



ALABAMA State Board of Medical Examiners Medical Licensure Commission

Newsletter and Report

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The pain medication dilemma

by *Boyde J. Harrison, MD*

The adequate relief of a patient's pain is one of the most important responsibilities of comprehensive medical care.

The Board/MASA-sponsored CME courses such as "Prescribing and Pharmacology of Controlled Drugs: Critical Issues and Common Pitfalls" and the Board's frequent emphasis on proper pain prescribing practices should not be considered a warning or threat to those practitioners that treat pain. Quite the opposite, the relief of pain with narcotics is a critical part of the everyday practice of medicine. The vast majority of practitioners in Alabama do an outstanding job.

The Board's emphasis on the appropriate use of narcotics is important because inappropriate prescribing is growing rapidly and has been identified as a national health risk. In 2010 deaths from overdose became the leading cause of death in patients under 52 years old in the United States and in many individual states. Prescribed opiates were responsible for three out of four overdose deaths followed by benzodiazepines and other sedatives. Alabama's overdose death rate has tripled in the last 10 years.

see Pain Medication, page 4



Boyde J. Harrison, MD



Medical examiners must be certified to conduct DOT physicals

Beginning May 21, commercial drivers must receive Department of Transportation (DOT) physicals and medical reports from Certified Medical Examiners listed on the National Registry.

To help meet this need, the Medical Association of the State of Alabama (MASA) offers online Federal Motor Carrier Safety Administration (FMCSA) DOT Medical Examiner Certification Training.

The FMCSA has established the National Registry of Certified Medical Examiners (NRCME), requiring all healthcare professionals who conduct physical examinations for interstate commercial motor vehicle drivers to:

1. Complete training offered by a nationally recognized organization that meets FMCSA standards.
2. Pass a certification exam to conduct physical examinations for drivers who wish to obtain a Commercial Driver's License, and register on the NRCME.

As a registered NRCME training provider, MASA's Course:

- Meets FMCSA core curriculum requirements for medical examiners.
- Prepares and qualifies medical examiners to take the NRCME certification exam.
- Offers option to receive 9.5 *AMA PRA Category 1 Credits*TM.

see DOT Certification, page 5

A Message from the Executive Director

Ending diversion of prescribed medicines

by Larry Dixon, Executive Director

As every licensed physician in Alabama knows, there is a great emphasis on controlling, and hopefully ending, diversion of legitimately prescribed medicines into expensive street drugs. The emphasis is coming from all levels of government. The Drug Enforcement Agency (DEA), local authorities, the National Governors Association and every state licensure board are all actively involved in this effort.

The people involved in diverting drugs to the street for sale range from “doctor shoppers” to international/national drug cartels to local street dealers. The commonality among of all those mentioned above is you, the physician.

The physician, with an ACSC, and the PA or CRNP with a QACSC, are the primary sources for all of the controlled substances with street value. The street value of certain medicines can be as much as \$1 per milligram, which makes the cost of any office visit a small price to pay for a drug “score.”

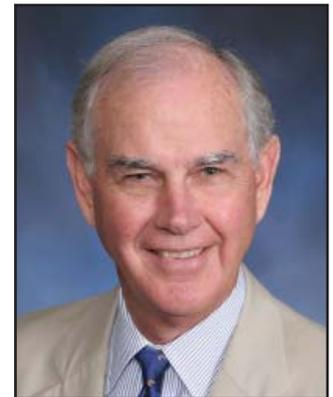
The Board of Medical Examiners supported Act 2013-257 that set parameters for a proper, medically necessary pain management system for Alabama. The Board was charged with promulgating rules to effectuate the law. Attention was also paid to the rules already in place in other states in trying to deal with the same issue. Much attention was paid to statutory requirements (the law itself) which had to be incorporated into the Board Rules. I tell you this in order for you to understand that the rules, when published and in effect, have been carefully and thoughtfully developed.

After letters were sent notifying licencees of the new law and rules, and registration responses and physician comments started coming in, the Board realized that physicians whose practices were outside what the Board considered to be “pain medicine practices” were required to register.

In an effort to be responsive, the Board sent a “disregard, until” letter and is now studying re-writing the rules to accomplish the original goal of helping physicians in the practice of pain management through appropriate regulation, with the objective being to help them avoid contributing to the drug diversion problem.

Without a doubt, certain original requirements will stay in the rules. If you advertise or promote yourself as providing treatment for patients with chronic non-malignant pain, or if you dispense opioids for the treatment of chronic non-malignant pain, you are now, and will continue to be, required to register with the Board. Others who were originally told to register and then notified to wait before registering will probably see changes in the rules affecting them. It is almost certain there will be changes in the statute. Rep. April Weaver, who is a health care professional, has already passed a bill through the Alabama House of Representatives to remove the criminal background check as a condition of registration. Sen. Greg Reed is handling the bill in the Senate and has scheduled it for consideration in the Senate Health Committee. Deleting the multiple location registration requirement in the statute is being considered in the Senate as well.

Not once have I been told by any physician that the goal of stopping the diversion of medicine to street drugs is not a worthy goal for the Board. To all of you physicians who found themselves to be a part of this effort, please know that the Board and its staff heard you.



Larry Dixon

Alabama Board of Medical Examiners

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Alabama BME Annual Report

In 2013, Alabama experienced another increase in the number of newly licensed physicians with 912 approved applicants by endorsement and 54 approved applicants by examination – 122 more approved applicants than in 2012.

The Board of Medical Examiners and its staff have compiled the following Annual Report for your information.

A. APPLICANTS CERTIFIED TO MEDICAL LICENSURE COMMISSION	
1. Applicants by endorsement	912
a. Non-disciplinary Citation with Administrative charge.....	13
2. Applicants by examination.....	54
B. APPLICANTS CERTIFIED FOR LIMITED LICENSE	
145	
C. APPLICANTS TAKING SPEX EXAMINATIONS	
1. Applicants passing examinations	8
2. Applicants failing examinations.....	5
D. APPLICANTS FOR OUT OF STATE ENDORSEMENT.....	
3	
E. ADVANCED PRACTICE NURSES (CRNP/CNM)	
1. Certified Registered Nurse Practitioner Collaborations Approved	1,219
2. Certified Nurse Midwife Collaborations Approved	2
3. CRNP/CNM QACSC Issued.....	56
4. CRNP/CNM QACSC Renewed.....	18
F. PHYSICIAN ASSISTANTS	
1. Physician Assistants Licensed.....	63
2. Physician Assistants Registered to Physicians (new applications)	240
3. Physician Assistants Granted Temporary Licensure	11
4. Temporary Licensure Converted to Full Licensure (after passing exam)	10
5. Temporary Licensees Granted Registration	5
6. Anesthesiologist Assistants Licensed.....	1
7. Anesthesiologist Assistants Granted Temporary License.....	0
8. Anesthesia Assistants Registered to Physicians (new applications)	2
9. PA QACSC Issued.....	34
10. PA QACSC Renewed	77
G. ACSC ISSUED / RENEWED	
1. ACSC Issued	932
2. ACSC Renewed.....	10,925
H. DISCIPLINARY / CONFIDENTIAL ACTIONS	
1. ACSC Surrender/Revocation/Restriction/Reinstatement	4
2. ACSC Restriction Terminated.....	0
3. Certificates of Qualification Denied/Surrendered	7
4. Certificates of Qualification with Agreements/Restrictions	8
5. Letters of Concern	85
<i>Prescribing Related</i>	<i>7</i>
6. Complainant Inquiry Received.....	522
a. Resolved Without Formal Investigation.....	295
b. Inquiry Pending.....	61

see Annual Report, page 5

Providing records of other physicians

There is no clear cut precedent to provide guidance concerning the appropriateness of including copies of medical records not generated by the physician, and there is a difference of opinion on this. The majority view is a physician should transfer any medical information in the patient's record that is pertinent to the patient's medical history and/or to any ongoing course of treatment. Some types of records should not be routinely forwarded, such as confidential financial information concerning the patient, records concerning sexually transmitted or other notifiable diseases, or drug/ alcohol or psychiatric treatment. Except for those categories mentioned, there is no reason why a physician should not transfer medical records of other treatment providers.

On the other hand, there is no statute or regulation that requires the forwarding of this information. In most circumstances, including the records of other treatment providers is a benefit to the patient who does not have to arrange for the transfer of records from past providers, which may or may not be available.

Source: Paraphrased from Medical Association of the State of Alabama's Medical Records Policy (http://www.masalink.org/uploadedFiles/Practice_Management/policy_medicalrecords.pdf) (members only access).

Prescribing and Pharmacology of Controlled Drugs; ER/LA Opioid REMS

Prescribing Controlled Drugs

This intensive course is designed for health care professionals who wish or need to increase their knowledge and ability to effectively prescribe and control medications without the potential for abuse.

ER/LA Opioid Analgesics REMS

REMS is an intensive risk management course by the FDA for health care professionals who prescribe ER/LA opioid analgesics.

Registration

Register online at www.masalink.org/Prescribing or print a registration form and fax it to (334) 269-5200.

Statement of Need

Chronic pain is a major public health problem in the United States and has been estimated to affect up to a third of Americans. However, after a decade of standard setting and research on pain control, health care practitioner assessment and management of patient pain continues to be inadequate. Evidence-based guidelines emphasize thorough patient assessment, prompt recognition of patient pain, frequent monitoring, multimodal analgesic therapies, and patient input; yet, there are persistent gaps in clinicians' knowledge and practice around key areas of chronic pain management. Additionally, rates of misuse and abuse of nonprescription medications have not abated over the past decade, resulting in addiction, drug poisoning and overdose death. Despite these concerns, appropriate use of opioids can improve a patient's quality of life. Thus, education on best practices for opioid safe use is critical for all clinicians managing patients with chronic pain.

Questions? Contact MASA's Education Department at (334) 954-2500 or (800) 239-6272.

This activity is supported by an educational grant from The REMS Companies.

Dates, Locations and Hotel Accommodations

August 8-10

Sandestin Golf and Beach Resort
Call (800) 320-8115 and reference room block ID 23374A. Room block deadline: July 8.

November 21-23

Wynfrey Hotel, Birmingham
Call (800) 233-1234 and reference room block ID MASA. Room block deadline: Nov. 3.

Pain Medication, cont.

Alabama has an opioid overuse problem. This is a fact. But this fact should not prevent adequate treatment of patients who have legitimate pain. In 1988 the AMA released statements about the duality of this problem – overprescribing to patients with vulnerabilities that made prescribing risky, and underprescribing to the majority of patients who need pain medications to treat legitimate pain.

For several years BME and the Medical Association of the State of Alabama (MASA) have jointly sponsored educational courses in prescribing practices for pain. (See above for additional information.) The Board's goal is to provide information and tools so practitioners can:

- Identify risky patients that have “vulnerabilities” (usually mental or social) that make narcotic use unsafe;
- Monitor patients to make sure goals are achieved and unsafe side effects avoided;
- Educate patients and families on legal, compliant and safe use of controlled drugs and risks involved with narcotics used for pain; and
- Understand the proper dosing of narcotics and what interactions with other drugs are unsafe.

Every month the board receives complaints of overprescribing **and** other complaints about failing to adequately control a patient's pain. The board understands this difficult balance and has attempted to provide the tools needed to document the variables used in the prescriber's thought process.

The Board evaluates each case individually, but respected guidelines, such as *Responsible Opioid Prescribing: A Clinician's Guide*TM authored by Scott Fishman, MD, are certainly used as a starting point. The Board encourages physicians to call BME at (334) 242-4116 or (800) 227-2606 with any question or comments you have.

Prescribers, remember that prescribing review courses are frequently available to keep you up-to-date. There are three remaining courses available for calendar year 2014: March 29-30 in Montgomery; August 8-10 in Sandestin, Fla.; and November 21-23 in Birmingham. Registration for these courses fills quickly. Please contact MASA's Education Department at (334) 954-2500 or (800) 239-6272 for registration information or visit their website <http://www.masalink.org/prescribing/>.

Termination of collaborative practice/ registration agreement

When a collaborative practice between a physician and a certified registered nurse practitioner (CRNP) or a certified nurse midwife (CNM) is terminated, the Board’s rules governing collaborative practices require that the physician must notify the Board in writing the date on which the collaborative practice agreement was terminated.

Notification is to be made within five business days after this date. Notification to the Board is easy. A letter can be submitted in writing, or the physician may use this simple

Internet form: <http://www.albme.org/terminationform.html>. As this is specifically the responsibility of the physicians, physicians should ensure that this is done.

Likewise, when a registration agreement between a physician and a physician assistant (PA) is terminated, the PA and physician both must inform the Board in writing of the effective date of the termination of employment and the reasons for the termination.

Failure to notify the Board of termination of a collaborative

practice or registration agreement may be considered by the Board as a violation of the rules.

On the Net:

Board Rules for Collaborative Practices:

www.alabamaadministrativecode.state.al.us/docs/mexam/McWord540-X-8.pdf

Board Rules for Physician Assistants:

www.alabamaadministrativecode.state.al.us/docs/mexam/540-X-7.pdf

DOT Certification cont.

Training details

- Suggestions/references to pre-course reading/reference materials.
- Printable course materials.
- Six months unlimited access from a PC, laptop or mobile device.
- Ability to start/stop/pause training according to individual schedules.
- Course certificate immediately available upon completion.
- Case studies/reviews and steps to prepare for certification exam.

Registration Fees

- Course **with** CME Credits: MASA Member \$435, Non-Member \$585
- Course **without** CME credits: MASA Member \$385, Non-Member \$535

Registration

Follow the link from www.masalink.org/DOTcertification to sign up for the course.

Questions?

For more information on this course, call Laurie Sponholz at (406) 442-2585.

Annual Report, cont.

c. Formal Investigation Opened.....	166
<i>Prescribing Related</i>	17
i. Formal Investigation Closed with BME Disposition.....	93
ii. Formal Investigation Pending Disposition.....	73
7. Collaborative Practice Inspections	85
8. Collaborative Practice Compliance Seminars	2
9. Interviews Conducted.....	77
10. Administrative Complaints filed with Medical Licensure Commission	40
11. Voluntary Agreements Entered Into	16
12. Voluntary Agreements Terminated.....	5
13. Voluntary Restrictions on COQ Entered Into.....	2
14. Voluntary Restrictions Terminated.....	0
15. Flag File for Reinstatement.....	6
16. ABME Physician Monitoring Contract Entered Into	3
17. ABME Physician Monitoring Contract Expired/Terminated	7
18. Physician Monitoring Program - Physician Currently Monitored.....	29
19. Number monitored since 1990	1,032
20. Non-Disciplinary Board Orders	37
a. Continuing Medical Education.....	32
<i>Prescribing Related</i>	9
b. Evaluation.....	5
21. Sent for Expert Review	6
22. Assessments (MLC and BME).....	34
a. Administrative Fines.....	24
b. Administrative Costs	10
23. Summary Suspensions	6
a. Revocation	1
b. Revocation Stayed/Probation	1
c. Hearing Pending.....	2
d. Suspension Lifted.....	2
23. Voluntary Surrender of Alabama Medical License	4

The Medical Association of the State of Alabama, the Alabama Board of Medical Examiners and the Alabama Board of Nursing present...

Ensuring Quality in the Collaborative Practice Working together to deliver quality healthcare



Who should attend?

Doctors of Medicine and Osteopathy, Certified Registered Nurse Practitioners and Certified Nurse Midwives in a collaborative practice agreement or those interested in developing a collaborative practice agreement.

Faculty

- Charlene Cotton, MSN, RN, Nurse Consultant for Advanced Practice Nursing of the Alabama Board of Nursing
- Ray Hudson, MD, Collaborative Practice Consultant to the Alabama Board of Medical Examiners
- Pat Ward, RN, Collaborative Practice Inspector of the Alabama Board of Medical Examiners

Learning Objectives

After attending this course, participants will be able to:

- Cite the application, approval and renewal requirements for CRNPs and CNMs in a collaborative practice relationship.
- List the credentials a CRNP or CNM is required to have to enter into a collaborative practice agreement.
- List the responsibilities of both physicians and nurses in a collaborative practice agreement.
- Describe common problems seen in a collaborative practice and the methods to apply to correct them.
- Cite the regulations for prescribing drugs, participating in a quality assurance review and practicing in various practice settings, including remote sites.

Registration

Register online at www.masalink.org/CollaborativePractice or print and fax registration form to (334) 269-5200.

For more information call MASA's Education Department at (334) 954-2500 or visit www.masalink.org/CollaborativePractice.

Dates and Details

Thursday, May 22, 2:00 to 5:15 p.m., at Baytowne Conference Center, Sandestin Golf and Beach Resort.

To reserve a room, follow the link from www.masalink.org/CollaborativePractice or call (800) 320-8115 with Group Code 221 3MR. Deadline: April 18.

Attendees are invited to attend a welcome reception/tailgate party at 5:30 p.m. to kick off MASA's Annual Session.

MASA ANNUAL SESSION:

PHYSICIANS RESPONSIBILITY IN PROTECTING THE HOUSE OF MEDICINE

May 22-25, 2014 • Baytowne Conference Center, Destin, Fla.

Join MASA for their 2014 Annual Session with keynote speakers *Avik Roy, MD*, senior fellow at the Manhattan Institute and former healthcare advisor to Mitt Romney; *Timothy Norbeck*, chief executive officer of The Physicians Foundation, who has more than 45 years experience in the healthcare field; and special guest legendary college football coach *Gene Stallings*.

Visit www.masalink.org/AnnualSession for more information.

Report of Public Actions of the Medical Licensure Commission and Board of Medical Examiners

MLC – November 2013

◆ On Nov. 20, upon the Stipulation of the parties, the Commission entered an Order placing on indefinite restriction the medical license of **James M. DeSantis, MD**, lic. no. MD.25650, Marietta, GA.

◆ On Nov. 20, upon the Stipulation of the parties, the Commission entered an Order restricting the medical license of **Jean-Michel Hassan, MD**, lic. no. MD.18872, York, AL, from performing any type of surgery.

◆ On Nov. 5, the Commission entered an Order denying the request of **Scott H. Boswell, MD**, lic. no. MD.16975, Jasper, AL, to lift the restrictions and probation currently on his Alabama medical license.

◆ On Nov. 5, the Commission entered an Order placing on indefinite probation with conditions the medical license of **Amjad I. Butt, MD**, lic. no. MD.29003, Selma, AL.

◆ On Nov. 5, the Commission entered an Order reprimanding the medical license of **Jorge A. Caceres, MD**, lic. no. MD.3878, Bessemer, AL.

◆ On Nov. 5, the Commission entered an Order affirming the Board's denial of the application of **Kevin Paul Ford, MD**, aka **Kevin Paul Kazakevich, MD**, Gardendale, AL, for a certificate of qualification for a medical license.

BME – November 2013

◆ On Nov. 21, the Board entered an Order revoking the authority to prescribe Schedule II controlled substances of **John P. Hagler Jr., MD**, lic. no. MD.6566, Montgomery, AL.

MLC – December 2013

◆ Effective Dec. 20, the Commission entered an Order summarily suspending the medical license of **Thomas R.**

Syverson, MD, lic. no. MD.29808, Foley, AL.

◆ On Dec. 6, the Commission entered an Order terminating the probationary status of the medical license of **Mary Dell Railey, MD**, lic. no. MD.25741, Birmingham, AL.

◆ On Dec. 6, the Commission entered an Order revoking the medical license of **Valerie Ann Turnbow Sloan, MD**, lic. no. MD.24914, Josenesboro, AR.

MLC – February 2014

◆ On Feb. 7, the Commission entered an Order granting the request of **Amjad I. Butt, MD**, lic. no. MD.29003, Selma, AL, to pay his fine and costs in installments, denying the request to be allowed to insert pacemakers and defibrillators, and requiring resubmission of a practice plan.

◆ On Feb. 7, the Commission entered an Order denying the application for reinstatement of license of **Wallace B. McGahan Jr., MD**, lic. no. MD.9963, Weaver, AL.

BME – February 2014

◆ On Feb. 14, the Board issued an Order reinstating the Alabama Controlled Substances Certificate of **Kenneth E. Roberts, MD**, lic. no. MD.9562, Dothan, AL.

MLC – March 2014

◆ Upon the Stipulation of the parties, on Mar. 26 the Commission entered a Consent Order wherein **Paul M. Muratta, DO**, lic. no. DO.536, agrees to voluntarily surrender his medical license and Alabama Controlled Substances Certificate on or before Aug. 31, 2014.

◆ By Order dated Mar. 6, the Commission approved the practice plan of **Amjad I. Butt, MD**, lic. no. MD.29003, Selma, AL.

◆ On Mar. 6, the Commission denied the application for reinstatement of license of John A. King, DO, aka Christopher Wallace Martin, DO, lic. no. DO.127, Birmingham AL.

BME – March 2014

◆ Effective Mar. 31, by Order dated Mar. 26, the Commission revoked the license to practice medicine in Alabama of **Louie Franklin Hood, DO**, lic. no. DO.249, Southside, AL.

◆ On Mar. 26, the Board issued an Order Temporarily Suspending the Alabama Controlled Substances Certificate of **Joseph N. M. Ndolo, MD**, lic. no. MD.21199, Fairhope, AL, pending a hearing before the Board.

◆ On Mar. 24, the Board denied the application of **Shawn Daniel Trask, MD**, Paducah KY, for a certificate of qualification to practice medicine in Alabama.

Your Medical License

As a physician, your license to practice medicine in the State of Alabama is one of your most important assets. It allows you to apply what you learned during years of school and post-graduate training to earn a livelihood to support your family.

Exercise care to protect this asset.



Alabama BME Newsletter and Report

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Look inside for important news
from the Board of Medical Examiners
that pertains to your license to practice
medicine in Alabama.



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Receive alerts for new public actions,
agendas, newsletters and rules.

Change of Address

Alabama law requires that every
licensed physician notify the Board
of Medical Examiners in writing
within 15 days of a change of the
physician's practice location
address and/or mailing address.

All current licensees receive the Board of Medical Examiners *Newsletter and Report* at their address of record at no charge. Licensees may also choose to receive the newsletter by e-mail. Non-licensee subscriptions to the newsletter are by e-mail only. If you would like to receive the newsletter by e-mail, please send a request to albmenews@yahoo.com.