on grounds she had been dismissed from the practice. Three alternative providers were suggested by the PA. The physician is no longer associated with the PA.

17. CR 10-532

Dr. Jones moved to dismiss CR 10-532. Dr. Nyberg seconded the motion, which passed unanimously.

The complaint states that the physician ordered heparin prophylaxis for deep vein thrombophlebitis (DVT) on this post-op patient without first seeing her or reviewing her chart.
She felt that the heparin could have caused a post-operative complication due to her type of surgery. When she was told this physician orders DVT prophylaxis on all of his post-op patients admitted to skilled care, she stated the physician needs to treat each patient as an individual.

The physician’s response states that he does prophylax all post-op patients in skilled care with heparin if there are no contraindications. He felt this patient had many risks for developing a DVT and no significant contraindication for heparin prophylaxis. He felt this treatment was within the standard of care for debilitated patients.

The physician also notes that skilled care regulations allow the physician up to 7 days to have an initial face to face meeting with the patient after the patient is admitted. He states that his visit was only 5 days after the admission, well within CMS’s (Medicare) guidelines. This physician does depend on information conveyed by phone by the admitting nurse who reviews the patient’s care needs and discharge summary from the previous admission. The nurse, in turn, depends on the previous institution’s discharge summary, which, in this case, did not address DVT prophylaxis. This procedure also is within the standard of care.

Upon review of the record, the Board finds the physician’s care appropriate for the skilled care setting, but would urge him to consider which surgical services would not want their post-operative patients to receive DVT prophylaxis.

18. CR 10-568

Ms. Clukey moved to dismiss CR 10-568. Dr. Gleaton seconded the motion, which passed unanimously.

The complainant alleges that the physician did not provide appropriate treatment and would have provided better treatment if the complainant had insurance.

The physician describes a thorough workup and conservative treatment with a focus on a trial of medication management rather than surgical intervention. The original problem was stabilized with other remaining symptoms not requiring invasive treatments.

The physician explained he did not provide the alternative invasive procedure in Maine but could have done so at another institution outside of Maine. However, two hospitals within Maine do offer this procedure and, if the patient had needed it, MaineCare would have therefore required her to have it done in-state.

19. CR 10-582

Dr. Oldham moved to order an Informal Conference in conjunction with a previously ordered Informal Conference in the matter of CR 10-582. Dr. Gleaton seconded the motion, which passed unanimously.

20. CR 10-598
Ms. Clukey moved to dismiss CR 10-598. Dr. Gleaton seconded the motion, which passed unanimously.

In this case the mother complains the physician did not treat her daughter appropriately. She complains the physician was not present at the birth of her child, did not address feeding issues and did not appropriately evaluate and treat a scalp lesion. The physician responded that he had planned to attend the delivery; however, an unanticipated forceps delivery occurred. He states the infant received formula feedings while in the hospital and showed adequate weight gain at subsequent office visits. He states there was no evidence of trauma/lesions to the back of the scalp at discharge and that the lesion was appropriately evaluated when examined subsequently at the office. Review of the medical records reveals the medical care was appropriate. Weight loss following the birth is common and the amount in this case was not of concern. The infant sustained a cephalohematoma at birth and was managed appropriately. There was no need for intervention at the time the physician saw the patient during a follow-up visit.

21. CR 10-603

Dr. Dreher moved to investigate further CR 10-603 and order a 3286 examination. Dr. Nyberg seconded the motion, which passed unanimously.

22. CR 10-525 JOSHUA P. WERBLIN, M.D.

Dr. Dreher moved to order an Adjudicatory Hearing in the matter of CR 10-525 Joshua P. Werblin, M.D. Dr. Gleaton seconded the motion, which passed unanimously.

23. (Intentionally Left Blank)

IV. ASSESSMENT & DIRECTION

24. AD 10-539

Dr. Gleaton moved to file AD 10-539. Dr. Hatfield seconded the motion, which passed unanimously.

V. INFORMAL CONFERENCE(S)

A. CR 09-308

Dr. Dreher moved to dismiss CR 09-308. The motion passed unanimously.

This case revolved around a complex patient who was not responding adequately to non-controlled medication options, and whose use of controlled medications was problematic due to a history of treatment for substance abuse. The physician involved has learned of the need for collaboration with other providers, more effective and frequent monitoring and caution in providing controlled substances. The Board suggests he attend a course in addiction medicine to help in these efforts.
B. **CR 10-145 Paul E. Plumer, P.A.-C.**

Dr. Jones moved to dismiss the Board complaint against Paul E. Plumer, P.A.-C CR 10-145 with a letter of guidance. The motion passed unanimously.

In this case, the Board received information that Mr. Plumer’s employment at a Maine hospital had been terminated for what was felt to be an excessive number of patient complaints. The Board issued a complaint of unprofessional conduct. Mr. Plumer responded by describing the patient complaints and alleged he was held accountable for a faulty system over which he had no control. After review, the Board voted to investigate further and obtain additional information. After review of that information, the Board voted to invite Mr. Plumer to an Informal Conference to discuss issues of communication and professionalism.

Even though the Board concluded that Mr. Plumer’s behavior did not rise to a level of misconduct sufficient to warrant disciplinary action, the Board conveyed serious concerns about his actions and expects that he will: 1) Recognize the importance of empathetic communication with patients; and 2) Avail himself of appropriate education or counseling regarding communication with patients.

**PUBLIC SESSION**

VI. **MINUTES OF FEBRUARY 8, 2011**

Dr. Gleeton moved to accept the minutes of February 8, 2011. Dr. Jones seconded the motion, which passed 6-0-1-0 with Dr. Dreher abstaining.

VII. **BOARD ORDERS & CONSENT AGREEMENT MONITORING AND APPROVAL**

A. **BOARD ORDERS (none)**

B. **CONSENT AGREEMENT MONITORING AND APPROVAL**

1. **DANIEL BOBKER, M.D.**

Dr. Dreher moved to accept the proposed modification of Dr. Bobker’s consent agreement to increase his work hours. Dr. Gleeton seconded the motion, which passed 6-0-0-1 with Dr. Hatfield recused.

2. **DEBORAH J. CHARETTE, P.A.-C [SEE APPENDIX A ATTACHED]**

Dr. Dreher moved to approve a Consent Agreement which allows Ms. Charette to withdraw her Maine physician assistant license while under investigation, which is an adverse licensing action that the Board will report as a “surrender of licensure” to the National Practitioner Data Bank, the Healthcare Integrity and Protection Data Bank, and the Federation of State Medical Boards. In addition the Board agrees to close complaint
CR 10-280 without further action. Dr. Gleeton seconded the motion, which passed 6-0-0-1 with Dr. Jones recused.

3. VENKATRAM NETHALA, M.D. [SEE APPENDIX B ATTACHED]

Dr. Nyberg moved to accept a Consent Agreement for Conditional License of Venkatram Nethala, M.D. Dr. Gleeton seconded the motion, which passed unanimously.

VIII. ADJUDICATORY HEARING CR 10-267 TIMOTHY P. TOTO, P.A.-C.

The adjudicatory hearing did not take place because Mr. Toto withdrew his appeal of the Board’s decision to preliminary deny his application for reinstatement of his physician assistant license. Therefore, the Board’s decision to preliminarily deny Mr. Toto’s application for the reinstatement of his physician assistant license is now final.

IX. REMARKS OF CHAIRMAN

A. STATUTES – BOARD PROCESSES

Dr. Oldham reviewed the statutes regarding the election of officers to the Board which takes place in July of uneven numbered years.

B. DELEGATES TO FSMB ANNUAL MEETING

Dr. Dreher moved to allow Dr. Cooper to attend on scholarship the Federation of State Medical Boards Annual Meeting in Seattle April 28 – 30, 2011. Dr. Gleeton seconded the motion, which passed unanimously.

Dr. Gleeton moved to endorse Mr. Manning’s attendance at the Federation of State Medical Boards Annual Meeting in Seattle as a member of the FSMB Board of Directors. Dr. Hatfield seconded the motion, which passed unanimously.

X. EXECUTIVE DIRECTOR’S MONTHLY REPORT

The Board accepted the report of the Executive Director.

A. COMPLAINT STATUS REPORT (FYI)

B. POLICY REVIEW: FEES, RENEWAL LATE FEE WAIVER

Dr. Nyberg moved to reaffirm the Board policy “Fees, Renewal Late Fee Waiver.” Dr. Jones seconded the motion, which passed unanimously.

C. DRAFT POLICY: NOTIFICATION OF MANDATED REPORTERS

The Board directed staff to bring a revised version of this policy to the next Board meeting.
XI. MEDICAL DIRECTOR’S REPORT

A. INVESTIGATIONS OF MEDIA REPORTS

Dr. Cooper discussed media reports of prescription drug arrests and presented the most recent data on prescription drug overdoses from reports by Dr. Greenwald and Dr. Sorg.

XII. REMARKS OF ASSISTANT ATTORNEY GENERAL (none)

XIII. SECRETARY’S REPORT

A. LIST A

1. M.D. LIST A LICENSES FOR RATIFICATION

Dr. Gleteon moved to ratify the physicians on List A below for licensure. Dr. Nyberg seconded the motion, which passed unanimously.

The following M.D. license applications have been approved by Board Secretary Gary R. Hatfield, M.D. without reservation:

<table>
<thead>
<tr>
<th>NAME</th>
<th>SPECIALTY</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alifo, Augustine Y.</td>
<td>Emergency Medicine</td>
<td>Not Listed</td>
</tr>
<tr>
<td>Baker, Justin J.</td>
<td>Anatomic Pathology</td>
<td>Not Listed</td>
</tr>
<tr>
<td>Borodkina, Marina</td>
<td>Physical Medicine &amp; Rehabilitation</td>
<td>Not Listed</td>
</tr>
<tr>
<td>Chabrier, Linda A.</td>
<td>Anesthesiology</td>
<td>Caribou</td>
</tr>
<tr>
<td>Fisher, Mary Jo</td>
<td>Family Medicine</td>
<td>Augusta</td>
</tr>
<tr>
<td>Golub, Robert</td>
<td>General Surgery</td>
<td>Not Listed</td>
</tr>
<tr>
<td>Hull, David J.</td>
<td>Anatomic &amp; Clinical Pathology</td>
<td>Not Listed</td>
</tr>
<tr>
<td>Kinsey, Richard S.</td>
<td>Anatomic &amp; Clinical Pathology</td>
<td>Not Listed</td>
</tr>
<tr>
<td>Klein, Kelly R.</td>
<td>Emergency Medicine</td>
<td>Not Listed</td>
</tr>
<tr>
<td>Linderman, James A.</td>
<td>Pediatrics</td>
<td>Waterboro</td>
</tr>
<tr>
<td>MacGregor, Douglas N.</td>
<td>Pediatric Hematology &amp; Oncology</td>
<td>Not Listed</td>
</tr>
<tr>
<td>Riba, Ali K.</td>
<td>Anatomic &amp; Clinical Pathology</td>
<td>Not Listed</td>
</tr>
<tr>
<td>Rosenberg, Gerald M.</td>
<td>Orthopedic Surgery</td>
<td>Ellsworth</td>
</tr>
<tr>
<td>Rutstein, David C.</td>
<td>Family &amp; Preventative</td>
<td>Eliot</td>
</tr>
</tbody>
</table>

2. P.A. LIST A LICENSES FOR RATIFICATION

Dr. Gleteon moved to ratify the physician assistants appearing on List A below for licensure. Dr. Jones seconded the motion, which passed unanimously.

The following physician assistant license applications have been approved by Board Secretary Gary R. Hatfield, M.D. without reservation:
B. LIST B APPLICATIONS FOR INDIVIDUAL CONSIDERATION

1. JOEL A. HENDLER, M.D.

The Licensure Committee moved to approve the license application of Joel A. Hendler, M.D. The motion passed 6-0-0-1 with Dr. Jones recused.

C. LIST C APPLICATION(S) FOR REINSTATEMENT

Dr. Gleaton moved to ratify the Board Secretary’s approval of the physician on List C below for reinstatement to inactive status license. Dr. Jones seconded the motion, which passed unanimously.

<table>
<thead>
<tr>
<th>NAME</th>
<th>SPECIALTY</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Muhammad Z. Jared, M.D.</td>
<td>Geriatric Medicine</td>
<td>N/A</td>
</tr>
</tbody>
</table>

D. LIST D – WITHDRAWALS

1. LIST D (1) WITHDRAW LICENSE APPLICATION (NONE)

2. LIST D (2) WITHDRAW LICENSE FROM REGISTRATION

Dr. Gleaton moved to allow the physicians on List D (2) below to withdraw their licenses from registration. Ms. Clukey seconded the motion, which passed unanimously.

The following physicians have applied to withdraw their licenses from registration:

<table>
<thead>
<tr>
<th>NAME</th>
<th>LICENSE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mohmma Al-Karain, M.D.</td>
<td>016197</td>
</tr>
<tr>
<td>Steven Bonawitz, M.D.</td>
<td>013854</td>
</tr>
<tr>
<td>John Burch, M.D.</td>
<td>018108</td>
</tr>
<tr>
<td>McCallum R. Hoyt, M.D.</td>
<td>016137</td>
</tr>
<tr>
<td>Stuart Stein, M.D.</td>
<td>015529</td>
</tr>
</tbody>
</table>

3. LIST D (2) WITHDRAW LICENSE FROM REGISTRATION INDIVIDUAL CONSIDERATION (NONE)

E. LIST E – LICENSES TO LAPSE BY OPERATION OF LAW

The following physician’s licenses lapsed by operation of law effective February 23, 2011.
NAME  LICENSE NO.
Amparo, Evelina G.  016958
Attia, Nader Emil  009016
Badia, Jennifer L.  018232
Barrett, Peter J.  017254
Britton, Elisabeth M.  016608
Carlisle, Betty  018079
Carraher, June A.  018080
Cummings, Paul H.  006010
Drake, Theodore E.  013336
Hollister, Katherine A.  015229
Kandasamy, Srikanthan  013875
Kernberg, Martin  016574
Kite, Lisa L.  018282
Koopmann, Sarah E  018071
Lufty-Clayton, Lucienne  016845
McCann, Eithne C.  008699
McKinley, Lauren  017613
Medendez, Mercedes E.  016675
Meyer, Mel R.  016929
Morin, Paul M.  010712
Netland, Karin E.  016453
Pallimalli, Sai Lakshmi  018279
Pang, Kam  017609
Popli, Alka S.  017455
Quinn, Elizabeth E.  017704
Rapelyea, Melvin S.  016807
Rashid, Saima  017123
Richardson Jr., Henry B.  008063
Ritchie, Robert F.  005774
Ruddy, Theresa W.  017857
Tan, Cesar L.  010621

F. LIST F – LICENSEES REQUESTING TO CONVERT TO ACTIVE STATUS

1. SUBHASH A. VYAS, M.D.

The Licensure Committee moved to preliminarily deny, with leave to withdraw, the application of Subhash A. Vyas, M.D. to convert to his license to active status based on a lack of clinical experience and a finding of incompetence by the Kentucky Board of Medical Licensure. The motion passed unanimously.

G. LIST G RENEWAL APPLICATIONS FOR INDIVIDUAL REVIEW

1. MARJORIE B. SNYDER, M.D.
The Licensure Committee moved to renew the license of Marjorie B. Snyder, M.D. provided the outstanding complaint is dismissed. The motion passed unanimously.

2. JOHN M. DORN, M.D.

The Licensure Committee moved to roll the pended license renewal application into the Adjudicatory Hearing previously ordered. The motion passed unanimously.

H. LIST H – PHYSICIAN ASSISTANT SCHEDULE II AUTHORITY REQUESTS FOR RATIFICATION

1. LIST H (1) APPLICATIONS TO RENEW SCHEDULE II AUTHORITY

Dr. Jones moved to ratify the Board Secretary’s approval of the renewal of the Schedule II prescribing authority for the following physician assistants. Dr. Gleaton seconded the motion, which passed unanimously.

The following renewal requests for Schedule II prescribing authority have been approved by the Board Secretary Gary R. Hatfield, M.D.

<table>
<thead>
<tr>
<th>NAME</th>
<th>PSP</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>David Pellin, P.A.-C.</td>
<td>Lisa Nielsen, M.D.</td>
<td>Patten</td>
</tr>
<tr>
<td>Gale Tinker, P.A.-C.</td>
<td>Andrew Sherwood, M.D.</td>
<td>Bangor</td>
</tr>
<tr>
<td>Anne Rolfson, P.A.-C.</td>
<td>Philip Anson, M.D.</td>
<td>Falmouth</td>
</tr>
</tbody>
</table>

2. LIST H (2) APPLICATIONS FOR SCHEDULE II AUTHORITY

The following physician assistant applications have been approved for Schedule II Authority by Board Secretary Gary R. Hatfield, M.D.

Dr. Gleaton moved to ratify the Board Secretary’s approval for Schedule II Authority for the following physician assistants. Ms. Clukey seconded the motion, which passed unanimously.

<table>
<thead>
<tr>
<th>NAME</th>
<th>PSP</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christine Thomas, P.A.-C.</td>
<td>Krista Burchill, M.D.</td>
<td>Caribou</td>
</tr>
<tr>
<td>Michelle Wilson, P.A.-C.</td>
<td>Joseph Babbitt, M.D.</td>
<td>Blue Hill</td>
</tr>
<tr>
<td>Julia Barrett, P.A.-C.</td>
<td>James Fine, M.D.</td>
<td>Brunswick</td>
</tr>
<tr>
<td>Michael Moreau, P.A.-C.</td>
<td>Rafael Grossman, M.D.</td>
<td>Bangor</td>
</tr>
</tbody>
</table>

XIV. STANDING COMMITTEE REPORTS

A. SPECIAL PROJECTS COMMITTEE

Dr. Gleaton reported the Special Projects Committee (SPC) met this morning to begin plans for dissemination of the Informed Consent document. With the Board’s approval the SPC
proposes to: 1) contact the medical directors of the four residency programs in Maine and ask for their cooperation in presenting the Informed Consent document as part of their educational program for residents; and 2) send the guidelines regarding Informed Consent along with a cover letter signed by Dr. Cooper to all licensees in an already planned informational mailing about taking the written exam online.

Dr. Jones moved to approve the Special Projects Committee’s proposal for dissemination of the Informed Consent document. Dr. Dreher seconded the motion, which passed unanimously.

B. LEGISLATIVE AND REGULATORY COMMITTEE

Mr. Manning reported on the bills that will be followed that potentially could impact the Board.

C. LICENSURE COMMITTEE

1. ONLINE RELEASE OF WRITTEN EXAM FOR DISCUSSION - FYI

D. PUBLIC INFORMATION COMMITTEE

Ms. Clukey reported work has commenced on the spring newsletter.

E. PHYSICIAN ASSISTANT ADVISORY COMMITTEE

PA Advisory Committee members who are up for reappointment and new candidates for the committee will be presented for approval at the next meeting.

XV. BOARD CORRESPONDENCE - FYI

XVI. FYI (None)

XVII. FSMB MATERIAL - FYI

XVIII. ADJOURNMENT 2:30 p.m.

Respectfully submitted,

Jean M. Greenwood
Administrative Assistant
Board Coordinator
STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

In re: ) CONSENT
Deborah J. Charette, PA-C ) AGREEMENT
Complaint No. CR10-280 )

This document is a Consent Agreement, effective when signed by all parties, regarding an adverse licensing action that is reportable as "a surrender of licensure" to the National Practitioner Data Bank, the Healthcare Integrity and Protection Data Bank, and the Federation of State Medical Boards regarding the license to practice as a physician assistant in the State of Maine held by Deborah J. Charette, PA-C. The parties to the Consent Agreement are: Deborah J. Charette, PA-C ("Ms. Charette"), the State of Maine Board of Licensure in Medicine ("the Board"), and the State of Maine Office of the Attorney General ("the Attorney General"). This Consent Agreement is entered into pursuant to 10 M.R.S.A. § 8003(5)(B) and 32 M.R.S.A. § 3282-A.

STATEMENT OF FACTS

1. At all times relevant to the complaint, Ms. Charette was licensed as a physician assistant in the State of Maine. The Board first issued a physician assistant license to Ms. Charette on November 4, 2004.

2. On or about January 28, 2010, the Board received an application from Ms. Charette to withdraw from licensure. That application was pended until the Board could determine that there were no grounds to discipline her license.

3. On March 3, 2010, the Board received a letter from the Maine Medical Professionals Health Program (MMPHP) indicating that Ms. Charette had not pursued a comprehensive evaluation as recommended after she allegedly self-prescribed Xanax.
4. On May 20, 2010, the Board received another letter from the MMPHP indicating that Ms. Charette had failed to follow through with scheduling and completing a comprehensive psychological profile, generating concern about her safe practice of medicine.

5. On or about June 16, 2010, the Board reviewed the information from the MMPHP and, pursuant to its authority under 32 M.R.S.A. § 3282-A(2), voted to initiate a complaint against Ms. Charette’s Maine physician assistant license. The Board docketed the complaint as CR10-280.

6. On November 12, 2010, the Board received a written response from Ms. Charette to complaint CR10-280. In her response, Ms. Charette denied self-prescribing Xanax or abusing any other drug.

7. On or about December 13, 2010, the Board received a copy of the comprehensive psychological profile regarding Ms. Charette. On January 11, 2011, the Board reviewed the comprehensive psychological profile, together with all materials related to complaint CR10-280. Following its review, the Board voted to offer Ms. Charette the opportunity to “withdraw her Maine physician assistant license while under investigation, which would be reportable as ‘a surrender of licensure’” to the National Practitioner Data Bank, the Healthcare Integrity and Protection Data Bank, and the Federation of State Medical Boards.

8. Absent Ms. Charette’s acceptance of this Consent Agreement by signing it, dating it, having it notarized, and returning it to Maureen Lathrop, Investigative Secretary, Maine Board of Licensure in Medicine, 137 State House Station, Augusta, Maine 04333-0137 on or before February 21, 2011, the Board will take further action with regard to complaint CR10-280.
COVENANTS


10. Ms. Charette agrees to "withdraw her Maine physician assistant license while under investigation." In addition, Ms. Charette agrees and understands that her withdrawal of licensure while under investigation is "an adverse licensing action that the Board will report as 'a surrender of licensure' to the National Practitioner Data Bank, the Healthcare Integrity and Protection Data Bank, and the Federation of State Medical Boards."

11. The Board agrees to allow Ms. Charette "to withdraw her Maine physician assistant license while under investigation," which is an adverse licensing action that the Board will report as a "surrender of licensure" to the National Practitioner Data Bank, the Healthcare Integrity and Protection Data Bank, and the Federation of State Medical Boards. In addition, the Board agrees to close complaint CR10-280 without further action.

12. Ms. Charette waives her right to a hearing before the Board or any court regarding all findings, terms and conditions of this Consent Agreement. Ms. Charette agrees that this Consent Agreement and Order is a final order resolving the complaint CR10-280. This Consent Agreement is not appealable and is effective until or unless modified or rescinded in writing by the parties hereto. This Consent Agreement cannot be amended orally. It can only be amended by a writing signed by the parties hereto and approved by the Office of Attorney General.

13. The Board and the Office of the Attorney General may communicate and cooperate regarding Ms. Charette or any other matter relating to this Consent Agreement.

14. This Consent Agreement is a public record within the meaning of 1 M.R.S.A. § 402 and will be available for inspection and copying by the public pursuant to 1 M.R.S.A. § 408.
15. Nothing in this Consent Agreement shall be construed to affect any right or interest of any person not a party hereto.

16. The Board and Ms. Charette agree that no further agency or legal action will be initiated against her by the Board based upon complaint CR10-280.

17. Ms. Charette acknowledges by her signature hereto that she has read this Consent Agreement, that she has had an opportunity to consult with an attorney before executing this Consent Agreement, that she executed this Consent Agreement of her own free will and that she agrees to abide by all terms and conditions set forth herein.

I, DEBORAH J. CHARETTE, PA-C, 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:        Feb 15, 2011       Deb Charette

DEBORAH J. CHARETTE, PA-C

STATE OF Maine

S.S.

Personally appeared before me the above-named Deborah Charette, PA-C, and swore to the truth of the foregoing based upon her own personal knowledge, or upon information and belief, and so far as upon information and belief, she believes it to be true.

DATED:        2-15-11

Jessica St. Jean
Notary Public
State of Maine
My Commission Expires
December 29, 2011
STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

DATED: 2/8/2011

SHERIDAN R. OLDHAM, M.D., Chairman

STATE OF MAINE OFFICE
OF THE ATTORNEY GENERAL

DATED: 5/8/11

DENNIS E. SMITH
Assistant Attorney General

Effective Date:
STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

In re: Venkatram Nethala, M.D.) CONSENT AGREEMENT
) FOR CONDITIONAL LICENSURE

This document is a Consent Agreement for Conditional Licensure, effective when signed by all parties, regarding the permanent application to practice medicine in the State of Maine filed with the State of Maine Board of Licensure in Medicine by Venkatram Nethala, M.D. The effect of this Consent Agreement is to issue a conditional license to practice medicine in the State of Maine to Venkatram Nethala, M.D. The parties to the Consent Agreement are: Venkatram Nethala, M.D. (“Dr. Nethala”), the State of Maine Board of Licensure in Medicine (“the Board”) and the State of Maine Department of the Attorney General (“the Attorney General”). This Consent Agreement is entered into pursuant to 10 M.R.S. § 8003(5) and 32 M.R.S. § 3282-A.

STATEMENT OF FACTS

1. On February 17, 2010, the Board received a “Permanent MD License Application” from Dr. Nethala. Dr. Nethala specializes in Cardiology and Internal Medicine. On his application for licensure, Dr. Nethala disclosed that he had been charged for Driving While Intoxicated in New Hampshire in February 2009. Dr. Nethala also indicated that he had joined the New Hampshire Physician Health Program (NHPHP), and provided the Board with a copy of his contract with the NHPHP dated April 2, 2009; he had joined the Maine Medical Professional Health Program.

2. On or about February 19, 2010, the Board received information from Lakes Region General Hospital in Laconia, New Hampshire, indicating that in March of 2009 Dr. Nethala had entered into the New Hampshire Professional Health Program for alcohol dependency and was on leave of absence from that facility from March 27, 2009 until August 14, 2009 while undergoing treatment. The Board received no information to suggest that Dr. Nethala provided substandard treatment to his patients or actually endangered the health or safety of any of his patients.

3. On February 25, 2010, the Board received a copy of the Guildford, New Hampshire Police Department report regarding the arrest of Dr. Nethala on February 17, 2009, for Driving While Intoxicated. According to the police report, Dr. Nethala was stopped at approximately 7:10 p.m. for erratic operation, and was later tested as having a blood-alcohol content of .15. On August 4, 2010, the State of New Hampshire reduced the charge against Dr. Nethala from a misdemeanor criminal charge to a civil violation, which resulted in Dr. Nethala not being convicted of a crime.

4. On September 14, 2010, the Board reviewed Dr. Nethala’s application for a
permanent Maine medical license, including the foregoing information. Following its review, the Board voted to offer Dr. Nethala this Consent Agreement for Conditional Licensure.

5. Absent Dr. Nethala's acceptance of this Consent Agreement for Conditional Licensure by signing 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 7, 2011, the matter shall be brought back to the Board for further action.

6. By signing this Consent Agreement, Dr. Nethala waives, in his personal capacity and through legal counsel, any and all objections to, and hereby consents to allow the Board's legal counsel to present this proposed Consent Agreement to the Board for possible ratification on March 8, 2011. Dr. Nethala waives, in his personal capacity and through legal counsel, forever any arguments of bias or otherwise against any of the Board members in the event that the Board fails to ratify this proposed Consent Agreement.

COVENANTS

7. Dr. Nethala neither admits nor denies the allegations contained herein. However, Dr. Nethala concedes that, based upon the evidence in possession of the Board that with regard to his application for a permanent Maine medical license, the Board has sufficient evidence from which it could reasonably conclude that Dr. Nethala engaged in habitual substance abuse that was foreseeably likely to result in his performing services in a manner that endangered the health or safety of patients. Dr. Nethala acknowledges that such conduct constitutes grounds for the denial of his application for a permanent Maine medical license pursuant to 32 M.R.S. § 3282-A(2)(B).

CONDITIONS OF LICENSURE

8. In light of the concessions in paragraph 7 above, as well as Dr. Nethala's acceptance of responsibility, his efforts to seek treatment and his commitment to refrain from the use of alcohol and to maintain a healthy and continuous recovery, the Board agrees to issue and Dr. Nethala agrees to accept a Maine medical license subject to the following conditions:

a. ABSTINENCE. Dr. Nethala agrees that, following the execution of this Consent Agreement, he shall completely abstain from the use of any and all Prohibited Substances. "Prohibited Substances" as used throughout this Consent Agreement shall mean: benzodiazepines; sedatives; hypnotics or similar drugs; opiates; alcohol; Fentanyl; morphine, Demerol, Vicodin, Percocet, mood, consciousness or mind-altering substances, whether illicit or not; and all drugs which are dispensed to or prescribed for him by anyone other than a single primary care physician pursuant to paragraph 8(b) of this Consent Agreement, unless the circumstances constitute a genuine medical or surgical emergency.

b. 

1 For the purpose of this consent agreement the term "execution" shall mean the date that the final signature is affixed to this consent agreement.
(1). Prescription Medication. If any controlled drug is dispensed or prescribed for Dr. Nethala for a personal medical condition, Dr. Nethala or the Supervising Physician shall notify the Board by telephone and in writing within 48 hours or as soon thereafter as possible. This notice shall be followed by a written summary of all pertinent circumstances. The Board shall be apprised of all continuing pertinent circumstances regarding continued use of the controlled drug, and a written report thereof shall be submitted to the Board.

(2). Future Use of Prohibited Substances Shall Result in Loss of Licensure. Dr. Nethala agrees and understands that any reliable evidence of his use at any time in the future, whether in Maine or elsewhere, of any Prohibited Substance, including but not limited to benzodiazepines, sedatives, hypnotics, opiates, Fentanyl, morphine, Demerol, or alcohol, shall constitute a violation of this Consent Agreement, which \textbf{SHALL RESULT IN THE IMMEDIATE, INDEFINITE AUTOMATIC SUSPENSION OF LICENSURE, AND PROOF OF USE MAY RESULT IN PERMANENT REVOCATION OF LICENSURE.}

b. SINGLE PHYSICIAN. Dr. Nethala agrees and understands that, with the sole exception of medications permitted by the Board to be prescribed to him by his Board-approved treating psychiatrist, he shall only obtain his prescription medication(s) from a single primary care physician approved by the Board. Dr. Nethala agrees and understands that he will not make any unilateral changes to the medication regimen prescribed for him by his Board approved primary care physician. In addition, Dr. Nethala agrees that any and all prescriptions for medications that are prescribed to him by his Board-approved primary care physician and psychiatrist shall be filled by him in the State of Maine and at a single pharmacy.

c. SUBSTANCE MONITORING.\footnote{Dr. Nethala understands and agrees that, for the duration of this Consent Agreement, he will undergo some level of substance monitoring to test whether he has used a Prohibited Substance. The monitoring shall be through urinalysis testing and/or blood testing, and any other reliable method which may later be developed and approved by the Board. Dr. Nethala irrevocably agrees that the Board and the Maine Department of Attorney General will have full access to all test data and reports. Dr. Nethala shall execute any and all releases necessary for the Board and/or the Attorney General to have full access to all data and reports pertaining to his substance monitoring.}

(1). Supervising Physician. Dr. Nethala shall propose a Supervising Physician (the “Supervising Physician”), who shall be approved by the Board who shall have Dr. Nethala provide urine samples for testing for the presence of Prohibited Substances. Under no circumstances shall Dr. Nethala fail to appear and/or provide a urine sample for testing as required by this Consent Agreement.

(2). Process. All urine and/or blood samples shall be handled through legal chain of custody methods. All samples provided shall be analyzed by a certified

\footnote{The substance abuse monitoring pursuant to this Consent Agreement may, at the approval of the Board, be performed by the Medical Professionals Health Program.}
laboratory, which regularly handles drug monitoring tests. All samples shall be tested for the presence of Prohibited Substances, specifically including but not limited to alcohol.

(3). Frequency of Urine Testing. It is Dr. Nethala’s obligation to ensure that all the samples are given and tests occur as specified in this Consent Agreement. Testing shall be randomly scheduled. Notwithstanding any other provision of this Consent Agreement, the Board, the Supervising Physician, or the Board’s agent may request Dr. Nethala to submit to testing at any time. Failure to maintain this schedule or the random nature of the tests shall cause for suspension, non-renewal or revocation of Dr. Nethala’s Maine medical license, unless proof of genuine emergent medical circumstances (for Dr. Nethala or a patient) exist which warrant less serious disciplinary actions being taken by the Board. For the indefinite period following the execution of this Consent Agreement, Dr. Nethala shall provide urine samples for testing for the presence of Prohibited Substances at least twice a month.

(4). Reporting Test Results. It is Dr. Nethala’s responsibility to ensure that all test results are reported promptly to the Board.

(a). Immediate Report of Positive Test Results. Any test result evidencing any level of a Prohibited Substance, whether by urine or other sample, shall be reported to the Board by telephone and in writing within 24 hours or as soon thereafter as possible.

(b). Reporting Negative Test Results. Written reports of all tests shall be sent to the Board monthly, together with an explanation of the dates and times samples were provided and tests made, the type(s) of tests made, and the substances tested for (together with detectable levels tested for), and the test results. Dr. Nethala shall ensure that all reports are made to the Board in a timely fashion.

(c). Confidentiality Waived. With regard to the Board and its agents and any process to be pursued by the Board, Dr. Nethala hereby waives all claims of confidentiality and privilege with respect to all tests taken and test results pursuant to this Consent Agreement. Dr. Nethala shall execute any and all releases in order for the Board to obtain access to and copies of all urine test results.

(5). Rebuttatable Presumption Raised by Positive Test. It is agreed and understood that a test evidencing the presence of any Prohibited Substance, shall raise a rebuttable presumption that such substance was in fact used by Dr. Nethala. Such a positive test result shall alone, including any test result showing the presence of ethyl glucuronide, be sufficient to prove the use of the Prohibited Substance by Dr. Nethala. Dr. Nethala further agrees that the result of the test may be admitted into evidence in any proceeding regarding his Maine medical license, whether before the Board or before a Court of competent jurisdiction. Dr. Nethala is hereby advised that the ingestion of poppy seeds, mouthwash and over the counter cough or cold medicines or remedies has from time to time been raised as a defense to a positive screen result for morphine, opiates and/or alcohol. For that reason, Dr. Nethala agrees to refrain from ingesting poppy seeds in any food substances, mouthwash and over the counter cough or cold medicines or remedies during the period of this Consent Agreement. In the event that Dr.
Nethala has a positive screen for morphine, opiates and/or alcohol, Dr. Nethala agrees that the ingestion of poppy seeds and/or mouthwash and/or over the counter cough or cold medicines shall not constitute a defense to such a positive screen.

(6). **Immediate, Indefinite, Automatic Suspension for Positive Test.** If any urine or blood test is positive (i.e., in any manner evidences any use of any Prohibited Substance — including a positive result for the presence of ethyl glucuronide, a metabolite of alcohol), then the result shall be the immediate, indefinite, automatic suspension of Dr. Nethala’s Maine medical license, which shall continue until the Board holds a hearing on the matter, unless the Board, or the Board Secretary and the Department of Attorney General, earlier determine that the report is without merit. The suspension shall become effective at the time that Dr. Nethala receives actual notice from the Board that a report of violation(s) has been made. Actual notice can be provided by telephone, in person, in writing, by another means or any combination of the above-referenced means.

(7). **Board Hearing to Determine if Dr. Nethala Used Any Prohibited Substance.** After receiving a positive report evidencing use by Dr. Nethala of any Prohibited Substance, the Board shall investigate the situation, including demanding a response from Dr. Nethala. The Board will hold a hearing within 60 days of the automatic suspension or as soon thereafter as practicable (unless both Dr. Nethala and the Board agree to hold the hearing later) and it shall be held pursuant to the Maine Administrative Procedure Act.

(8). **Failure to Maintain Sampling Schedule or Failure to Appear or to Provide Sample.** Failure by Dr. Nethala: to maintain the sampling schedule; to appear when demanded to provide a sample; or to provide samples upon being demanded to do so shall be dealt with as follows:

(a). **Report.** If Dr. Nethala fails to appear to provide a sample, fails to maintain the sampling/testing schedule, or fails to provide a urine sample, then the Supervising Physician and Dr. Nethala must telephone the Board as soon as possible and send to the Board a written report of such failure within 48 hours.

(b). **Second Opportunity to Provide Urine Sample.** If Dr. Nethala appears when scheduled or ordered, but fails to provide an adequate sample, then with regard to urine, after accurate notation of any and all substances consumed (no substance shall be consumed which might affect the accuracy of the tests to be performed), a second opportunity to provide a urine sample shall be given after a reasonable time. A repeat failure or any refusal shall result in an immediate, indefinite suspension of medical licensure. The suspension shall begin the moment of the occurrence.

(c). **Suspension.** An immediate, indefinite suspension of licensure shall result from any failure by Dr. Nethala to comply with the mandated schedule of samples, failing to appear to provide a sample, or failing to provide a urine sample after given a second opportunity. The suspension shall begin the moment Dr. Nethala actually learns a report has been made or sent to the Board.
(d) **Meeting with Board.** Both Dr. Nethala and the Supervising Physician shall, at the discretion of the Board, be required to appear before the Board regarding this situation at its next regularly scheduled Board meeting, unless the next meeting is to be held within 15 days of the suspension, in which case they may be scheduled to appear at the subsequent regularly scheduled Board meeting.

(e) **Board Action.** The Board may order Dr. Nethala’s Maine medical license reinstated or, if appropriate, may continue the suspension and may set the matter for hearing. The Board shall attempt to hold a hearing within 60 days of the automatic suspension, or as soon thereafter as practicable, at which time it may take such action as it deems appropriate, including without limitation, reinstatement, fines, probation, suspension, non-renewal and revocation.

(9) **Amendment of Testing Provisions.** After two (2) years of successful compliance with the terms and conditions of this Consent Agreement, Dr. Nethala may file a written application with the Board to amend the testing conditions. Upon written application by Dr. Nethala to the Board, the Board may amend the above agreed conditions for testing. Amendment of the testing conditions shall be in the sole discretion of the Board and shall be based upon such information as the Board deems pertinent. A decision regarding the amendment of testing provisions may be made by the Board, in its sole discretion, with or without providing a hearing. Any decision by the Board regarding a request to amend the testing conditions in not appealable. The Board can propose Amendment(s), which may or may not be agreed to by Dr. Nethala.

(10) **Increasing Testing.** For good cause shown (i.e., questionable reports or problems with providing samples), the Board can, in its sole discretion, without hearing, unilaterally increase the frequency of testing to the highest levels contemplated by this Consent Agreement, and may also add an additional four random tests per month. Any decision made by the Board pursuant to this paragraph does not require a hearing and is not appealable.

d. **PROFESSIONAL MANAGEMENT.**

(1) **Substance Abuse Treatment.** Within thirty (30) days following the execution of this Consent Agreement, Dr. Nethala shall submit for Board approval the name of a licensed individual or agency in the treatment of substance abuse with whom Dr. Nethala shall consult and counsel for the purpose of working on all issues pertaining to his substance abuse issues, including Dr. Nethala’s compliance with this Consent Agreement, which consultations shall be at least twice monthly following the execution of this Consent Agreement.

(2) **Single Primary Care Physician.** Within thirty (30) days following the execution of this Consent Agreement, Dr. Nethala shall submit for Board approval the name of a primary care physician who shall prescribe all necessary medications for Dr. Nethala, and who shall coordinate Dr. Nethala’s treatment and pharmacological therapy with the Board-approved substance abuse and psychological providers. Such physician shall be knowledgeable
of Dr. Nethala's medical history, including his substance abuse history. The Board shall retain the sole discretion, without hearing, to grant or deny approval of the primary care physician proposed by Dr. Nethala. Dr. Nethala acknowledges that any decision by the Board concerning this issue is not appealable.

(3). Prior Evaluation and Treatment Records. The Board and Dr. Nethala agree that Dr. Nethala shall execute all releases necessary to permit the transmission and disclosure of all records from previous treatment providers to the Board approved primary care physician and Board-approved treatment provider(s).

(4). Communication of Treatment Providers. The Board and Dr. Nethala agree that all treatment providers involved in his care shall have full communication allowed among themselves, any prior treatment providers and, when requested, with the Board or its agent(s). Dr. Nethala waives any privileges concerning such information, reports, records, and communications among his treatment providers and the Board.

(5). Amendment of Aftercare Treatment Requirements. After one (1) year of successful compliance with the terms and conditions of this Consent Agreement, Dr. Nethala may file a written application with the Board to amend his substance abuse treatment. The Board shall retain the sole discretion, without hearing, to grant or deny such application. Dr. Nethala acknowledges that any decision by the Board concerning this issue is not appealable.

(6). Change of Primary Care Physician or Treatment Provider(s). If Dr. Nethala desires to change his primary care provider or treatment provider(s), then he shall make written application to the Board, including among other things a letter regarding his reasons for requesting such change(s) and separate letters from the current primary care physician or treatment provider(s) and the proposed new primary care physician or treatment provider(s) relative to their understanding of the reasons for this request and, to the extent applicable, any concerns they may have. The Board shall retain the sole discretion to grant or deny such application without hearing. Dr. Nethala acknowledges that any decision by the Board concerning this issue is not appealable. If the request is denied, nothing precludes Dr. Nethala from proposing another primary care physician or treatment provider for approval. In requesting a change of primary care physician or treatment provider, Dr. Nethala understands that the Board may inquire into any issues it deems pertinent with any person, including, without limitation, the current primary care physician or treatment provider(s).

(7). Reports from Treatment Providers. Dr. Nethala shall ensure that on or before January 9th, April 9th, July 9th, and October 9th of each year following the execution of this Consent Agreement the Board-approved treatment provider(s) submit(s) to the Board a written report regarding: Dr. Nethala's compliance with his schedule of meetings; Dr. Nethala's ability to continue practicing medicine; and the prognosis of Dr. Nethala's continued recovery. In addition, the treatment providers shall immediately notify the Board in writing whenever: (1) in his/her professional judgment, Dr. Nethala poses a potential danger to the health, safety and welfare of patients; or (2) Dr. Nethala terminates treatment or is non-compliant with the treatment plan. Dr. Nethala hereby waives any privileges concerning such information, reports, records and disclosures to the Board.
(8). Board Investigation. At any time the Board may deem appropriate, the Board or its agent may contact Dr. Nethala and/or the Board-approved treatment providers to obtain further information relative to Dr. Nethala. In addition, if the Board deems it appropriate, it may directly contact the treatment providers regarding any issues concerning Dr. Nethala's treatment. In complying with this requirement, Dr. Nethala waives any privileges concerning such information, reports, records and disclosures to the Board. Dr. Nethala shall execute any and all releases necessary to enable the Board and/or the Attorney General to communicate directly with his treatment provider(s) and to obtain copies of any and all notes, records, and documentation concerning his treatment.

e. PROFESSIONAL OVERSIGHT.

(1). Clinical Setting Inspections. During the period of this Consent Agreement, Dr. Nethala shall provide the Board with all locations where he practices medicine.

(2). Physician Monitor. Within thirty (30) days following the execution of this Consent Agreement, Dr. Nethala must have a Board-approved practice monitor who shall monitor his medical practice. In complying with this requirement, Dr. Nethala shall submit to the Board for its approval the name of a proposed practice monitor, whom the Board has the sole discretion to approve or deny. The monitoring physician must be in direct contact with Dr. Nethala and observe him within his medical practice at least once a week, and inform the Board if Dr. Nethala demonstrates any issues with regard to isolation, inappropriate boundaries or decision-making, ability to concentrate, absenteeism, substance abuse, incompetence, unprofessionalism or any other concerns. The monitoring physician shall report such information to the Board by telephone and in writing within 24 hours or as soon thereafter as possible. Dr. Nethala understands that the monitoring physician will be an agent of the Board pursuant to Title 24 M.R.S. § 2511. Dr. Nethala shall permit the monitoring physician full access to his medical practice, including but not limited to all patient information. The Board-approved monitor shall provide the Board with reports regarding Dr. Nethala's medical practice on or before January 9th, April 9th, July 9th, and October 9th of each year following the execution of this Consent Agreement.

f. SELF-HELP GROUP MEETINGS.

(1). Attendance at AA and NA. Dr. Nethala agrees to attend Alcoholics Anonymous ("AA") and/or Narcotic Anonymous ("NA") or another non-faith-based self-help group meeting approved by the Board a minimum of twice per week from the effective date of this Consent Agreement.

(2). Impaired Physicians Self-Help Group. Dr. Nethala agrees that he shall attend self-help group meetings of an impaired medical professional group (i.e. Caduceus), on a regular basis for the term of this Consent Agreement. Meetings of the impaired professional self-help groups may not be substituted on a one-for-one basis with meetings of AA or NA.
(3). **Reports of Attendance.** Dr. Nethala shall submit a signed, written quarterly report of his attendance at AA, NA or impaired professional self-help group meetings to the Board beginning three months after the execution of this Consent Agreement. Any instances of failure to attend the required numbers of meetings shall be noted, together with specific explanation detailing reasons.

(4). **Failure to Meet This Requirement.** It is the parties' understanding that, periodically, reasonable explanations may exist for occasionally missing a meeting; however, unexcused continuous or repeated failures to comply with the requirements of this section shall constitute a violation of the Consent Agreement which, after hearing before the Board, can result in licensure discipline, including without limitation a fine, suspension, non-renewal, or revocation of Dr. Nethala's Maine medical license.

g. **MAINTENANCE OF OBLIGATIONS WHEN AWAY**

(1). **General.** Dr. Nethala agrees to maintain his obligations regarding substance monitoring and self-help group meetings at all times, including times when he is away from home but within the continental limits of the United States. Dr. Nethala will notify the Director of the Medical Professionals Health Program sufficiently in advance of travel to make whatever arrangements the Director deems appropriate for monitoring before he leaves. It shall be Dr. Nethala's obligation to ensure that arrangements are made consistent with this Consent Agreement in such other location(s) to ensure the continuation and satisfaction of his obligations under this Consent Agreement. Any such occurrences shall be noted in writing sent to the Board by Dr. Nethala explaining the arrangements made and how the arrangements were carried out.

(2). **Failure to Comply.** Any failure by Dr. Nethala to meet the conditions of the Consent Agreement outside of Maine shall constitute a violation of this Consent Agreement, and may result in the immediate suspension by the Board of Dr. Nethala's Maine medical license pending hearing, and, following hearing, other sanctions as permitted by law including but not limited to suspension, modification, or revocation of licensure.

h. **IN卷LEMENT IN THE MAINE MEDICAL PROFESSIONALS HEALTH PROGRAM.**

Dr. Nethala has entered into a contract with the Maine Medical Professionals Health Program and shall fully participate in that program as long as this Consent Agreement remains in force.

i. **MAINTENANCE OF LICENSE.**

Dr. Nethala shall be required to maintain his Maine license to practice medicine for as long as this Consent Agreement remains in effect. In the event that Dr. Nethala applies for licensure in other jurisdictions during the term of this Consent Agreement, Dr. Nethala shall notify said jurisdiction of the existence of this Consent Agreement.
j. WAIVER OF CONFIDENTIALITY AND RELEASE OF RECORDS.

Dr. Nethala agrees and understands that the Board and the Department of Attorney General shall have complete access to his present and future personal medical and counseling records regarding chemical dependency and/or mental health issues and to all otherwise confidential data pertaining to treatment or monitoring of Dr. Nethala for substance abuse and/or mental health issues. Dr. Nethala waives any privileges concerning such information, reports, or records, and agrees to execute any and all releases necessary to permit the Board access to such information. All releases must, in addition to waiving any relevant State law privileges or immunities, provide the Board with access to all material covered by 42 C.F.R., Part 2. In the event that the releases are not sufficient to obtain access to any information which the Board considers relevant, Dr. Nethala agrees to personally obtain such information and furnish it to the Board, to the extent permitted by law.

k. SANCTION FOR VIOLATION OF CONSENT AGREEMENT.

(1). Automatic Suspension. Any reliable oral or written report to the Board of violation(s) of the terms and conditions of this Consent Agreement as described above by Dr. Nethala shall result in the immediate, indefinite and automatic suspension of Dr. Nethala's Maine medical license. The automatic suspension of Dr. Nethala's Maine medical license shall become effective at the time that he receives actual notice from the Board that a report of violation(s) has been made. Actual notice can be provided by telephone, in person, in writing, by another means or any combination of the above-referenced means. The indefinite, automatic suspension shall continue until the Board holds a hearing on the matter, unless the Board earlier determines that the report is without merit or decides that no further sanction is warranted.

(2). Continued Suspension; Other Sanctions. Dr. Nethala’s indefinite automatic suspension shall continue for such time until the Board holds a hearing and reaches a decision. The Board will hold a hearing within 60 days of the automatic suspension or as soon thereafter as practicable (unless both Dr. Nethala and the Board agree to hold the hearing later) and shall be held pursuant to the Maine Administrative Procedure Act. The Board may impose such other discipline, including without limitation, fines, further suspension, probation, non-renewal or revocation of licensure, as the Board after hearing deems appropriate.

(3). General Acknowledgment. Dr. Nethala acknowledges that, pursuant to Title 10 M.R.S. § 8003(5)(B), his failure to comply with any of the terms or conditions of this Consent Agreement shall constitute grounds for disciplinary action against his Maine medical license, including but not limited to an order issued by the Board, after hearing, modifying, suspending, or revoking his license. In addition, Dr. Nethala agrees and acknowledges that, pursuant to 10 M.R.S.A. § 8003(5), the Board has the authority to suspend or revoke his Maine medical license for any violation of the terms or conditions of this Consent Agreement.
1. DESIGNATED COPY OF CONSENT AGREEMENT.

Dr. Nethala shall have his supervising physician, monitoring physician and all treatment providers read, date, and sign a copy of the Consent Agreement (the "Designated Copy"). Dr. Nethala shall retain a copy of the Consent Agreement signed by all of the aforementioned individuals at his Board-approved medical practice locations and shall produce it upon request of the Board or its agent(s). A copy of the signature page shall be made and sent to the Board. Dr. Nethala agrees that if new individuals assume the roles set forth in this Consent Agreement during the existence of this Consent Agreement, such individuals shall also read, date and sign the Consent Agreement, and he shall send a copy of the updated signature page to the Board.

Dr. Nethala shall provide a copy of this Consent Agreement to any hospital or medical practice with whom he is or becomes affiliated.

m. MISCELLANEOUS PROVISIONS.

(1). Notice. Unless otherwise specified in this Consent Agreement, written notice shall be deemed served upon mailing by first class mail, postage prepaid.

(a). Notice to the Board:

State of Maine Board of Licensure in Medicine
Attention: Board Investigator
137 State House Station
Augusta, Maine 04333-0137
Telephone: (207) 287-3601

(b). Notice to the Licensee:

Venkatram Nethala, M.D.
The Aroostook Medical Center
146 Academy Street
Presque Isle, ME 04769

(2). Address Change. If Dr. Nethala changes jobs, moves his residence or practice, changes telephone numbers at work or at home, or secures privileges at a hospital, he shall provide written notice to the Board within ten (10) days of any such change. In addition, Dr. Nethala shall notify the Board of any attempts to seek licensure in another jurisdiction, and shall disclose to the licensing authority in such jurisdiction of his status with this Board.

(3). Costs. All costs incurred in performance of the conditions of this Consent Agreement shall be borne by Dr. Nethala. If a violation of this Consent Agreement is proven to have occurred, regardless of the sanctions imposed, the Board may require Dr. Nethala to reimburse the Board for all actual costs and attorney’s fees incurred in proving such violation.
(4). **Hearings.** Unless otherwise specified, hearings shall be held consistent with the Maine Administrative Procedure Act.

(5). **Severance.** If any clause of this Consent Agreement is deemed illegal or invalid, then that clause shall be deemed severed from this Consent Agreement.

n. **DURATION OF CONSENT AGREEMENT.**

Dr. Nethala understands and agrees that the duration of this Consent Agreement is five (5) years from March 8, 2011. The conditions imposed by this Consent Agreement shall remain in effect for five (5) years following the execution of this Consent Agreement until or unless amended or rescinded in writing by the parties hereto.

o. **AMENDMENT OF CONSENT AGREEMENT.**

Dr. Nethala waives his right to a hearing before the Board or any court regarding all findings, terms and conditions of this Consent Agreement. Dr. Nethala agrees that this Consent Agreement is a final order resolving Dr. Nethala’s application for a permanent Maine medical license, and is not appealable and is effective until modified or rescinded by the parties hereto. This Consent Agreement cannot be amended orally. It can only be amended by a writing signed by the parties hereto and approved by the Office of Attorney General. Requests for amendments to this Consent Agreement by Dr. Nethala shall be made in writing and submitted to the Board. Dr. Nethala shall bear the burden of demonstrating that the Board should amend the Consent Agreement. The Board shall have the sole discretion to: (a) deny Dr. Nethala’s request; (b) grant Dr. Nethala’s request; and/or (c) grant Dr. Nethala’s request in part as it deems appropriate to ensure the protection of the public. Any decision by the Board as a result of Dr. Nethala’s request to modify this Consent Agreement need not be made pursuant to a hearing and is not appealable to any court.

p. **COMMUNICATIONS.** The Board and the Attorney General may communicate and cooperate regarding Dr. Nethala’s practice or any other matter relating to this Consent Agreement.

q. **PUBLIC RECORD.** 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.

r. **REPORTABLE DISCIPLINE.** This Consent Agreement constitutes adverse licensing action and is reportable to the National Practitioner Data Bank, the Federation of State Medical Boards, and other licensing jurisdictions.

s. **ADVICE OF COUNSEL.** Dr. Nethala has had an opportunity to consult with legal counsel regarding the terms and conditions of this Consent Agreement.
I. WAIVER OF RIGHT TO APPEAL CONSENT AGREEMENT.

Dr. Nethala waives his right to a hearing before the Board or any court regarding all facts, terms and conditions of this Consent Agreement. Dr. Nethala agrees that this Consent Agreement is a final order resolving his application for a permanent Maine medical license, and that it is not appealable and is effective until modified or rescinded in writing by the parties hereto.

I, VENKATRAM NETHALA, M.D., HAVE READ AND UNDERSTAND THE FOREGOING CONSENT AGREEMENT AND AGREE WITH ITS CONTENTS AND TERMS. I FURTHER UNDERSTAND THAT BY SIGNING THIS CONSENT AGREEMENT, I WAIVE CERTAIN RIGHTS, INCLUDING THE RIGHT TO A HEARING BEFORE THE BOARD. I HAVE HAD AN OPPORTUNITY TO CONSULT WITH LEGAL COUNSEL REGARDING THIS CONSENT AGREEMENT. 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: 3-8-11

VENKATRAM NETHALA, M.D.

STATE OF New Hampshire
BelKnap, S.S.

Personally appeared before me the above-named Venkatram Nethala, 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 8, 2011

AMY I. HARPELL
NOTARY PUBLIC/ATTORNEY
MY COMMISSION ENDS: May 17, 2011

DATED: 3/8/11

RONALD W. SCHNEIDER, JR., ESQ.
Attorney for Dr. Nethala
STATE OF MAINE
BOARD OF LICENSURE IN MEDICINE

DATED: 3/15/2011

SHERIDAN R. OLDHAM, M.D.
SHERIDAN R. OLDHAM, M.D., Chairman

STATE OF MAINE DEPARTMENT
OF THE ATTORNEY GENERAL

DATED: 3/16/11

DENNIS E. SMITH
Assistant Attorney General

Effective Date: 3/16/11