EXECUTIVE COMMITTEE INDEXES 2007

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE INDEX OF 2007 EXECUTIVE COMMITTEE MINUTES

NAME	MONTH
Ahmad-Sabry, Mohammad Hazem Ibra	January
Ali, Mahmoud I	July
Anderson, Walter O	January
Barnes, Charlton H	November
Bean, Brandon K	July
Bullock, Johnny Ray	November
Burnett, W. Joseph	May September
Burke, James Benjamin	October
Cohen, Fred Louis	January March
Cook, Andrew D	March
Corban, Magruder S	January
Coulter, Harold Todd	October
Crosby, Samuel	March
Faucett, Donald Clarence	. May
Fox, Gregory B	July
Glass, Ted Alan	. May
Haddon, W. Scott	March May
Harron, Ray Anthony	. May
Hayne, Steven T	.November

Henriksen, John Eric	•
Septemb	
Novembe	; [
Hinton, Arbie B	h
Johnson, Ernest Kaye III	,
Knight, Charles S Januar	-
Marc	
Septembe	
Kobs, Darcey G	-
· · · · · · · · · · · · · · · · · · ·	er
Lee, Robert B	:h
Luzardo, Gustavo Daniel Ju	ly
Mardis, Joseph Ju	ly
Mazzeo, John Thomas	r y
Moses, Jacqueline July	y
Peeler, David W	y
Pierce, Paul Williamson III	st
	er
Rabaa, Ehab Jul	y
Roberson, Gary A November	er
Rolling, Lane C	er
Seki, Ibrahim	y
Sewell, Patrick	3V
	•
Septemb	er
Shaw, Samuel Nick Ju	ly

Smith, Ralph Arnold	May
Soriano, Augustus P	July
Sullivan, Bryan "Tip"	May
Tiemann, William E C	September
Tramontana, James M	March
Vesom, Pitt	January March May
Welch, Carl	September
Whittle, Timothy E	July

TOPIC	<u>MONTH</u>
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Budget 2009	July
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Federation of State Medical Boards Approval of Staff to attend May meeting	January September
Flu Vaccines	January

Ingenix	lay
Investigations, form letter for controlled substance Novem	ıber
IOH Contract	ber
Laptops	ber
Laser Cease and desist letters Janu	ary
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LifeLine Screening	ber
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Medicaid, Division of, Request	ber
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Mississippi Hospital Association Septem	ber
Examining Committee members approval Septem	

Approval to attend annual convention	
Nominations	
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Nomination to Nursing Board Septemb	
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Physician Assistants	
Definition of Community	ay
FCVS credentialing by Federation Septemb	oer
Jurisprudence examination	
Off-Label Prescribing	ay
Protocol changes	ay
Policies	
Reportable hospitals actions	•
Prescriptions	
Tamper resistant pads	er
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Radiologist Assistant	er
Short-Term Training License Jul	iy
Temporary Licensure	ìy
Utilization Review	ı ry
Requests	
- V·V·	Jly
Letter from National Board of Certification Orthopaedic Techs Ju	ily
Retention of Files	ìy
Silicosis	ıry
Marc	ch
University Medical Center (UMC)	
Residents allowed out of state	-
Update	er

Update on Telemergency / Request for expansion	November
Wal-Mart Checkup Clinics	January

BOARD INDEXES 2007

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE INDEX OF 2007 BOARD MINUTES

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Coulter, Harold T	
Harron, Andrew	
Harron, Ray Anthony	er
Hilbun, Glyn R	ly
Knight, Charles S	er
Russell, Stanley C Novemb	er
Sloan, Neil B November	er
Vaughan, Thomas Alfred	:h
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TOPIC	<u>ITH</u>
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-	sed 2008 legislation	. November
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		•
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	Il applications utilization review statement	March
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Final adoption of regulation pertaining to prescribing, administering	
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· · · · · · · · · · · · · · · · · · ·	January
Proposed amendment of regulations concerning use of laser devices	March
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Proposed amendment concerning licensure requirements No	
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Final adoption of amended regulation concerning radiologist assts No	
· · · · · · · · · · · · · · · · · · ·	vembe
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	/ember
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quests	
Sierra Tucson Treatment	July
icosis	March

MINUTES EXECUTIVE COMMITTEE MEETING MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE JANUARY 17, 2007

MEMBERS PRESENT:

Dewitt G. Crawford, M.D., Louisville, President Philip T. Merideth, M.D., J.D., Jackson, Vice President Don A. Gibson, M.D., Richland, Secretary

ALSO PRESENT:

H. Vann Craig, M.D., Director Stan T. Ingram, Complaint Counsel for the Board Rhonda Freeman, Division Director, Licensure Division Thomas Washington, Division Director, Investigative Division Frances Scott, Special Projects Officer, Investigative Division Sherry Harris, Administrative Assistant

The Executive Committee of the Mississippi State Board of Medical Licensure met on Wednesday, January 17, 2007, at 1:00 p.m. in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

Motion was made by Dr. Merideth, seconded by Dr. Crawford, and carried unanimously that the Executive Committee consider going into Executive Session to discuss the pending litigation pertaining to Board Regulation XXXI, "Regulations Regarding the Conduct of Physicians Who Perform Utilization Review Medical Consultation Activities". With a motion by Dr. Merideth, seconded by Dr. Crawford, the Executive Committee went into Executive Session. Also in attendance at the Executive Session were attorneys Harold Pizzetta and Roger Googe, both from the Attorney General's office.

Upon motion by Dr. Merideth, seconded by Dr. Gibson, and carried unanimously, the Executive Committee came out of Executive Session.

Dr. Crawford announced that the Executive Committee will recommend to the Full Board on Thursday to rescind Regulation XXXI effectively immediately.

FLU VACCINES OBTAINED ILLEGALLY

For informational purposes only, Dr. Craig advised the Executive Committee that an individual had fraudulently obtained flu vaccines by forging a physician's medical license. The case has been turned over to the Rankin County District Attorney and is pending trial.

WAL-MART CHECKUP CLINICS

For informational purposes only, Dr. Craig advised that there are currently five (5) clinics in the Jackson area. Three (3) of the five (5) clinics are supervised by Susan Andrews, M.D. Dr. Craig advised that he has talked with Dr. Andrews, as well as circulated a letter received from Dr. Andrews dated January 2, 2007, and the clinics are in compliance with the Boards' Rules and Regulations.

JURISPRUDENCE EXAMINATION FOR PHYSICIAN ASSISTANTS

Dr. Craig advised that currently physician assistants are not required to take the jurisprudence exam and that he would like to add this as part of the interview process, along with having them review the boundary video. After a brief discussion, the Executive Committee agreed to bring proposed regulations before the Full Board on Thursday that would include physician assistants.

PROTOCOL FOR PHYSICIANS SUPERVISING NURSE PRACTITIONERS WHEN RENEWING LICENSE

Dr. Craig discussed adding a question on the physician's annual renewal form that would require the physician to send the Board a copy of the protocol for all nurse practitioners they are supervising. After a brief discussion, the Executive Committee unanimously agreed to make the change on the 2008 renewal form.

SILICOSIS STATUS UPDATE

Dr. Craig gave a brief update on the status of silicosis and the five (5) Mississippi licensed physicians involved. Stan Ingram, Complaint Counsel for the Board, advised that from evidence he has reviewed the physicians could be charged with unprofessional conduct. Mr. Ingram was directed to proceed with preparation of summons and affidavits in each matter for review by Dr. Craig and scheduling of hearings before the Full Board.

Motion was made by Dr. Gibson, seconded by Dr. Merideth, and carried unanimously to authorize Dr. Craig to move forward with disciplinary action on the physicians involved.

WALTER O. ANDERSON, M.D., YUCAIPA, CA., MISSISSIPPI MEDICAL LICENSE NUMBER 14399

Dr. Anderson was not present or represented by legal counsel.

Dr. Craig advised that Dr. Walter O. Anderson had written a letter to the Board requesting a hearing concerning the charges that were made regarding unethical conduct and gross negligence against him in a Medicaid fraud case. Mr. Ingram advised that Dr. Anderson had signed an Order agreeing not to practice or renew his medical license that was executed on January 16, 2002. After a brief discussion, the Executive Committee agreed to have Mr. Ingram draft a letter to Dr. Anderson inquiring about his request for a hearing.

MOHAMMAD HAZEM IBRA AHMAD-SABRY, M.D., MCCOMB, MISSISSIPPI MEDICAL LICENSE NUMBER 19115

Dr. Ahmad-Sabry was not present or represented by legal counsel.

Dr. Craig advised that the Board had received information advising that Dr. Ahmad-Sabry had administrative action taken against his Michigan and Florida medical license for failing to report a one day suspension at LeBonheur Children's Medical Center while in fellowship on his application. After a brief discussion, the Executive Committee agreed to write Dr. Ahmad-Sabry a Letter of Concern advising him the importance of honesty and that the Board expects him to respond correctly and honestly when renewing his Mississippi medical license in the future.

PERSONAL APPEARANCE BY PITT VESOM, M.D., APPLICANT FOR LICENSURE

Dr. Vesom was present and represented by legal counsel, Charles Kugler, Kansas City, Kansas. Dr. Vesom executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference.

Mr. Ingram provided the Executive Committee a summary of Dr. Vesom's background and problems with disruptive behavior that were included in his application for licensure.

Dr. Vesom's attorney, Mr. Kugler, addressed the Executive Committee and then Dr. Vesom responded to questions from Mr. Ingram and members of the Executive Committee. After a brief discussion, the Executive Committee advised Dr. Vesom that they would discuss the matter and advise him their decision at a later date.

After further discussion, the Executive Committee requested that Ms. Freeman, Division Director, Licensure Division, contact both the Kansas and Missouri Boards for additional information. Motion was made by Dr. Merideth, seconded by Dr. Gibson, and carried unanimously to have the Mississippi Professionals Health Program (MPHP) evaluate Dr. Vesom. Once MPHP has reviewed his application and advised their recommendation, the Executive Committee will make their final recommendation on the matter.

PERSONAL APPEARANCE BY MAGRUDER S. CORBAN, M.D., LONG BEACH, MISSISSIPPI MEDICAL LICENSE NUMBER 05348

Dr. Corban joined the meeting but was not represented by legal counsel. He executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference.

Dr. Crawford requested that Dr. Corban explain to the Executive Committee why he had responded on his application for licensure renewal that his CME hours were current when in fact he needs 22.5 hours for 2006. Dr. Corban addressed the Executive Committee and advised that he is retired and that he made a mistake in calculating his CME hours on the renewal. When the Board requested documentation, he realized he was 22.5 hours deficient. The Executive Committee asked Dr. Corban could he make up the 22.5 hours by June 30, 2007, and he advised that he would try.

After Dr. Corban exited the meeting, the Executive Committee unanimously agreed to send Dr. Corban a Letter of Concern and advise him that if he wanted to keep his medical license current that he would need to provide documentation of the necessary hours to the Board by June 30, 2007, and that an additional 40 hours of CME would be due by June 30, 2008.

CHARLES S. KNIGHT, M.D., MISSISSIPPI MEDICAL LICENSE NUMBER 06210

Dr. Knight was not present at the meeting but was represented by legal counsel, Joel W. Howell, III. Mr. Howell had executed a written agreement for this informal meeting on Dr. Knight's behalf, a copy of which is attached hereto and

incorporated by reference.

Mr. Ingram summarized Dr. Knight's background and updated the Executive Committee on Dr. Knight's current application for licensure. Dr. Craig advised that Dr. Knight wants his medical license to review charts and teach at the University Medical Center, but is not interested in practicing medicine.

After a brief discussion, the Executive Committee advised Mr. Howell that they would check with someone at the University Medical Center (UMC) and verify whether or not Dr. Knight would need a medical license to perform in a teaching position, and also that the recommendations of PEP would need to be addressed. Mr. Ingram advised Mr. Howell that he would contact him with the response from UMC.

THE EXECUTIVE COMMITTEE RECESSED AT 3:50 P.M. AND RETURNED AT 4:00 P.M.

FRED LOUIS COHEN, M.D., JUPITER, FL., MISSISSIPPI MEDICAL LICENSE NUMBER 07541

Dr. Cohen was not present or represented by legal counsel.

Dr. Craig advised the Executive Committee that information had been received advising that Dr. Cohen had been reprimanded in Florida and Pennsylvania for performing surgery on the wrong side of the brain of a patient. After a brief discussion, the Executive Committee unanimously agreed to send a Letter of Concern to Dr. Cohen requesting documentation of his compliance with Florida's restrictions and evidence of the needed Continuing Medical Education (CME).

LETTER ISSUED TO SUSANNA COOPER, R.N., AND CHRISTINE COLLIER, R.N., TO CEASE AND DESIST

For informational purposes only, Dr. Craig advised that cease and desist letters had been sent to the above RN's due to their being engaged in the use of laser devices.

APPROVAL OF STAFF ATTENDING AIM AND FSMB ANNUAL MEETINGS IN SAN FRANCISCO, MAY 2-5, 2007

Motion was made by Dr. Gibson, seconded by Dr. Crawford, and carried unanimously to approve the expenses for staff members to attend the

Administrators In Medicine and Federation of State Medical Boards' Annual Meeting in San Francisco, CA., May 2-5, 2007. Approval was also given to allow a member from the Board to attend the meeting.

OTHER BUSINESS

Dr. Craig discussed possible problems with Free Standing Clinics and Nurse Practitioners. Concerns discussed were chart review, specialty compatibility, and clinics more than the fifty (50) mile range. Also, there are concerns regarding Nurse Practitioners employing physicians, a reversal of roles with a mid-level health practitioner.

Leslie Ross, Board Investigator, joined the meeting and presented to the Executive Committee those limited facts necessary to make a determination of reasonable cause pursuant to Miss. Code Ann. 73-25-28, to inspect records of John Thomas Mazzeo, M.D. After questioning Ms. Ross, the Executive Committee found that reasonable cause did exist and made the decision to allow Ms. Ross and Dr. Craig approval to obtain and copy records necessary for the investigation.

There was a brief discussion about Emergency Temporary Licenses. The Executive Committee unanimously agreed not to suspend any temporary licenses until the State of Emergency regarding Hurricane Katrina is no longer extended.

REVIEW OF JANUARY 18, 2007, BOARD AGENDA

Dr. Crawford briefly reviewed the agenda for Thursday's Board meeting.

ADJOURNMENT

There being no further business, the meeting adjourned at 4:30 P.M.

Dewitt G. Crawford, M.D.

President

Minutes taken and transcribed by Sherry Harris Administrative Assistant January 17, 2007

AGREEMENT TO APPEAR INFORMALLY BEFORE EXECUTIVE COMMITTEE

I, Pitt Vesom, M.D., have requested an opportunity to appear informally before the
Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to
discuss possible resolution of a pending disciplinary matter/investigation or to respond to a
complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts
of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give
the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal,
no disciplinary action will be taken without my express written consent. In so doing, I have been
advised and understand the following:

- During the meeting, the Executive Committee may or may not be represented by legal counsel. Notwithstanding, I understand that I have a right, if I so choose, to employ legal counsel and have counsel present during the informal meeting.
- I authorize the Committee Members to review and examine any statements, documentary evidence, or materials concerning the allegations during my informal appearance.
- 3. Because the purpose of my appearance is to avoid a hearing before the Board, I agree that presentation to and consideration by the Committee of any facts, matters, and documents pertaining to my case shall not unfairly or illegally prejudice the Committee members from further participation or consideration in the event a formal disciplinary hearing is later conducted. Stated differently, in the event the pending matter is not resolved following my appearance before the Committee, I will not object to any of the Committee members from further participating in subsequent meetings or hearings that may be conducted in relation to this matter.
- 4. By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:

with legal counsel present (name of counsel: <u>Charles</u> D. Kuster
without legal counsel present
EXECUTED, this the 17 day of January, 2007.

Witness Sherry Claris

AGREEMENT TO APPEAR INFORMALLY BEFORE EXECUTIVE COMMITTEE

- I, <u>Magruder S. Corban, M.D.</u>, have requested an opportunity to appear informally before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal, no disciplinary action will be taken without my express written consent. In so doing, I have been advised and understand the following:
 - During the meeting, the Executive Committee may or may not be represented by legal counsel. Notwithstanding, I understand that I have a right, if I so choose, to employ legal counsel and have counsel present during the informal meeting.
 - 2. I authorize the Committee Members to review and examine any statements, documentary evidence, or materials concerning the allegations during my informal appearance.
 - 3. Because the purpose of my appearance is to avoid a hearing before the Board, I agree that presentation to and consideration by the Committee of any facts, matters, and documents pertaining to my case shall not unfairly or illegally prejudice the Committee members from further participation or consideration in the event a formal disciplinary hearing is later conducted. Stated differently, in the event the pending matter is not resolved following my appearance before the Committee, I will not object to any of the Committee members from further participating in subsequent meetings or hearings that may be conducted in relation to this matter.
 - 4. By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:

with legal counsel present (name of counsel:)	
without legal counsel present	
EXECUTED, this the 17 day of January, 2007.	
mayudeslashin w	Ď
Witness: Sherry Garris	

AGREEMENT TO APPEAR INFORMALLY BEFORE EXECUTIVE COMMITTEE

- 1, <u>Charles S. Knight, M.D.</u>, have requested an opportunity to appear informally before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal, no disciplinary action will be taken without my express written consent. In so doing, I have been advised and understand the following:
 - During the meeting, the Executive Committee may or may not be represented by legal counsel. Notwithstanding, I understand that I have a right, if I so choose, to employ legal counsel and have counsel present during the informal meeting.
 - I authorize the Committee Members to review and examine any statements, documentary evidence, or materials concerning the allegations during my informal appearance.
 - 3. Because the purpose of my appearance is to avoid a hearing before the Board, I agree that presentation to and consideration by the Committee of any facts, matters, and documents pertaining to my case shall not unfairly or illegally prejudice the Committee members from further participation or consideration in the event a formal disciplinary hearing is later conducted. Stated differently, in the event the pending matter is not resolved following my appearance before the Committee, I will not object to any of the Committee members from further participating in subsequent meetings or hearings that may be conducted in relation to this matter.
 - 4. By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:

with legal counsel present (name of counsel: Vec Willage (TUS)
without legal counsel present
EXECUTED, this the 17 day of
foly sellet

Witness Merry Maris

BOARD MINUTES MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE JANUARY 18, 2007

The regularly scheduled meeting of the Mississippi State Board of Medical Licensure was held on Thursday, January 18, 2007, in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

The following members were present:

Dewitt G. Crawford, M.D., Louisville, President
Philip T. Merideth, M.D., J.D., Jackson, Vice President
Don A. Gibson, M.D., Richland, Secretary
Larry B. Aycock, M.D., McComb
Virginia M. Crawford, M.D., Hattiesburg
A. Wallace Conerly, M.D., Jackson
S. Randall Easterling, M.D., Vicksburg
William B. Harper, D.O., Greenwood
William S. Mayo, D.O., Oxford

Also present:

H. Vann Craig, M.D., Director
Stan T. Ingram, Complaint Counsel for the Board
Rhonda Freeman, Division Director, Licensure Division
Thomas Washington, Division Director, Investigative Division
Frances Scott, Special Projects Officer, Investigative Division
Sherry Harris, Administrative Assistant
Wesley Breland, Hattiesburg, Consumer Health Committee
Cecil R. Burnham, Jackson, Consumer Health Committee
Martha Thompson, Oxford, Consumer Health Committee

The meeting was called to order at 9:00 a.m. by Dr. Crawford, President. The invocation was given by Dr. Aycock. Dr. Merideth welcomed Joseph Blackston, M.D., the new Medical Director of Health Systems of Mississippi, and Amy Ballard, a representative from the Mississippi Academy of Physician Assistants.

APPROVAL OF CERTIFICATION OF MISSISSIPPI LICENSES TO OTHER ENTITIES FOR THE PERIOD NOVEMBER 1, 2006, THROUGH DECEMBER 31, 2006

One hundred sixty-six (166) licenses were certified to other entities for the period of November 1, 2006, through December 31, 2006. Motion was made by Dr. Mayo, seconded by Dr. Aycock, and carried unanimously to approve these certifications.

APPROVAL OF LICENSES ISSUED FOR THE PERIOD NOVEMBER 1, 2006, THROUGH DECEMBER 31, 2006

Sixty (60) licenses were issued for the period November 1, 2006, through December 31, 2006. Motion was made by Dr. Harper, seconded by Dr. Mayo, and carried unanimously to approve these licenses.

REVIEW OF MINUTES OF THE EXECUTIVE COMMITTEE MEETING DATED NOVEMBER 8, 2006, MINUTES OF THE BOARD MEETING DATED NOVEMBER 9, 2006, AND MINUTES OF THE EXECUTIVE COMMITTEE MEETING DATED DECEMBER 6, 2006

Minutes of the Executive Committee Meeting dated November 8, 2006, Minutes of the Board Meeting dated November 9, 2006, and Minutes of the Executive Committee Meeting dated December 6, 2006, were reviewed. Dr. Mayo moved for approval of the minutes as submitted, Dr. Aycock seconded the motion, and it carried unanimously.

Motion was made by Dr. Merideth that the Board consider going into Executive Session to discuss pending litigation, Dr. Aycock seconded the motion, and it carried unanimously. With a motion by Dr. Mayo, seconded by Dr. Gibson, the Board went into Executive Session. Roger Googe, Esq., representative from the Attorney General's office, was asked to join the Executive Session.

Upon motion by Dr. D. Crawford, seconded by Dr. Mayo, and carried unanimously, the Board came out of Executive Session.

REPORT OF JANUARY 17, 2007, EXECUTIVE COMMITTEE MEETING

Dr. Craig briefly reported on Wednesday's Executive Committee meeting. For informational purposes only, Dr. Craig provided a brief update on a local case of flu vaccines being obtained illegally, Walmart Checkup Clinics in the Jackson area that are in Board compliance, and a update on silicosis, all of which are reflected in the Executive Committee Minutes.

Dr. Craig advised that the Executive Committee had unanimously agreed to add a question on the physician's annual renewal form that would require physicians supervising nurse practitioners to provide the Board a copy of the protocol for all nurse practitioners they are supervising. This change will be made with the 2008 renewal forms.

Dr. Craig advised that the Executive Committee had unanimously agreed to continue issuing Emergency Temporary Licenses until the State of Emergency regarding Hurricane Katrina is no longer extended.

Dr. Craig advised that currently the jurisprudence exam is only given to M.D.'s, D.O.'s, and D.P.M.'s and the Executive Committee unanimously agreed to request regulations to add physician assistants and limited institutional licensees. Motion was made by Dr. Gibson, seconded by Dr. Harper, and carried unanimously to propose regulations adding the jurisprudence examination. The Board agreed unanimously to file notice with the Secretary of State of intent to adopt regulations that addresses the requirements for medical doctors or osteopathic physicians; medical doctors or osteopathic physicians by reciprocity or endorsement; podiatrists; podiatrists by reciprocity or endorsement; physician assistants; and, limited institutional licensure to appear for a personal interview and take and pass the jurisprudence examination as administered by the Board. Copies of the six (6) regulations are attached hereto and incorporated by reference.

Dr. Craig presented other informational items, which are reflected in the Executive Minutes. Motion was made by Dr. Aycock, seconded by Dr. Harper, and carried unanimously to approve the actions of the Executive Committee.

REPORTS FROM COMMITTEES

Consumer Health - Mr. Breland (Chair), Ms. Thompson, Mr. Burnham

Mr. Breland advised the Committee had met earlier today but there was no new information to report.

Education & Workforce - Dr. Conerly (Chair), Dr. Aycock, Dr. Mayo

Dr. Conerly advised there was no new information to report.

Scope of Practice - Dr. Merideth (Chair), Dr. Easterling, Dr. Aycock

Dr. Merideth advised that several dermatologists had contacted the Board concerning our current laser regulation and that Sabra Sullivan, M.D., a local dermatologist, had requested a meeting with the Scope of Practice Committee following the Board meeting today.

Professional Health Program - Dr.Gibson (Chair), Dr. Mayo, Dr. Merideth

Dr. Gibson advised there was no new information to report.

Rules, Regulation & Legislative - Dr. Easterling (Chair), Dr. D. Crawford, Dr. Harper

Dr. Easterling advised that the Legislature is currently in session and that the Board has several bills that need attention and support. Dr. Easterling briefly covered House Bills: 992, 1120, 1183 and Senate Bill 2988. Dr. Easterling also suggested soliciting the support of the Mississippi State Medical Association (MSMA) and their lobbyist.

Ethics - Dr. Merideth (Chair), Dr. V. Crawford, Dr. Conerly

Dr. Merideth advised that the Ethics Committee is working on a statement relative to physician's selling health-related products from their office. The Committee plans on presenting the statement at the next Board meeting.

PRESENTATION BY CHERYL S. THOMAS, R.N., INSPECTOR, COLLABORATIVE PRACTICES, ALABAMA STATE BOARD OF MEDICAL EXAMINERS

Dr. Crawford introduced and welcomed Ms. Thomas to the Board. Ms. Thomas is the Collaborative Practice Inspector for the State of Alabama Board of Medical Examiners. She gave a very informative presentation on the background of Alabama's program and her role as a collaborative practice inspector. Ms. Thomas answered questions from the Board and provided them with an informational packet of material.

FINAL ADOPTION OF REGULATION CONCERNING USE OF LASER DEVICES

Motion was made by Dr. Easterling, seconded by Dr. Mayo, and carried unanimously to adopt in final form the Board's regulation concerning use of laser devices, a copy of which is attached hereto and incorporated by reference. The regulation will be filed with the Secretary of State under the Administrative Procedures Act.

OTHER BUSINESS

Dr. Merideth made an announcement that there will be a meeting of the Scope of Practice Committee at 10:45 A.M. to discuss the current laser regulation.

Motion was made by Dr. Merideth, seconded by Dr. Gibson, and carried unanimously that the Board rescind Board Regulation XXXI, "Regulations Regarding the Conduct of Physicians Who Perform Utilization Review Medical Consultation Activities", effectively immediately. Motion was made Dr. Easterling, seconded by Dr. Conerly, and carried unanimously that the Executive Director and Board President send a letter to the Attorney General today advising the Board's decision.

ADJOURNMENT

The meeting adjourned at 10:35 A.M. with the next meeting scheduled for Thursday, March 8, 2007.

Dewitt G. Crawford, M.D.

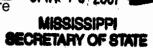
President

Minutes taken and transcribed by Sherry Harris Administrative Assistant January 18, 2007

NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



Mississippi State Board of Medical

Specific Legal Authority authorizing the promulgation of Rule: {Insert citation to state or federal statute, or

Licensure	rule Section 73-43-11		
c/o Rhonda Freeman			
1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended XXII. Regulations Governing the Practice		
(004) 007 0070	of Physician Assistants		
(601) 987-3079	·		
rhonda@msbml.state.ms.us			
Explanation of the Purpose of the Proposed Rule and to This regulation addresses the requirements for physical statements and the Proposed Rule and the Pr	sician assistants to meet in order to be licensed.		
The regulation change adds a requirement that the rand take and pass the jurisprudence examination as administered by the	physician assistant must appear for a personal interview		
and the data pass the jumph agency of charming and administrated by the	TO DOUG.		
This rule is proposed as a Final Rule, and/or a Temp	porary Rule (Check one or both boxers as applicable.)		
address. Persons making comments should include the	by addressing written comments to the agency at the above eir name and address, as well as other contact information, and telephone number of the party or parties you represent.		
Oral Proceeding: Check one box below:			
An oral proceeding is scheduled on this rule or Place:	n Date: Time:		
the above address at least day(s) prior to the	ne oral proceeding you must make a written request to the agency at the proceeding to be placed on the agenda. The request should well as other contact information; and if you are an agent or of the party or parties you represent.		
will be held if a written request for an oral procee persons. The written request should be submitted (20) days after the filing of this notice of proposed	ile. Where an oral proceeding is not scheduled, an oral proceeding ding is submitted by a political subdivision, an agency or ten (10) to the agency contact person at the above address within twenty d rule adoption and should include the name, address and telephone if you are an agent or attorney, the name, address and telephone		
Economic Impact Statement: Check one box below:			
The agency has determined that an economic in	mpact statement is not required for this rule, or		
The concise summary of the economic impact	statement required is attached.		
The entire text of the Proposed Rule including the text of a	ny rule being amended or changed is attached.		
Date Rule Proposed: January 18, 2007	Proposed Effective Date of Rule: 30 days from final filing.		
. /			

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

January 19, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This regulation addresses the requirements for physician assistants to meet in order to be licensed. The regulation amendment requires the physician assistant to appear for a personal interview and take and pass the Jurisprudence Examination as administered by the Board.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

XXII. REGULATIONS GOVERNING THE PRACTICE OF PHYSICIAN ASSISTANTS

A. SCOPE

- 1. The following regulations pertain to Physician Assistants practicing medicine with physician supervision. Physician Assistants may perform those duties and responsibilities, including diagnosing and the ordering, prescribing, dispensing of prepackaged drugs, and administration of drugs and medical devices as delegated by their supervising physician(s).
- Physician Assistants may provide any medical service which is delegated by the supervising physician when the service is within the Physician Assistant's training and skills; forms a component of the physician's scope of practice; and is provided with supervision.
- 3. Physician Assistants shall be considered the agents of their supervising physicians in the performance of all practice-related activities including, but not limited to, the ordering of diagnostic, therapeutic, and other medical services.

B. DEFINITIONS

- 1. For the purpose of Article XXII only, the following terms have the meanings indicated:
 - a. "Board" means the Mississippi State Board of Medical Licensure.
 - b. "Physician Assistant" means a person who meets the Board's criteria for licensure as a Physician Assistant and is licensed as a Physician Assistant by the Board.
 - c. "Supervising Physician" means a doctor of medicine or a doctor of osteopathic medicine who holds an unrestricted license from the Board, who is in the full-time practice of medicine, and who has been approved by the Board to supervise Physician Assistants.
 - d. "Supervise" or "Supervision" means overseeing and accepting responsibility for the medical services rendered by a Physician Assistant.
 - e. "Primary Office" means the usual practice location of a physician and being the same location reported by that physician to the Mississippi State Board of Medical Licensure and the United States Drug Enforcement Administration.

- f. "NCCPA" means the National Commission on Certification of Physician Assistants.
- g. "PANCE" means the Physician Assistant National Certifying Examination.
- h. "CAAHEP" means the Commission on Accreditation of Allied Health Education Programs.
- i. "Predecessor or Successor Agency" refers to the agency responsible for accreditation of educational programs for Physician Assistants that preceded CAAHEP or the agency responsible for accreditation of educational programs for physician assistants that succeeded CAAHEP.
- 2. Masculine terms wherever used in this regulation shall also be deemed to include the feminine.

C. QUALIFICATIONS FOR LICENSURE

- 1. Pursuant to Section 73-43-11, Mississippi Code (1972) Annotated, all Physician Assistants who are employed as Physician Assistants by a Department of Veterans Affairs health care facility, a branch of the United States military, or the Federal Bureau of Prisons and who are practicing as Physician Assistants in a federal facility in Mississippi on July 1, 2000, and those Physician Assistants who trained in a Mississippi Physician Assistant program and have been continuously practicing as a Physician Assistant in Mississippi since 1976, shall be eligible for licensure if they submit an application for licensure to the Board by December 31, 2000, and meet the following additional requirements:
 - a. Satisfies the Board that he is at least twenty-one (21) years of age and of good moral character.
 - b. Submits an application for license on a form supplied by the Board, completed in every detail with a recent photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot will not be accepted.
 - c. Pays the appropriate fee as determined by the Board.
 - d. Presents a certified copy of birth certificate.

- e. Proof of legal change of name if applicable (notarized or certified copy of marriage or other legal proceeding).
- f. Provides information on registration or licensure in all other states where the applicant is or has been registered or licensed as a Physician Assistant.
- g. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
- h. No basis or grounds exist for the denial of licensure as provided at Article N below.

Physician Assistants licensed under this subsection will be eligible for license renewal so long as they meet standard renewal requirements.

- 2. Before December 31, 2004, applicants for Physician Assistant licensure, except those licensed pursuant to the paragraph above, must be graduates of Physician Assistant educational programs accredited by the Commission on Accreditation of Allied Health Educational Programs or its predecessor or successor agency, have passed the certification examination administered by the National Commission on Certification of Physician Assistants (NCCPA), have current NCCPA certification, and possess a minimum of a baccalaureate degree, and meet the following additional requirements:
 - a. Satisfies the Board that he is at least twenty-one (21) years of age and of good moral character.
 - b. Submits an application for license on a form supplied by the Board, completed in every detail with a recent photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot will not be accepted.
 - c. Pays the appropriate fee as determined by the Board.
 - d. Presents a certified copy of birth certificate.
 - e. Proof of legal change of name if applicable (notarized or certified copy of marriage or other legal proceeding).
 - f. Provides information on registration or licensure in all other states where the applicant is or has been registered or licensed as a

Physician Assistant.

- g. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
- h. No basis or grounds exist for the denial of licensure as provided at Article N below.

Physician Assistants meeting these licensure requirements will be eligible for license renewal so long as they meet standard renewal requirements.

- 3. On or after December 31, 2004, applicants for Physician Assistant licensure must meet the following requirements:
 - a. Satisfies the Board that he is at least twenty-one (21) years of age and of good moral character.
 - b. Submits an application for license on a form supplied by the Board, completed in every detail with a recent photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot will not be accepted.
 - c. Pays the appropriate fee as determined by the Board.
 - d. Presents a certified copy of birth certificate.
 - e. Proof of legal change of name if applicable (notarized or certified copy of marriage or other legal proceeding).
 - f. Possesses a master's degree in a health-related or science field.
 - g. Has successfully completed an educational program for Physician Assistants accredited by CAAHEP or its predecessor or successor agency.
 - Passed the certification examination administered by the NCCPA and have current NCCPA certification.
 - Provides information on registration or licensure in all other states where the applicant is or has been registered or licensed as a Physician Assistant.
 - j. Must have favorable references from two (2) physicians licensed in

the United States with whom the applicant has worked or trained.

- Must appear for a personal interview in the office of the
 Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- kl. No basis or grounds exist for the denial of licensure as provided at Article N below.

4. Temporary License

- a. The Board may grant a temporary license to an applicant who meets the qualifications for licensure except that the applicant has not yet taken the national certifying examination administered by the NCCPA or the applicant has taken the national certifying examination and is awaiting the results.
- b. A temporary license is valid:
 - (1) for one hundred eighty (180) days from the date of issuance;
 - (2) until the results of an applicant's examination are available; or
 - (3) until the Board makes a final decision on the applicant's request for licensure, whichever comes first. The Board may extend a temporary license, upon a majority vote of the Board members, for a period not to exceed one hundred eighty (180) days. Under no circumstances may the Board grant more than one extension of a temporary license.

NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



MISSISSIPPI SECRETARY OF STATE

Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

Specific Legal Authority authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule_Section 73-43-11
Reference to Rules repealed, amended or suspended by th Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended II. Licensure by Examination - M.D. and/or
D.O.

	D.C)	
(601) 987-3079			·
rhonda@msbml.state.m	IS.US		
Explanation of the Purpose of This regulation addresses the	the Proposed Rule and the reasone requirements for medical doc	on(s) for proposing the ctors or osteopathic ph	rule: (Insert here)
	nsing examination. The regulation is samination as administered by the Board		uirement that the physician
This rule is proposed as a Fir	nal Rule, and/or a 🔲 Temporary R	ule (Check one or both b	oxers as applicable.)
address. Persons making com	ws on the proposed rule by addre ments should include their name y, the name, address and telephor	e and address, as well as	other contact information, and
Oral Proceeding:	Check one box below:		
An oral proceeding Place:	is scheduled on this rule on Date:	Time:	
the above address at lea include your name, add	and present evidence at the oral prast day(s) prior to the proceediress, telephone number as well as dress and telephone number of the proceeding the process.	eding to be placed on the other contact information	agenda. The request should a; and if you are an agent or
will be held if a written persons. The written re (20) days after the filin	is not scheduled on this rule. When request for an oral proceeding is sequest should be submitted to the ag of this notice of proposed rule ad) making the request; and if you are parties you represent.	submitted by a political sugency contact person at the loption and should include	ubdivision, an agency or ten (10) he above address within twenty e the name, address and telephone
Economic Impact Statement:	Check one box below:		
	rmined that an economic impact sta	atement is not required for	or this rule, or
The concise summar	ry of the economic impact statemen	nt required is attached.	
The entire text of the Proposed I	Rule including the text of any rule b	being amended or change	d is attached.

Date Rule Proposed: January 18, 2007

Proposed Effective Date of Rule: 30 days from final filing.

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman Division Director TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

January 19, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This regulation addresses the requirements for medical doctors or osteopathic physicians to meet in order to be licensed based on their licensing examination. The regulation amendment requires the physician to take and pass the Jurisprudence Examination as administered by the Board.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

II. LICENSURE BY EXAMINATION - M.D. AND/OR D.O.

- A. To qualify for admission by examination, an individual shall meet the following requirements, provided that the Board may admit any individual to the examination while reserving its right to deny licensure if that individual fails to meet all requirements for licensure subsequent to success or completion of the examination:
 - 1. Applicant must satisfy the Board that he is at least twenty-one (21) years of age and of good moral character.
 - 2. Present a diploma from a reputable medical college or college of osteopathic medicine, subject to the following conditions:
 - a. If the degree is from a medical college or a college of osteopathic medicine in the United States or Puerto Rico, the medical college must be accredited by the Liaison Committee on Medical Education (LCME), a Joint Committee of the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA), or if a college of osteopathic medicine, must be accredited by the Professional Education Committee of the American Osteopathic Association (AOA).
 - b. If the degree is from a Canadian medical school, the school must be accredited by the Liaison Committee on Medical Education (LCME) and by the Committee on Accreditation for Canadian Medical Schools, as sponsored by the Canadian Medical Association and Association of Canadian Medical Colleges.
 - c. If the degree is from a foreign medical school, applicant must either (i) possess a valid certificate from the ECFMG or (ii) document successful completion of a Fifth Pathway program, as described in Article II, B below.
 - d. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - 3. Applicants for licensure by examination must present documentation of having completed at least one (1) year of postgraduate training in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or by the AOA; or training in Canada accredited by the Royal College of Physicians and Surgeons.

- 4. Present certified copy of birth certificate.
- 5. Subject to the provisions of Article IV below, an applicant must successfully complete and pass all parts/steps of the FLEX or USMLE.
- 6. Must submit an application for medical license on a form supplied by the Board, completed in every detail with a recent photograph (walletsize/passport type) attached. A Polaroid or informal snapshot picture will not be accepted.
- 7. Submit fee prescribed by the Board; however, any fees related to permanent licensure may be deferred for applicants indicating a desire to practice medicine under a Temporary License or Limited License within the confines of an ACGME or AOA approved postgraduate training program pursuant to Section X.A.1 or Section V of these regulations.
- 8. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- B. A Fifth Pathway Program, as a prerequisite for licensure by examination pursuant to Article II, A2d above, will be considered on an individual basis. Students who have completed the academic curriculum in a foreign medical school and who have fulfilled the conditions hereinafter set forth, may be offered the opportunity to substitute for an internship required by the foreign medical school, an academic year of supervised clinical training prior to entrance into the first year of ACGME-or AOA-approved postgraduate medical education. The supervised clinical training (Fifth Pathway) must be under the direction of a medical school accredited by the LCME. Fifth Pathway will be available to students who have fulfilled the following conditions:
 - 1. Completed, in an accredited American college or university, undergraduate pre-medical work of the quality acceptable for matriculation in an accredited U.S. medical school,
 - Studied medicine at a medical school located outside the United States, Puerto Rico and Canada but which is recognized by the World Health Organization, and
 - 3. Completed all of the formal requirements of the foreign medical school except internship and/or social service.

C. Prior to issuance of a permanent Mississippi medical license, a graduate of a foreign medical school who has successfully completed all other requirements of application for licensure by examination must present documentation of having completed at least three (3) years of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of Physicians and Surgeons.

NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



Mississippi State Board of Medical Licensure

Specific Legal Authority authorizing the promulgation Rule: {Insert citation to state or federal statute, or rule Section 73-43-11	
Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended III. Licensure by Reciprocity or Endorsement	} •
M.D. and/or D.O.	}

c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule : { Insert citation to specific rule(s) repealed, amended or suspended
(601) 987-3079 rhonda@msbml.state.ms.us	
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licensed based on their licensure with another state. The physician must take and pass the jurisprudence examination as administered	ne regulation change adds a requirement that the ed by the Board.
This rule is proposed as a ☑ Final Rule, and/or a ☐ Temporar	ry Rule (Check one or both boxers as applicable.)
Persons may present their views on the proposed rule by a address. Persons making comments should include their n if you are an agent or attorney, the name, address and tele	ame and address, as well as other contact information, and
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An oral proceeding is scheduled on this rule on Da Place:	ate: Timė:
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Economic Impact Statement: Check one box below:	
☑The agency has determined that an economic impa	ct statement is not required for this rule, or
The concise summary of the economic impact state	ement required is attached.
The entire text of the Proposed Rule including the text of any r	ule being amended or changed is attached.
Date Rule Proposed: January 18, 2007	Proposed Effective Date of Rule: 30 days from final filing.

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

January 19, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This regulation addresses the requirements for medical doctors or osteopathic physicians to meet in order to be licensed based on their licensure in another state. The regulation amendment requires the physician to take and pass the Jurisprudence Examination as administered by the Board.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

III. LICENSURE BY RECIPROCITY OR ENDORSEMENT - M.D. AND/OR D.O.

- A. The Board may grant a license to practice medicine without further examination to a graduate in medicine or osteopathic medicine who holds a valid, active license to practice medicine in another state, provided the requirements in said state are equal to those required by this Board.
- B. The Board endorses, for the purpose of reciprocity, licenses to practice medicine obtained in most states by written examination prior to March 8, 1973. Subject to the provisions of Article IV below, all applicants for medical licensure by reciprocity who took the FLEX between March 8, 1973, and January 24, 1985, must have passed the FLEX taken in one three-day sitting with a weighted average of 75 or higher in order to obtain licensure in Mississippi. The Board will not accept scores of more than one administration of the FLEX which have been combined (factored) to provide a FLEX weighted average of 75 or higher. From and after January 24, 1985, an applicant for medical licensure by reciprocity must have passed both Components I and II of the FLEX with a score of 75 to be considered the passing grade for each component. From and after June, 1994, the Board shall endorse, for the purpose of reciprocity, licenses to practice medicine from applicants who have successfully taken Steps 1, 2 and 3 of the USMLE.
- C. Those doctors of osteopathic medicine who graduated prior to June 1, 1973, and who make application for licensure by reciprocity with another state will be considered only if they took and passed the same written licensure examination given in that state at that time to graduates of medical schools. A statement to this effect will be obtained by this Board from that licensing board.
- D. The Board may affiliate with and recognize for the purpose of waiving examination and may grant licenses to Diplomats of the NBME; on or after February 13, 1973, to Diplomats of the NBOME and licentiates of the Medical Council of Canada. If a Diplomat of the NBME or NBOME, the applicant must obtain Certification of Endorsement from that Board and submit same with application. If seeking endorsement with the Medical Council of Canada, the applicant must obtain a Certificate of Standing and submit it with the application.
- E. The applicant must have the application certified by the state board where the original license was obtained by examination.
- F. The Board may grant a license by reciprocity to a graduate of a foreign medical school who was licensed in another state by written examination prior to March 8, 1973, if he is certified by an American Board of Medical Specialties. The applicant must present the certificate from the specialty board stating he is currently certified and comply with all other licensure requirements for foreign

medical graduates.

- G. In addition to the above requirements for licensure by reciprocity and/or endorsement, an individual shall meet the following requirements:
 - 1. Applicant must be twenty-one (21) years of age, of good moral character.
 - 2. Present a diploma from a reputable medical college or college of osteopathic medicine, subject to the following conditions:
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. If the degree is from a medical college or a college of osteopathic medicine in the United States or Puerto Rico, the medical college must be accredited by the Liaison Committee on Medical Education (LCME), a Joint Committee of the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA) or the College of Osteopathic Medicine must be accredited by the American Osteopathic Association (AOA).
 - c. If the degree is from a Canadian medical school, the school must be accredited by the Liaison Committee on Medical Education (LCME) and by the Committee on Accreditation for Canadian Medical Schools, as sponsored by the Canadian Medical Association and Association of Canadian Medical Colleges.
 - d. If the degree is from a foreign medical school, applicant must either (i) possess a valid certificate from the ECFMG or (ii) document successful completion of a Fifth Pathway program, as described in Article II, B above, and be currently Board Certified by a Specialty Board recognized by the American Board of Medical Specialties or the American Osteopathic Association.
 - 3. If a graduate from a medical college or college of osteopathic medicine in the United States, Canada or Puerto Rico, applicant must present documentation of having completed at least one (1) year of postgraduate training in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or by the AOA; or training in Canada accredited by the Royal College of Physicians and Surgeons.
 - 4. If a graduate from a foreign medical school, applicant must present

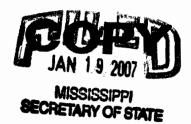
documentation of having completed either (i) three (3) or more years of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of Physicians and Surgeons or (ii) at least one year of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of Physicians and Surgeons, be currently Board certified by a Specialty Board recognized by the American Board of Medical Specialties or the American Osteopathic Association and will be based upon approval by the Mississippi State Board of Medical Licensure.

- 5. An applicant who otherwise possesses all of the qualifications for licensure by reciprocity/ endorsement, but has not taken a medical proficiency examination or licensure examination within ten (10) years prior to filing his or her application, must pass the Special Purpose Examination (SPEX) as administered by and under auspices of the Board, unless the applicant:
 - a. Submits satisfactory proof of current certification by an American Board of Medical Specialties or American Osteopathic Association approved specialty board; or
 - b. Submits proof that the applicant's sole purpose for seeking licensure is to serve as the Dean, Chairman of the Department or Faculty of the University of Mississippi School of Medicine. In such case, a license shall remain in effect so long as Licensee is a member of the faculty of the University School of Medicine.
- 6. Present certified copy of birth certificate.
- 7. Must submit an application for medical license on a form supplied by the Board, completed in every detail with a recent photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot picture will not be accepted.
- 8. Submit fee prescribed by the Board.
- 9. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- H. Graduates of foreign medical schools seeking licensure by reciprocity or endorsement via Fifth Pathway Programs will be considered on an individual basis subject to those requirements set forth in Section II, B above.

NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI





Mississippi State Board of Medical Licensure

Specific Legal Authority authorizing the promulgation of Rule: (Insert citation to state or federal statute, or rule Section 73-43-11

c/o Knonda Freeman	
1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed,
	amended or suspended VII. Licensure by Reciprocity or Endorsement Podiatric Medicine
(601) 987-3079	
rhonda@msbml.state.ms.us	
Explanation of the Purpose of the Proposed Rule and the This regulation addresses the requirements for podiatri	
licensure in another state. The regulation change adds	a requirement that the physician must take and pass
the jurisprudence examination as administered by the Board.	
This rule is proposed as a 🗹 Final Rule, and/or a 🗖 Tempora	ary Rule (Check one or both boxers as applicable.)
Persons may present their views on the proposed rule by a address. Persons making comments should include their r	addressing written comments to the agency at the above
if you are an agent or attorney, the name, address and tele	
Oral Proceeding: Check one box below:	
An oral proceeding is scheduled on this rule on Da Place:	ate: Time:
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Date Rule Proposed: January 18, 2007	Proposed Effective Date of Rule: 30 days from final filling.

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

January 19, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This regulation addresses the requirements for podiatrists to meet in order to be licensed based on their licensure in another state. The regulation amendment requires the podiatrist to take and pass the Jurisprudence Examination as administered by the Board.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

VII. LICENSURE BY RECIPROCITY OR ENDORSEMENT - PODIATRIC MEDICINE

- A. The Board may grant a license to practice podiatric medicine without further examination to a graduate in podiatric medicine who holds a valid, active license to practice podiatric medicine in another state, provided the requirements in said state are equal to those required by this Board and the other state extends the same reciprocal privileges to this state.
- B. If the original license of an applicant was obtained by state board examination, the applicant must have application certified by the state board where original license was obtained by written examination.
- C. The Board may affiliate with and recognize for the purpose of waiving examination and may grant licenses to Diplomats of the National Board of Podiatric Examiners. If a Diplomat of the National Board of Podiatric Examiners, the applicant must obtain certification of endorsement from that Board and submit the same with application.
- D. In addition to the above requirements for licensure by reciprocity and/or endorsement, an individual shall meet the following requirements:
 - 1. Applicant must be twenty-one (21) years of age, and of good moral character.
 - Applicant must have had at least four (4) years high school and be graduate of same; he shall have at least one (1) year pre-podiatry college education.
 - 3. Present a diploma from a college of podiatric medicine recognized by the Board as being in good standing, subject to the following conditions.
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. No college of podiatry or chiropody shall be accredited by the Board as a college of good standing which does not require for graduation a course of study of at least four (4) years (eight and one-half [8½] months each) and be recognized by the Council on Education of the American Podiatry Association.
 - 84. Must present proof of completion of (1) one year of APMA-approved postgraduate training in the U.S. or Canada.

- 45. Present certified copy of birth certificate.
- 56. Must submit an application for medical license on a form supplied by the Board, completed in every detail with a recent photograph (wallet-size/passport-type) attached. A Polaroid or informal snapshot picture will not be accepted.
- 67. Submit fee prescribed by the Board.
- 78. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.

NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



MISSISSIPPI **SECRETARY OF STATE**

Mississippi State Board of Medical Licensure c/o Rhonda Freeman

Specific Legal Authority authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule Section 73-43-11	
Reference to Rules repealed, amended or suspended by Proposed Rule: { Insert citation to specific rule(s) repealed mended or suspended VI. Licensure by Examination - Podiatric	
Medicine	}

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1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended VI. Licensure by Examination - Podiatric Medicine
(601) 987-3079	lyiduvi id
rhonda@msbml.state.ms.us	
Explanation of the Purpose of the Proposed Rule and the This regulation addresses the requirements for podia	ne reason(s) for proposing the rule: {Insert here} atrists to meet in order to be licensed based on their
licensing examination. The regulation change adds a	
the jurisprudence examination as administered by the Board.	
·	
This rule is proposed as a 🛮 Final Rule, and/or a 🗖 Tempo	orary Rule (Check one or both boxers as applicable.)
	y addressing written comments to the agency at the above ir name and address, as well as other contact information, and elephone number of the party or parties you represent.
Oral Proceeding: Check one box below:	· .
An oral proceeding is scheduled on this rule on Place:	Date: Time:
the above address at least day(s) prior to the	e oral proceeding you must make a written request to the agency at e proceeding to be placed on the agenda. The request should well as other contact information; and if you are an agent or of the party or parties you represent.
will be held if a written request for an oral proceed persons. The written request should be submitted (20) days after the filing of this notice of proposed	e. Where an oral proceeding is not scheduled, an oral proceeding ling is submitted by a political subdivision, an agency or ten (10) to the agency contact person at the above address within twenty rule adoption and should include the name, address and telephone f you are an agent or attorney, the name, address and telephone
Economic Impact Statement: Check one box below:	
The agency has determined that an economic in	npact statement is not required for this rule, or
The concise summary of the economic impact s	tatement required is attached.
The entire text of the Proposed Rule including the text of an	ny rule being amended or changed is attached.
Date Rule Proposed: January 18, 2007	Proposed Effective Date of Rule: 30 days from final filing.

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: January 19, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This regulation addresses the requirements for podiatrists to meet in order to be licensed based on their licensing examination. The regulation amendment requires the podiatrist to take and pass the Jurisprudence Examination as administered by the Board.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

VI. LICENSURE BY EXAMINATION - PODIATRIC MEDICINE

- A. To qualify for admission by examination, an individual shall meet the following requirements, provided that the Board may admit any individual to the examination while reserving its right to deny licensure if that individual fails to meet all requirements for licensure subsequent to success or completion of the examination:
 - 1. Applicant must satisfy the Board that he is at least twenty-one (21) years of age and of good moral character.
 - 2. Applicant must have had at least four (4) years of high school and be graduate of same; he shall have at least one (1) year pre-podiatry college education.
 - 3. Present a diploma from a college of podiatric medicine recognized by the Board as being in good standing, subject to the following conditions:
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. No college of podiatry or chiropody shall be accredited by the Board as a college of good standing which does not require for graduation a course of study of at least four (4) years (eight and one-half [8½] months each) and be recognized by the Council on Education of the American Podiatry Association.
 - 4. Present certified copy of birth certificate.
 - 5. Must successfully take an examination for podiatrists which shall be held concurrently with the regular examinations of the Board given in June and December. The applicant shall be examined in the following subjects: anatomy, histology, physiology, chemistry, pharmacy, materia medica, therapeutics, bacteriology, pathology, surgery, dermatology, neurology, physical therapy, diagnosis and roentgenology, orthopedics, chiropody and chiropodial surgery, limited in their scope to the treatment of the human foot and leg, and if found qualified shall receive a license. The minimum of requirements for license shall be a general average of seventy-five percent (75%) of all the subjects involved, provided that a grade of not less than sixty percent (60%) be made on any one (1) subject or branch given in the examination held. However, applicants are encouraged to take the examinations given by the National Board of Podiatry Examiners.

- 6. Must submit an application for podiatry license on a form supplied by the Board, completed in every detail with a recent photograph (wallet-size/passport-type) attached. A Polaroid or informal snap-shot picture will not be accepted.
- 7. Submit fee prescribed by the Board.
- 8. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.

NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



MISSISSIPPI SECRETARY OF STATE

Specific Legal Authority authorizing the promulgation of Mississippi State Board of Medical Rule: (Insert citation to state or federal statute, or rule Section 73-43-11 Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Reference to Rules repealed, amended or suspended by the Proposed Rule: [Insert citation to specific rule(s) repealed, Jackson, MS 39216 amended or suspended V. Limited Institutional Licensure (601) 987-3079 rhonda@msbml.state.ms.us Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: {Insert here}
This regulation addresses the requirements for international medical graduates to meet in order to be licensed with a limited institutional license. The regulation change adds a requirement that the physician must appear for a personal interview and take and pass the jurisprudence examination as administered by the Board. This rule is proposed as a Final Rule, and/or a Temporary Rule (Check one or both boxers as applicable.) Persons may present their views on the proposed rule by addressing written comments to the agency at the above address. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Oral Proceeding:** Check one box below: An oral proceeding is scheduled on this rule on Date: Time: Place: If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at the above address at least _____ day(s) prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Economic Impact Statement:** Check one box below: The agency has determined that an economic impact statement is not required for this rule, or The concise summary of the economic impact statement required is attached. The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Rhonda Freeman Division Director

Date Rule Proposed: January 18, 2007

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Proposed Effective Date of Rule: 30 days from final filing.

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

January 19, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This regulation addresses the requirements for international medical graduates to meet in order to be licensed with a limited institutional license. The regulation amendment requires the physician to appear for a personal interview and take and pass the Jurisprudence Examination as administered by the Board.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

V. LIMITED INSTITUTIONAL LICENSURE

A. Pursuant to Section 73-25-23, Mississippi Code (1972) Annotated, a Limited Institutional License is available only to graduates of foreign medical schools who are employed or are being considered for employment to practice medicine in one or more of the following Mississippi state-supported institutions located in the same county:

East Mississippi State Hospital, Meridian
Ellisville State School, Ellisville
Hudspeth Center, Whitfield
Mississippi State Department of Health, Jackson
Mississippi State Hospital, Whitfield
Mississippi State Department of Corrections, Jackson
Boswell Retardation Center, Sanatorium
University of Mississippi Medical Center, Jackson

It is understood that graduates of foreign medical schools holding a Limited Institutional License, and who are employed by and enrolled in an approved ACGME or AOA postgraduate residency training program at the University of Mississippi Medical Center, shall be authorized to participate in any residency educational program at the University of Mississippi Medical Center, or any of its affiliated training program sites.

- B. An application for limited institutional licensure may be obtained only upon the written request of the director of one of the above-named institutions which have employed or is considering for employment a graduate of a foreign medical school to practice medicine.
- C. A limited institutional license may be issued for a period of one (1) year for practice in a particular institution after a review and favorable recommendations by a majority of the following:
 - 1. President or Secretary, Board of Trustees of Institution
 - 2. Director of Institution
 - 3. President or Secretary, Local Chartered Medical Society in area in which institution is located
 - 4. Member, Board of Trustees, Mississippi State Medical Association in area in which institution is located

- 5. Member, Mississippi State Board of Medical Licensure from district in which institution is located
- 6. Executive Officer, Mississippi State Board of Medical Licensure
- D. In addition to the above requirements for a limited institutional license, an applicant shall meet the following requirements:
 - 1. Must be at least twenty-one (21) years of age, of good moral character.
 - 2. Must present original diploma from a reputable medical college or reputable college of osteopathic medicine.
 - 3. Must submit certified copy of valid certificate from the ECFMG or its successor.
 - 4. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
 - 5. Must submit application completed in every detail with recent photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot picture will not be accepted.
 - 6. Must submit fee prescribed by the Board.
 - 7. Must appear for a personal interview in the office of the Mississippi State
 Board of Medical Licensure and successfully pass the Jurisprudence
 Examination as administered by the Board.
- E. Pursuant to Section 73-25-23, Mississippi Code (1972) Annotated, a limited institutional license must be renewed annually, after such review as the State Board of Medical Licensure considers necessary. A graduate of a foreign medical school so licensed may hold such limited institutional license no longer than five (5) years; provided, however, that any graduate of a foreign medical school so licensed and employed by any state institution on January 1, 1981, shall not be subject to the five-year limitation created by statute. Based upon the above law:
 - 1. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution on January 1, 1981, shall be renewable annually based upon the favorable recommendation of the director of the institution by which the licensee is employed.

- 2. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution from January 2, 1981, through June 30, 1983, shall be renewable annually for five years, beginning July 1, 1983, based upon the favorable recommendation of the director of the institution by which the licensee is employed.
- 3. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution on and after July 1, 1983, shall be renewable annually based upon the favorable recommendation of the director of the institution by which the licensee is employed. A graduate of a foreign medical school so licensed may hold such limited institutional license no longer than five (5) years.
- F. Since a limited institutional license is issued to a graduate of a foreign medical school for employment to practice medicine in a particular Mississippi state-supported institution, or institutions located in the same county, such limited institutional license shall become void immediately upon termination of employment of the licensee at the institution, or institutions, at which practice is authorized under the license.
- G. An annual renewal fee shall be prescribed by the Board.

Amended November 19, 1998.

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



MISSISSIPPI SECRETARY OF STATE

Specific Legal Authority Authorizing the promulgation of Mississippi State Board of Medical Licensure Rule: {Insert citation to state or federal statute, or c/o Rhonda Freeman rule Section 73-43-11 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216 Reference to Rules repealed, amended or suspended by the Proposed Rule: (Insert citation to specific rule(s) repealed, amended or suspended XIX. Regulations Concerning Use of Leser Devices (601) 987-3079 rhonda@msbml.state.ms.us Date Rule Proposed: Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: This regulation sets guidelines for the use of laser devices. The added language reverts the regulation back to the original, March 18, 1999, adopted language. The Agency Rule Making Record for this rule including any written comments received during the comment period and the record of any oral proceeding is available for public inspection by contacting the Agency at the above address. An oral proceeding was held on this rule: Date: Time: Place: An oral proceeding was not held on this rule. The Agency has considered the written comments and the presentations made in any oral proceedings, and This rule as adopted is without variance from the proposed rule. This rule as adopted differs from the proposed rule as there are minor editorial changes which affect the form rather than the substance of the rule. The rule as adopted differs from the proposed rule. The differences however are: Within the scope of the matters in the Notice of Proposed Rule Adoption, the logical outgrowth of the contents of the Notice of Proposed Rule Adoption and the comments submitted in response thereto, and The Notice of Proposed Rule Adoption provided fair warning that the outcome of the proposed rule adoption could be the rule in question.

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

January 18, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Division Director

SOS FORM APA 002 Effective Date 07/29/2005 ELEPHONE: (601) 987-3079

TELEPHONE: (601) 987-3079 FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: January 19, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This rule sets guidelines for the use of laser devices. The added language reverts the regulation back to the original, March 18, 1999, adopted language.

XIX. REGULATION CONCERNING USE OF LASER DEVICES

The use of laser devices, either for invasive or cosmetic procedures, is considered to be the practice of medicine in the State of Mississippi and therefore such use shall be limited to physicians and those directly supervised by physicians, such that a physician is on the premises and would be directly involved in the treatment if required.

Adopted March 18, 1999. Amended May 19, 2005. Amended January 18, 2007.

NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure



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Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

Specific Legal Authority authorizing the promulgation of Rule: (Insert citation to state or federal statute, or rule Section 73-43-11 Reference to Rules repealed, amended or suspended by the

Proposed Rule: { Insert citation to specific rule(s) repealed,

(601) 987-3079

amended or suspended XXXI. Regulations Regarding the Conduct of Physicians Who Perform Utilization Review Medical Consultation Activities) rhonda@msbml.state.ms.us Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: {Insert here} On January 18, 2007, the Board voted to rescind this rule effective immediately. This rule is proposed as a Final Rule, and/or a Temporary Rule (Check one or both boxers as applicable.) Persons may present their views on the proposed rule by addressing written comments to the agency at the above address. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. Oral Proceeding: Check one box below: An oral proceeding is scheduled on this rule on Date: Time: Place: If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at the above address at least _____ day(s) prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Economic Impact Statement:** Check one box below: The agency has determined that an economic impact statement is not required for this rule, or

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

The concise summary of the economic impact statement required is attached.

Date Rule Proposed: January 18, 2007

Proposed Effective Date of Rule: Immediately

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman Division Director

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

January 19, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

On January 18, 2007, the Board voted to rescind this rule effective immediately.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

XXXI. REGULATIONS REGARDING THE CONDUCT OF PHYSICIANS WHO PERFORM UTILIZATION REVIEW MEDICAL CONSULTATION ACTIVITIES

A. AUTHORITY AND PURPOSE OF THESE REGULATIONS

The Mississippi State Board of Medical Licensure adopts these regulations pursuant to its statutory authority to regulate physician conduct as provided in Chapters 25 and 43 of Title 73 of the Mississippi Code. The Mississippi State Board of Medical Licensure finds it necessary to perform its statutory responsibilities by adopting these regulations in order to fulfill its duty to protect the public as part of the historic police powers of the State, to set professional standards, to enforce the provisions of law regarding the performance of utilization review medical consultation activities by physicians, and to further other legitimate government purposes that are in the public interest and in accordance with the provisions of Mississippi law:

B. SCOPE OF THESE REGULATIONS

- 1. These regulations apply to any physician who performs utilization review medical consultation activities regarding any person or entity located within the State of Mississippi, regardless of the location, type, or status of the physician's utilization review medical consultation activities, whether the physician possesses a medical license in Mississippi, the existence of a physician-patient relationship with the person in Mississippi who is the subject of the utilization review medical consultation activity, or the type of utilization review medical consultation activity performed (e.g., prospective, concurrent, or retrospective review, an initial review, or a subsequent review of an adverse determination).
 - 2. In tailoring these regulations as closely as possible to the provisions of Mississippi law, the Mississippi State Board of Medical Licensure (hereinafter referred to as "the Board") does not intend for any part of these regulations to conflict with or supercede the authority of the Mississippi State Department of Health to regulate utilization review organizations pursuant to Mississippi Code Section 41-83-1 et seq. and regulations adopted by the Mississippi State Department of Health, or the authority of a person other than a physician to participate in "utilization review" as defined and authorized by Mississippi Code Section 41-83-1 et seq. and regulations adopted by the Mississippi State Department of Health.

C. TERMINOLOGY

1. For the purposes of these regulations only, the Board has determined that under the provisions of Mississippi law, a physician who performs any of the following utilization review medical activities serves in the role of a consulting physician, and that the term "utilization review medical consultation activities" includes, but is not limited to, the use of medical knowledge and professional judgment by a

a. make medical decisions, b. form medical opinions, c. give or suggest medical advice, d. perform or direct the performance of medical services, e. conduct a medical record review, f. serve as a medical consultant, apply medical service intensity or symptom severity criteria, h. monitor, prescribe, suggest, or recommend medical treatment, question or review a treating physician's medical decisions, j. make diagnostic, therapeutic, or healthcare facility admission or continued stay medical decisions or recommendations, review an adverse determination or other recommendation regarding a medical service made by a non-treating physician or other person, or discuss a person's medical care or medical condition or the reason for an adverse determination with the person's treating physician, his or her designee, or other affected healthcare provider, at any level of review, regarding the appropriateness of a medical service provided or proposed to be provided to a person or entity located within the State of Mississippi. The Board does not intend for the terminology used in these regulations or the requirements of these regulations to conflict with or supercede any provision of Mississippi law, including the definition of "utilization review" as contained in Mississippi Code Section 41-83-1(a) and regulations adopted by the Mississippi State Department of Health. D. LICENSURE AND QUALIFICATION REQUIREMENTS FOR PHYSICIANS WHO PERFORM UTILIZATION REVIEW MEDICAL CONSULTATION **ACTIVITIES** 1. In accordance with the provisions of law in Mississippi, the performance of utilization review medical consultation activities by any physician, regardless of the physician's location, type of utilization review medical consultation activities, or State(s) of medical licensure, regarding any person or entity located within the State of Mississippi, is an otherwise lawful practice within the State of Mississippi that is subject to regulation by, and professional accountability to, the Mississippi State Board of Medical Licensure. 2. In accordance with the provisions of law in Mississippi, any utilization review medical consultation activity that results in an adverse determination must be based on the prior evaluation and concurrence in the adverse determination by a physician licensed to practice in Mississippi.

physician licensed or otherwise lawfully practicing within this State to

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adopted by the patient's treat activity that reappropriately licensed in Mesame type of subject of the and uses the content of the subject of the same type of the subject of the same type of the subject of the subject of the subject of the same type of the subject of the subj	e with the provisions of law in Mississippi (including regulations no Mississippi State Department of Health), if a request is made by a ting physician, then any utilization review medical consultation results in an adverse determination must be performed by an equalified utilization review consultation physician, i.e., a physician lississippi who is board certified or board eligible and engaged in the practice and relevant specialty or subspecialty of medicine that is the utilization review medical consultation activity, and who possesses degree of skill ordinarily used by members of his or her profession in
good standing	,
- E. PROFESSIONA	L STANDARDS FOR PHYSICIANS WHO PERFORM
	REVIEW MEDICAL CONSULTATION ACTIVITIES
physician wh comply with t rulings, and o	e with the ethical duty of all physicians to respect the law, any or performs utilization review medical consultation activities must these regulations and all applicable Mississippi statutes, court other administrative agency rules, policies, and regulations, including lopted by the Mississippi State Department of Health.
performs util ethics princip	with the provisions of law in Mississippi, any physician who ization review medical consultation activities must comply with les established by the American Medical Association and relevant alty associations of which the physician is a member.
consultation prequested, the physician or consultation processing the consultation pro	with the provisions of law in Mississippi, any utilization review obysician who renders an adverse determination must discuss, if creasons for the adverse determination with the patient's treating other affected healthcare provider. The utilization review obysician must comply with the request for discussion within 14 of receiving either oral or written notification of the request.
	L ACCOUNTABILITY FOR PHYSICIAN CONDUCT IN THESE REGULATIONS
otherwise law physician is li consultation a accountable b evidence that not limited to a. incompete	ent professional practice,
•	ional conduct, or dishonorable or unethical conduct likely to deceive, defraud, or
-	bublic (e.g., dishonest, illegal, or negligent conduct in the

performance of utilization review medical consultation activities).

	ny violation of these regulations shall constitute unprofessional conduct in iolation of Mississippi Code Section 73-25-29(8).
G. ACT	IONS AVAILABLE TO THE BOARD
of pl cc M M pl ac so an m	cherwise lawfully practicing within this State (i.e., regardless of whether the hysician is licensed in Mississippi) who performs utilization review medical consultation activities regarding any person or entity located within the State of lississippi may be subject to an investigation by the Mississippi State Board of ledical Licensure upon the receipt of a written complaint regarding the hysician's conduct in the performance of utilization review medical consultation trivities. At any time after the receipt of a written complaint, the Board in its ble discretion may refer the complaint to the medical licensure authority of nother State where the utilization review consultation physician is licensed, or any refer the entire complaint or any portion thereof to any other appropriate athority, including the Mississippi State Department of Health or the Mississippi torney General.
ph ph ut un the	accordance with the provisions of law in Mississippi, when disciplining a pysician licensed in Mississippi or holding professionally accountable any pysician otherwise lawfully practicing within this State for the performance of ilization review medical consultation activities in an incompetent, approfessional, negligent, illegal, dishonest, dishonorable, or unethical manner, actions that the Mississippi State Board of Medical Licensure may take clude, but are not limited to, one or more of the following:
	denying, suspending, restricting, or revoking a Mississippi medical license; administering a public or private reprimand to a Mississippi licensed physician;
c.	assessing up to \$10,000 of the reasonable investigation costs expended by the Board in investigating a Mississippi licensed physician; moving for an injunction in Chancery Court to prohibit any physician's further performance of utilization review medical consultation activities;
f.	petitioning the Chancery Court to cite any noncompliant physician for contempt of court; referring the matter to another medical licensure authority or other authority
g.	for action regarding any physician; and taking any other action regarding any physician that the Board may deem proper under the circumstances (e.g., issuing an advisory letter of concern; issuing a notice of warning; issuing a cease and desist notice; adopting a resolution of disapproval of any physician's utilization review medical consultation activities; or reporting the Board's findings and/or actions to any person or organization in order to enforce or comply with the law or protect

the public).

11. C	OMPLIANCE DUTY AND EXEMPTIONS
	In assuring compliance with these regulations, the duty shall be on the physician, not on any other person or entity, to ensure that his or her utilization review medical consultation activities comply with these regulations. Any physician who claims to be exempt from these regulations shall have the burden of proving to the Board by a preponderance of the evidence that the exemption is valid, which must be done on a case-by-case basis.
2.	In accordance with Mississippi Code Section 41-83-31(a), the fact that a utilization review consultation physician rendered an adverse determination in a particular case shall not be used as the ground for professional accountability or disciplinary action by the Board. However, since complaints about physicians' utilization review medical consultation activities are likely to involve adverse determinations, the Board out of necessity may be required to investigate the underlying facts and circumstances involved in an adverse determination, or a pattern of adverse determinations, in order to determine whether a physician's utilization review medical consultation activity involves conduct that is subject to professional accountability or disciplinary action by the Board (e.g., an adverse determination rendered on the basis of incompetent, unprofessional, negligent, illegal, dishonest, dishonorable, or unethical conduct). Therefore, this limitation on the Board's authority to discipline a physician based solely on the fact of an adverse determination in a particular case does not preempt the Board's authority to regulate the conduct of physicians who perform utilization review medical consultation activities or to investigate and discipline or otherwise hold accountable a physician regarding the underlying conduct involved in making an adverse determination.
3.	Notwithstanding the licensure requirements and compliance policy contained in these regulations, the Mississippi State Board of Medical Licensure, in accordance with Mississippi Code Section 41-83-31, acknowledges that any utilization review medical consultation physician who makes an adverse determination for the Comprehensive Health Risk Pool or for a reviewer of 9 or fewer persons who reside in Mississippi shall be exempt from the requirement to hold a medical license in Mississippi.
·	However, any utilization review medical consultation physician who claims such an exemption is nevertheless engaged in an otherwise lawful practice within this State and therefore must comply with the Professional Standards and the other qualification requirements contained in these regulations.
4.	Notwithstanding the compliance policy contained in these regulations, the Board acknowledges an exemption to these regulations in accordance with regulations adopted by the Mississippi State Department of Health, so that these regulations

I. NOTICE OF REGULATION OF UTILIZATION REVIEW MEDICAL
CONSULTATION ACTIVITIES BY PHYSICIANS

1. At the time of an initial licensure application, and at the time of each application
for a renewal of a license to practice in Mississippi, all physicians shall
acknowledge that they have had an opportunity to read these regulations by
accessing the website of the Mississippi State Board of Medical Licensure (at
internet address www.msbml.state.ms.us) or by requesting a printed copy of these
regulations from the Board.

2. For further information regarding the Board's opinions, comments, and findings
of fact related to utilization review medical consultation activities by physicians,
see the Appendix to these regulations.

J. EFFECTIVE DATE

These regulations shall become effective on December 1, 2006, and shall be effective

prospectively regarding the conduct of physicians beginning on that date.

do not apply to physicians who perform in-house utilization review activities (also known as "quality assurance," "performance improvement," or "peer review") for Mississippi hospitals, home health agencies, clinics, private

MINUTES EXECUTIVE COMMITTEE MEETING MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE MARCH 7, 2007

MEMBERS PRESENT:

Dewitt G. Crawford, M.D., Louisville, President Philip T. Merideth, M.D., J.D., Jackson, Vice President Don A. Gibson, M.D., Richland, Secretary A. Wallace Conerly, M.D., Jackson

ALSO PRESENT:

H. Vann Craig, M.D., Director
Stan T. Ingram, Complaint Counsel for the Board
Ellen O'Neal, Assistant Attorney General
Rhonda Freeman, Division Director, Licensure Division
Thomas Washington, Division Director, Investigative Division
Frances Scott, Special Projects Officer, Investigative Division
Sherry Harris, Administrative Assistant
Harry Gunter, Investigative Division

The Executive Committee of the Mississippi State Board of Medical Licensure met on Wednesday, March 7, 2007, at 1:00 p.m. in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

BOARD'S MISSION STATEMENT

Dr. Craig presented a draft of a revised mission statement. After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. Conerly, and carried unanimously to present the revised mission statement to the Full Board for approval.

Dr. Craig provided the Executive Committee with an update on silicosis. Dr. Craig advised that a letter had been received from the Committee on Energy and Commerce requesting information concerning the Board's ongoing investigation. Dr. Craig advised that the matter was under investigation. Stan Ingram, Complaint Counsel for the Board, advised that his office is working on the necessary paperwork.

EXECUTIVE COMMITTEE MINUTES March 7, 2007
Page 2

UPDATE ON PITT VESOM, M.D., APPLICANT FOR LICENSURE

Dr. Vesom was not present or represented by legal counsel.

Dr. Craig discussed a letter from Gary D. Carr, M.D., Medical Director, Mississippi Professionals Health Program (MPHP), advising that Dr. Vesom had met with the Mississippi Professionals Health Committee. MPHC supports Dr. Vesom's licensure and they will institute a two year monitoring contract which will include PEP-Care with quarterly reports to the Board.

Motion was made by Dr. Gibson, seconded by Dr. Merideth, and carried unanimously to grant Dr. Vesom an unrestricted medical license.

ANDREW D. COOK, M.D., APPLICANT FOR UMC TEMPORARY LICENSE

Ms. Freeman, Division Director, Licensure Division, advised the Executive Committe of concerns with the four week rotation for some residents at the University Medical Center. The Board's regulations require a temporary license and in Dr. Cook's case, he had completed his four week rotation and never received a Mississippi license.

DR. MERIDETH EXITED THE MEETING AT 1:15 P.M.

Dr. Conerly advised that he would check with UMC and report back on their requirements. After a brief discussion, the Executive Committee advised that a letter should be sent to UMC advising them of the situation and that Dr. Cook should have received a temporary license before starting his rotation.

After further discussion about streamlining the process for residents performing the four week rotation at UMC, the Executive Committee requested that Ms. Freeman draft the needed requirements and present at the May Executive Committee meeting.

FRED LOUIS COHEN, M.D., JUPITER, FL., MISSISSIPPI MEDICAL LICENSE NUMBER 07541

For informational purposes only, Dr. Craig advised that he had received a letter from Dr. Cohen providing the documentation we had requested in our letter to him after the January 17, 2007, Executive Committee meeting.

EXECUTIVE COMMITTEE MINUTES March 7, 2007
Page 3

RALPH ARNOLD SMITH, M.D., GREENWOOD, MISSISSIPPI MEDICAL LICENSE NUMBER 07161

Dr. Craig discussed this matter and advised the Executive Committee that Dr. Smith's participation had been suspended in the Medicaid Program for a period of fifteen (15) years due to violations of Medicaid obligations and the requirement for Dr. Smith to repay the Division of Medicaid \$551,255.00 in overpayments.

After a brief discussion, Mr. Ingram advised the Board may have sufficient grounds for disciplinary action against Dr. Smith. Motion was made by Dr. Gibson, seconded by Dr. Conerly, and carried unanimously to authorize Dr. Craig and Mr. Washington to look into the grounds for disciplinary action and proceed.

APPROVAL FOR DR. CRAIG TO ATTEND MSMA'S ANNUAL CONVENTION IN SANDESTIN, FL, MAY 29 - JUNE 3, 2007

Motion was made by Dr. Crawford, seconded by Dr. Conerly, and carried unanimously to approve the expenses for Dr. Craig to attend MSMA's Annual Convention in Sandestin, FL, May 29 - June 3, 2007.

APPROVAL FOR DR. CRAIG TO ATTEND AMA'S ANNUAL CONVENTION IN CHICAGO, IL, JUNE 22 - 27, 2007

Motion was made by Dr. Crawford, seconded by Dr. Conerly, and carried unanimously to approve the expenses for Dr. Craig to attend AMA's Annual Convention in Chicago, IL, June 22 - 27, 2007.

OTHER BUSINESS

For informational purposes only, Dr. Craig discussed SAGE software and advised that it provides electronic signatures / email prescriptions. After a brief discussion of the pros and cons, Dr. Crawford advised that he will initiate a new committee for the Board on electronic prescribing and refer this matter to that committee.

Dr. Craig covered information discovered in the file of W. Scott Haddon, M.D., where MSBML had sent Dr. Haddon a Consent Order due to disciplinary action imposed against him by the South Carolina Board. The Consent Order was

EXECUTIVE COMMITTEE MINUTES March 7, 2007 Page 4

never signed nor returned. After a brief discussion, Mr. Ingram advised that the Board may have sufficient grounds to issue a summons and affidavit and have Dr. Haddon appear.

Motion was made by Dr. Gibson, seconded by Dr. Conerly, and carried that Dr. Haddon be issued a Summons and Affidavit to appear before the Executive Committee.

THE EXECUTIVE COMMITTEE RECESSED AT 2:00 P.M. AND RECONVENED AT 2:10 P.M.

PERSONAL APPEARANCE BY ROBERT B. LEE, M.D., JACKSON, MISSISSIPPI MEDICAL LICENSE NUMBER 10711

Dr. Lee joined the meeting but was not represented by legal counsel. He executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference.

Dr. Craig advised that Dr. Lee had been asked to appear before the Executive Committee to explain some irregularities that had been uncovered in his group clinic. Dr. Lee is one of the physicians at The Cardiovascular Surgical Clinic and it seems that when renewing their medical licenses they did not notify the Board that they supervised nurse practitioners. It was noted that they employed a non-approved nurse practitioner and Dr. Lee was questioned about allowing a nurse practitioner to write a prescription for a controlled substance.

Dr. Lee addressed the Executive Committee and advised that some staff members had completed some of the renewals online and did not include the correct information. Dr. Lee advised that the nurse practitioner was not hired to write prescriptions and this would not happen again.

After a brief discussion, Dr. Craig requested that the physicians in the clinic review 10% of the nurse practitioners patients' charts each month and make notations that are reviewed and discussed with them.

PERSONAL APPEARANCE BY ARBIE B. HINTON, M.D., CARTHAGE, MISSISSIPPI MEDICAL LICENSE NUMBER 11162

Before Dr. Hinton was asked to join the meeting, Dr. Crawford requested recommendations for handling physicians that are not complying with the continuing medical education (CME) requirement. After a brief discussion, motion

EXECUTIVE COMMITTEE MINUTES March 7, 2007 Page 5

was made by Dr. Gibson, seconded by Dr. Conerly, and carried unanimously that the physician be issued a public reprimand for falsification of information, provide documentation to the Board within 60 days that they have secured the necessary CME hours, or have their medical license suspended until such time as they do meet the CME requirements.

Gary D. Carr, M.D., Medical Director, Mississippi Professionals Health Program (MPHP) entered the meeting and advised that Dr. Hinton has been under contract with MPHP and if he has been attending the annual retreats that he earns nine (9) hours each year which would give him 18 of the 40 required hours.

Dr. Hinton joined the meeting but was not represented by legal counsel. He executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference.

Mr. Ingram introduced Dr. Hinton to the Executive Committee and advised the reason he had been requested to appear. Dr. Hinton addressed the Executive Committee and advised that the error was not deliberate and that he is currently in the process of obtaining the required CME hours.

After a brief discussion, Dr. Craig advised Dr. Hinton that the Executive Committee had established a policy for physicians failing to meeting the CME requirements. Dr. Craig advised Dr. Hinton that he will receive a public reprimand for falsification on his renewal application and that he will be given 60 days to provide the Board with documentation providing the required CME hours. If the documentation is not received within 60 days, his medical license will be suspended until such time as the required documents are received. Dr. Hinton will be sent a letter agreement memorializing the action.

PERSONAL APPEARANCE BY SAMUEL CROSBY, M.D., HATTIESBURG, MISSISSIPPI MEDICAL LICENSE NUMBER 10258

Before Dr. Crosby was asked to appear, Harry Gunter, MSBML Investigator, was asked to address the Executive Committee. Mr. Gunter addressed the Executive Committee and discussed prescribing issues that he had uncovered. Mr. Gunter advised that this is the second time Dr. Crosby has been involved in overprescribing, the first time in 2001 to his wife.

EXECUTIVE COMMITTEE MINUTES March 7, 2007 Page 6

Dr. Crosby joined the meeting but was not represented by legal counsel. He executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference. Dr. Crosby was joined by Allen Gersh, M.D., Medical Director of the Hattiesburg Clinic, where Dr. Crosby is employed.

Dr. Crosby addressed the Executive Committee and advised that he was shocked at the number of prescriptions filled for the family referenced by Mr. Gunter when he made his visit. Dr. Crosby advised that he has known the family for a long time and trusted their facts to be true. Dr. Crosby admitted that he had failed to document some records.

Dr. Gersh addressed the Executive Committee and advised that he has known Dr. Crosby a long time and knew he was a trustworthy physician. Dr. Gersh advised after this matter was brought to light, there have been several changes made at their clinic. Dr. Gersh advised that he is now receiving a copy of every prescription written by Dr. Crosby and that he will be monitoring him. Dr. Gersh said that he will advise the Board and will also terminate Dr. Crosby's employment with the Hattiesburg Clinic if there are any further problems.

Dr. Crawford requested that Dr. Crosby and Dr. Gersh wait in the reception area. After a brief discussion, motion was made by Dr. Conerly, seconded by Dr. Gibson, and carried unanimously to offer Dr. Crosby a non-reportable agreement that would, (i) restrict his prescribing of controlled substances to Schedules IV and V only; (ii) not permit him to treat any family members; and (iii) require him to attend a prescribing course; said restrictions to run for two (2) years. Dr. Crosby will be sent a letter agreement memorializing the action.

PERSONAL APPEARANCE BY REBECCA WATERER, M.D., AND JAMES M. TRAMONTANA, M.D., JACKSON, MISSISSIPPI MEDICAL LICENSE NUMBER 18627

Dr. Craig addressed the Executive Committee and advised that he had been made aware of the fact that Dr. Tramontana was being monitored at the Univeristy Medical Center (UMC) instead of MPHP. Dr. Craig said that the Board and MPHP had entered into a contract and established a relationship and now UMC is monitoring some physicians rather than referring them to MPHP.

EXECUTIVE COMMITTEE MINUTES March 7, 2007 Page 7

- Dr. Tramontana joined the meeting but was not represented by legal counsel. He executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference. Dr. Tramontana was joined by Dr. Rebecca Waterer, Assistant Professor, School of Medicine at the University.
- Dr. Waterer addressed the Executive Committee and advised that generally they do refer their physicians to MPHP. After a brief discussion, Dr. Waterer advised that in the future UMC will refer <u>all</u> residents/physicians with problems of impairment to MPHP.

After further discussion, motion was made by Dr. Gibson, seconded by Dr. Crawford, and carried unanimously that Dr. Tramontana be under a Recovery Contract with MPHP.

OTHER BUSINESS

- Dr. Craig advised that Joel Howell, III, attorney for Charles Knight, M.D., had requested time to appear before the Executive Committee.
- Dr. Knight joined the meeting and was represented by legal counsel, Joel Howell and Jeffrey Knight. He executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference.
- Dr. Craig briefly reviewed Dr. Knight's history and advised that Dr. Knight is still not complying with the recommendations of the Examining Committee. Dr. Knight has gone to individuals outside MPHP for treatment. Dr. Knight is trying to obtain a medical license in order to teach at the University Medical Center.
- Dr. Knight presented his case to the Committee, joined at times by Mr. Howell and Mr. Knight. Dr. Knight requested that the Committee and Board accept the treatment he has received from various physicians, without further evaluation or treatment through the MPHP, thereby issuing to him an unrestricted license.
- Dr. Carr addressed the Executive Committee and advised that he recommends that Dr. Knight comply with the request of the Examining Committee and their requested treatment program. Dr. Carr stated that Dr. Knight's diagnosis has never been as simple as chemical dependency.

EXECUTIVE COMMITTEE MINUTES March 7, 2007 Page 8

After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. Conerly, and carried unanimously that Dr. Knight complete treatment required by the Examining Committee before requesting licensure. The Executive Committee recommended Acumen or Menniger for his treatment, but will accept any treatment program approved by the MPHP. Mr. Ingram advised that he will inform Mr. Howell of the Executive Committee's decision.

ADJOURNMENT

There being no further business, the meeting adjourned at 5:07 p.m.

Dewitt G. Crawford, M.D.

President

Minutes taken and transcribed by Sherry Harris Administrative Assistant March 7, 2007

- I, <u>Robert B. Lee, M.D.</u>, have requested an opportunity to appear informally before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal, no disciplinary action will be taken without my express written consent. In so doing, I have been advised and understand the following:
 - 1. During the meeting, the Executive Committee may or may not be represented by legal counsel. Notwithstanding, I understand that I have a right, if I so choose, to employ legal counsel and have counsel present during the informal meeting.
 - I authorize the Committee Members to review and examine any statements, documentary evidence, or materials concerning the allegations during my informal appearance.
 - 3. Because the purpose of my appearance is to avoid a hearing before the Board, I agree that presentation to and consideration by the Committee of any facts, matters, and documents pertaining to my case shall not unfairly or illegally prejudice the Committee members from further participation or consideration in the event a formal disciplinary hearing is later conducted. Stated differently, in the event the pending matter is not resolved following my appearance before the Committee, I will not object to any of the Committee members from further participating in subsequent meetings or hearings that may be conducted in relation to this matter.
 - 4. By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:

understandings as noted above. I have elected to proceed:
with legal counsel present (name of counsel:)
without legal counsel present
EXECUTED, this the day of
Man Blue an
Witness Herry Jany

- I, <u>Arbie Hinton, M.D.</u>, have requested an opportunity to appear informally before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal, no disciplinary action will be taken without my express written consent. In so doing, I have been advised and understand the following:
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 - 4. By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:

with legal counsel present (name of counsel:

without legal counsel present
EXECUTED, this the 2 day of Maych ,2007.
Mbe B. Hinter MD
Witness Herry Laris

- I, <u>Samuel Crosby, M.D.</u>, have requested an opportunity to appear informally before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal, no disciplinary action will be taken without my express written consent. In so doing, I have been advised and understand the following:
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 - 4. By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:
 with legal counsel present (name of counsel: _______)

EXECUTED, this the 1th day of mach, 2007

without legal counsel present

Witness: Merry Harris

I, <u>James Tramontana, M.D.</u>, have requested an opportunity to appear informally before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal, no disciplinary action will be taken without my express written consent. In so doing, I have been advised and understand the following:

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- 2. I authorize the Committee Members to review and examine any statements, documentary evidence, or materials concerning the allegations during my informal appearance.
- 3. Because the purpose of my appearance is to avoid a hearing before the Board, I agree that presentation to and consideration by the Committee of any facts, matters, and documents pertaining to my case shall not unfairly or illegally prejudice the Committee members from further participation or consideration in the event a formal disciplinary hearing is later conducted. Stated differently, in the event the pending matter is not resolved following my appearance before the Committee, I will not object to any of the Committee members from further participating in subsequent meetings or hearings that may be conducted in relation to this matter.
- 4. By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:

without legal counsel present
EXECUTED, this the 7th day of march, 2007.
Vitnes Sherry Larin

with legal councel present (name of counsel.

- I, <u>Charles S. Knight, M.D.</u>, have requested an opportunity to appear informally before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal, no disciplinary action will be taken without my express written consent. In so doing, I have been advised and understand the following:
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4.	By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:
	with legal counsel present (name of counsel: Toc Havel Tethrey for the
	without legal counsel present
EXEC	SUTED, this the day of
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BOARD MINUTES MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE MARCH 8, 2007

The regularly scheduled meeting of the Mississippi State Board of Medical Licensure was held on Thursday, March 8, 2007, in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

The following members were present:

Dewitt G. Crawford, M.D., Louisville, President
Philip T. Merideth, M.D., J.D., Jackson, Vice President
Don A. Gibson, M.D., Richland, Secretary
Larry B. Aycock, M.D., McComb
Virginia M. Crawford, M.D., Hattiesburg
A. Wallace Conerly, M.D., Jackson
S. Randall Easterling, M.D., Vicksburg
William S. Mayo, D.O., Oxford

Also present:

H. Vann Craig, M.D., Director Stan T. Ingram, Complaint Counsel for the Board Ellen O'Neal, Special Assistant Attorney General Rhonda Freeman, Division Director, Licensure Division Thomas Washington, Division Director, Investigative Division Frances Scott, Special Projects Officer, Investigative Division Sherry Harris, Administrative Assistant Wesley Breland, Hattiesburg, Consumer Health Committee Cecil R. Burnham, Jackson, Consumer Health Committee

Not present:

William B. Harper, D.O., Greenwood Martha Thompson, Oxford, Consumer Health Committee

The meeting was called to order at 9:08 a.m. by Dr. Crawford, President. The invocation was given by Dr. Easterling. Dr. Crawford welcomed Harvey Rayborn, Court Reporter. Dr. Crawford extended a welcome to all visitors present at the meeting.

Dr. Craig recognized and presented Regina Lyle with a certificate and pin for completing twenty-five years of service with the State.

APPROVAL OF CERTIFICATION OF MISSISSIPPI LICENSES TO OTHER ENTITIES FOR THE PERIOD JANUARY 1, 2007, THROUGH FEBRUARY 28, 2007

One hundred seventy-one (171) licenses were certified to other states for the period January 1, 2007, through February 28, 2007. Motion was made by Dr. Mayo, seconded by Dr. Gibson, and carried unanimously to approve these certifications.

APPROVAL OF LICENSES ISSUED FOR THE PERIOD JANUARY 1, 2007, THROUGH FEBRUARY 28, 2007

Sixty-six (66) licenses were issued for the period January 1, 2007, through February 28, 2007. Motion was made by Dr. Conerly, seconded by Dr. Mayo, and carried unanimously to approve these licenses.

REVIEW OF MINUTES OF THE EXECUTIVE COMMITTEE MEETING DATED JANUARY 17, 2007, AND MINUTES OF THE BOARD MEETING DATED JANUARY 18, 2007

Minutes of the Executive Committee Meeting dated January 17, 2007, and Minutes of the Board Meeting dated January 18, 2007, were reviewed. Dr. Mayo moved for approval of the minutes as submitted. Dr. Aycock seconded the motion, and it carried unanimously.

REPORT OF MARCH 7, 2007, EXECUTIVE COMMITTEE MEETING

Dr. Craig briefly reported on Wednesday's Executive Committee meeting. Dr. Craig presented a draft of a revised mission statement that the Executive Committee had referred to the Full Board for approval. Motion was made by Dr. Mayo, seconded by Dr. Gibson, and carried unanimously to approve the mission statement. The Board's mission statement is attached hereto and incorporated by reference.

Dr. Craig provided the Board with an update on silicosis. Dr. Craig advised that a letter had been received from the Committee on Energy and Commerce requesting information concerning the Board's ongoing investigation. Dr. Craig advised the Dr. Craig advised that the matter was under investigation. Stan Ingram, Complaint Counsel for the Board, advised that his office is working on the necessary paperwork.

Dr. Craig presented other informational items, which are reflected in the Executive Committee Minutes. Motion was made by Dr. Aycock, seconded by Dr. Mayo, and carried unanimously to approve the actions of the Executive Committee.

REPORTS FROM COMMITTEES

Consumer Health - Mr. Breland (Chair), Ms. Thompson, Mr. Burnham

Mr. Breland advised there was no new information to report.

Education & Workforce - Dr. Conerly (Chair), Dr. Aycock, Dr. Mayo

Dr. Conerly advised there was no new information to report.

Scope of Practice - Dr. Merideth (Chair), Dr. Easterling, Dr. Aycock

Dr. Merideth advised he is working on a meeting between the Board and the Board of Nursing to discuss laser regulations.

Professional Health Program - Dr. Gibson (Chair), Dr. Mayo, Dr. Merideth

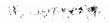
Dr. Gibson advised there was no new information to report.

Rules, Regulation & Legislative - Dr. Easterling (Chair), Dr. D. Crawford, Dr. Harper

Dr. Easterling provided an update on House Bills: 992, 1120, 1183 and 1325, all of which died in Committee. Senate Bill 2988 concerning the Board's request for criminal history background checks on applicants has passed the House and has been returned to the Senate. Dr. Easterling noted that radiologist assistants were removed from the request during the process.

Ethics - Dr. Merideth (Chair), Dr. V. Crawford, Dr. Conerly

Dr. Merideth advised that the Ethics Committee met earlier today to discuss the issue of sale of goods in a physician's office. The Committee reviewed information from AMA, FSMB, and North Carolina's policies. After discussing, the Committee voted unanimously to recommend that the Full Board adopt a similar policy and to refer the issue to Dr. Craig for assignment to a staff member to draft



a policy for the Board to consider at the May meeting. Motion was made by Dr. Gibson to approve the Ethics Committee's request. Dr. Easterling seconded the motion, and it carried unanimously.

Dr. Merideth also discussed the utilization review statement that is on the renewal applications and whether or not it needs to be deleted. There was also some discussion about adding a similar statement for expert witness. After a brief discussion and several options, motion was made by Dr. Easterling to have a box to check acknowledging the physician's awareness of the Board's expert witness regulation. Dr. Mayo seconded the motion, and it carried unanimously. Motion was made by Dr. Aycock to have the statements relative to utilization review deleted from the renewal form. Dr. Mayo seconded the motion, and it carried unanimously. Motion was made by Dr. Merideth, seconded by Dr. Mayo, and carried unanimously to have the Executive Director work out the wording on the renewal form with the staff.

NEW COMMITTEE

Dr. Crawford announced the appointment of a new committee that will be titled Electronic Medical Records. If anyone is interested in serving on the committee, please contact him.

HEARING IN THE CASE OF THOMAS ALFRED VAUGHAN, M.D., JACKSON, MISSISSIPPI MEDICAL LICENSE NUMBER 07887

Dr. Vaughan was not present or represented by legal counsel. Mr. Ingram verified that Dr. Vaughan was not present and requested permission to proceed with the hearing. Dr. Crawford authorized Mr. Ingram to proceed at 10: 15 am. It was noted that the summons and affidavit cited Dr. Vaughan to be present at 9:00 a.m. Mr. Ingram provided the Board a brief summary of the events leading up to the hearing and then entered into record a number of exhibits.

Gary D. Carr, M.D., Medical Director, Mississippi Professionals Health Program (MPHP) was sworn in as a witness and answered questions from Mr. Ingram. Dr. Carr addressed the Board and advised that Dr. Vaughan had been under a Recovery Contract Agreement (RCA). Dr. Carr advised that on January 18, 2007, MPHP withdrew advocacy because Dr. Vaughan was not attending MPHC meetings and failed to attend scheduled psychotherapy all as required by the RCA.

Dr. Carr stated that Dr. Vaughan advised him that he felt he had been misdiagnosed. Dr. Carr concluded that Dr. Vaughan was not able to practice with reasonable skill and safety to patients by reason of mental illness. Dr. Carr answered several other questions from the Board before being excused.

Motion was made by Dr. Merideth, seconded by Dr. Mayo, and carried unanimously that the Board consider going into Executive Session to consider entry of an order which may be appealable. With motion by Dr. Merideth, seconded by Dr. Gibson, the Board went into Executive Session.

Upon motion by Dr. D. Crawford, seconded by Dr. Merideth, and carried unanimously, the Board came out of Executive Session at which time Dr. Crawford requested that Dr. Gibson present the decision. Dr. Gibson advised that upon motion made by Dr. Aycock, seconded by Dr. Mayo, and carried unanimously, the Board had agreed to revoke Dr. Vaughan's medical license. The Board's order is attached hereto and incorporated by reference.

A verbatim account of this proceeding was recorded by Harvey Rayborn, Court Reporter.

FINAL ADOPTION OF REGULATIONS ADDRESSING THE REQUIREMENTS FOR MEDICAL DOCTORS OR OSTEOPATHIC PHYSICIANS; MEDICAL DOCTORS OR OSTEOPATHIC PHYSICIANS BY RECIPROCITY OR ENDORSEMENT; PODIATRISTS; PODIATRISTS BY RECIPROCITY OR ENDORSEMENT; PHYSICIAN ASSISTANTS; AND LIMITED INSTITUTIONAL LICENSURE TO APPEAR FOR A PERSONAL INTERVIEW AND TAKE AND PASS THE JURISPRUDENCE EXAMINATION

Motion was made by Dr. Gibson, seconded by Dr. Mayo, and carried unanimously to adopt in final form the Board's regulations addressing the requirements for medical doctors or osteopathic physicians; medical doctors or osteopathic physicians by reciprocity or endorsement; podiatrists; podiatrists by reciprocity or endorsement; physician assistants; and limited institutional licensure to appear for a personal interview and take and pass the jurisprudence examination.

A copy of the six (6) regulations is attached hereto and incorporated by reference. The regulations will be filed with the Secretary of State under the Administrative Procedures Act as a final adoption.

PROPOSED AMENDMENT OF REGULATION CONCERNING USE OF LASER DEVICES

Dr. Craig addressed the Board and proposed adding four words to the laser regulation that was final adopted at the January 18, 2007, meeting. Dr. Craig advised after talking with several dermatologists he was recommending the Board add pulsed light or similar to the current laser regulation. After a brief discussion as to whether or not the regulation needs to be jointly promulgated with the Board of Nursing, the final decision was it is not necessary to jointly promulgate the regulation.

Motion was made by Dr. Aycock, seconded by Dr. Mayo, and carried of the Board's intent to adopt the proposed amendment of the Board's **Regulations**Concerning Use of Laser Devices. A copy of the proposed amendment is attached hereto and incorporated by reference. The proposed amended regulation will be filed with the Secretary of State under the Administrative Procedures Act.

PROPOSED AMENDMENTS TO LICENSURE REGULATIONS

Dr. Craig advised the Board that the staff is updating the Rules and Regulation Manual and the following are editorial changes that need to be made. The following is a list of the licensure regulations with proposed changes:

I. LICENSURE REGULATIONS GOVERNING THE PRACTICE OF MEDICAL DOCTORS, OSTEOPATHIC PHYSICIANS AND PODIATRISTS

There was a brief discussion about deleting C3 of this regulation due to the Board not using. Motion was made by Dr. D. Crawford, second by Dr. Mayo, and carried unanimously to accept the other editorial changes in this regulation and hold C3 until the next meeting.

- II. LICENSURE BY EXAMINATION M.D. AND/OR D.O.
- III. LICENSURE BY RECIPROCITY OR ENDORSEMENT M.D. AND/OR D.O.
- IV. LICENSURE EXAMINATION
- V. LIMITED INSTITUTIONAL LICENSURE
- VI. LICENSURE BY EXAMINATION PODIATRIC MEDICINE
- VII. LICENSURE BY RECIPROCITY OR ENDORSEMENT PODIATRIC MEDICINE
- IX. SUBVERSION OF LICENSING EXAMINATION PROCESS
 (Proposal to delete entire regulation due to not being used)

X. TEMPORARY LICENSE

XI. DUTY TO NOTIFY BOARD OF CHANGE OF ADDRESS

XII. RELEASE OF MEDICAL RECORDS

XVII. RULES OF PROCEDURE

Motion was made by Dr. Merideth, seconded by Dr. Mayo, and carried unanimously to add a definition under B for Executive Director. The agreed wording: "Executive Director" means the chief executive officer or other designee employed by the Board to run the day to day operations of the Board.

XXI. CME REQUIREMENTS FOR STATE OF MISSISSIPPI PHYSICIANS, OSTEOPATHIC PHYSICIANS AND PODIATRISTS

XXII. REGULATIONS GOVERNING THE PRACTICE OF PHYSICIAN ASSISTANTS

After a brief discussion concerning **D. REQUIREMENT OF PROTOCOL** - **PRESCRIBING/DISPENSING** d(1) the Board unanimously agreed to delete the following: "within Mississippi or who proposes to engage in the prescribing of any controlled substance within Mississippi."

Motion was made by Dr. D. Crawford, seconded by Dr. Mayo, and carried unanimously of the Board's intent to adopt the proposed amended changes to the licensure regulations. A copy of the proposed amended fourteen (14) regulations is attached hereto and incorporated by reference. The proposed amended regulations will be filed with the Secretary of State under the Administrative Procedures Act.

THE BOARD RECESSED AT 10:55 A.M. AND RECONVENED AT 11:15 A.M.

PRESENTATION BY JIM HOOD, ATTORNEY GENERAL, STATE OF MISSSISSIPPI

Dr. Crawford introduced and welcomed General Hood to the Board meeting.

General Hood addressed the Board and advised that he was here requesting direction and assistance from the Board in deciding how to best utilize a \$250,000 settlement that had been received from Purdue Pharma. After a brief discussion concerning distribution of information to physicians and possibly educational training for physicians on the drug, Oxycontin, General Hood requested that the Board discuss and advise him their decision in the next couple weeks.

General Hood also expressed concerns about the growing potential of insurance companies interfering with the practice of medicine through the process of utilization review and other methods. General Hood offered his assistance to the Board in dealing with the insurance companies.

Dr. Crawford thanked General Hood for coming to the meeting and advised that Dr. Craig will be in contact with him in the next couple weeks.

OTHER BUSINESS

Dr. Crawford distributed a proposed policy dealing with individuals falsifying their CME requirements on renewal applications. After a brief discussion, motion was made by Dr. Aycock, seconded by Dr. Easterling, and carried unanimously to remove the word "public" and not make the action public record, to change 60 days to 90 days for the physician to provide documentation of compliance, and to allow the Board to assess investigative fees. Also, if the physician fails to provide the necessary information within the 90 day time period, their medical license will be suspended until such time as the delinquent CME hours are obtained. A copy of the policy is attached hereto and incorporated by reference.

PERSONAL APPEARANCE BY THOMAS ALFRED VAUGHAN, M.D.

At 11:45 A.M., Mr. Ingram addressed the Board and advised that Dr. Thomas Vaughan had just arrived. Mr. Ingram advised that Dr. Vaughan was 2 hours and 45 minutes late, that the court reporter had already been dismissed, resulting in any further testimony being outside the record. Mr. Ingram advised the Board that they were under no obligation to see Dr. Vaughan.

After a brief discussion, the Board agreed to allow Dr. Vaughan to address them outside of the hearing record, but spread into the usual minutes of the Board. Mr. Ingram advised Dr. Vaughan of the Board's earlier decision to revoke his medical license before he entered the Executive Conference Room. Dr. Vaughan entered the Executive Conference Room, wherein Mr. Ingram introduced him and advised him of his right to appeal. Dr. Vaughan addressed the Board members advising that he felt like his situation is purely political and there is nothing wrong with him. He advised that this situation has drained him financially and he sees no need to be in a Recovery Contract with MPHP.

Dr. Crawford thanked Dr. Vaughan and advised him that the Minutes would reflect that he had made a statement to the Board.

Thomas Washington, Division Director, Investigative Division, introduced Shay Bradley who has recently joined the Board as an investigator.

ADJOURNMENT

The meeting adjourned at 12:10 P.M. with the next meeting scheduled for Thursday, May 17, 2007. Dr. Crawford also advised that due to a conflict, Dr. Mayo had requested that the July meeting be held on July 12th instead of the 19th.

Dewitt G. Crawford, M.D.

President

Minutes taken and transcribed by Sherry Harris Administrative Assistant March 8, 2007 The mission of the Mississippi State Board of Medical Licensure is to ensure the protection of the health, safety and welfare of Mississippians through implementation and enforcement of laws involving the licensing and regulation of physicians, podiatrists, physician assistants and radiology assistants and through the objective enforcement of the Mississippi Medical Practice Act.

EXECUTIVE SESSION MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE MARCH 08, 2007

AGENDA ITEM: IX. Hearing in the case of Thomas Alfred Vaughan, M.D.

Motion made by Dr. Aycock, seconded by Dr. Mayo, and carried unanimously that Dr. Vaughan's license be revoked.

VOTE:	<u>FOR</u>	<u>AGAINST</u>	<u>ABSTAIN</u>	ABSENT
Larry B. Aycock, M.D.	X			
A. Wallace Conerly, M.D.	X			
Dewitt G. Crawford, M.D.	Χ			
Virginia M. Crawford, M.D.	Χ			
S. Randall Easterling, M.D.	Χ			
Don A. Gibson, M.D.	X			
William B. Harper, D.O.				X
William S. Mayo, D.O.	Χ			
Philip T. Merideth, M.D., J.D.	X			

With a motion by Dr. D. Crawford, seconded by Dr. Merideth, the Board came out of Executive Session.

ewitt G. Crawford, M.D.

President

IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

THOMAS ALFRED VAUGHAN, M.D.

DETERMINATION AND ORDER

THIS MATTER came on regularly for hearing on March 8, 2007, before the Mississippi State Board of Medical Licensure, pursuant to Title 73, Chapter 25 of Miss. Code (1972) Annotated. The Board initiated these proceedings on February 5, 2007, by issuance of a Summons against Thomas Alfred Vaughan, M.D. (hereinafter "Licensee"), with an attached Affidavit from Thomas E. Washington, the Investigative Division Bureau Director. The Summons and Affidavit were personally served upon Licensee on February 5, 2007. No answer was filed by Licensee and no continuance was requested.

The hearing was convened at 11:00 a.m. Notwithstanding personal process and receipt of the Board's Rules of Procedure, Licensee failed to appear nor was he represented by counsel. Complaint Counsel for the Board was Honorable Stan T. Ingram. Sitting as legal advisor for the Board was Ellen O'Neal, Special Assistant Attorney General. Evidence and testimony was then presented. Based upon the above, the Board renders the following Findings of Fact, Conclusions of Law, and Order.

FINDINGS OF FACT

I.

On September 18, 2003, the Board issued a Determination and Order indefinitely prohibiting Licensee from practicing medicine in the State of Mississippi until such time as he submits to treatment for mental illness and found by Board order to be able to practice

medicine with reasonable skill and safety to the public. Thereafter, Licensee sought further evaluation and treatment. During February 2005, Licensee requested advocacy and support for return of his Mississippi medical license from the Mississippi Professionals Health Program (MPHP), the State supported program established to monitor and advocate for impaired physicians. With such support, Licensee appeared before this Board on July 28, 2005, and received a full and unrestricted license, provided that he comply with all monitoring requirements imposed by the MPHP.

II.

That prior to licensure reinstatement as noted above, Licensee entered into a "Recovery Contract Agreement" (RCA) on February 14, 2005, with the MPHP. At Paragraph five (5) of the RCA, Licensee agreed to the following, to-wit:

"I agree to see Mark Webb, M.D., psychiatrist, located at 576 Highland Colony Parkway, #100, Ridgeland, MS, 39157, for the purpose of ongoing evaluation. Should Dr. Webb determine medications are indicated, I agree to take these as directed. Should I disagree with the psychiatrist MPHC will arrange another opinion. MPHC will receive regular quarterly progress reports from Dr. Webb. I agree to see a psychologist/therapist, if asked to do so by MPHC, and therapy will conclude upon mutual agreement of my therapist and MPHC."

. III.

That beginning in August 2006, Licensee began missing his required therapy appointments with Dr. Webb; and on November 27, 2006, Dr. Webb issued a progress report to the MPHP stating that due to Licensee's failure to meet scheduled therapy sessions, he could no longer provide assure to the MPHP of Licensee's fitness to practice medicine.

That on or about January 18, 2007, the Mississippi State Board of Medical Licensure (MSBML) received a letter from the MPHP, Medical Director, Gary D. Carr, M.D. Dr. Carr's letter reported, "Dr. Vaughan had not been compliant with his contractual requirement to see Dr. Webb on an ongoing basis." Dr. Carr further indicated that Licensee had lost the advocacy of the MPHP and referred Licensee to the Board for further review and action. During the hearing, Dr. Carr opined that Licensee was no longer able to practice medicine with reasonable skill and safety to patients, at least until such time as he submitted to further evaluation and treatment.

CONCLUSIONS OF LAW

Based upon the Findings of Fact as enumerated above, Licensee is suffering from mental illness to an extent which affects professional competency; is guilty of violation of a Board order or agreement with the Board; and is guilty of unprofessional conduct, which includes, but is not limited to, any dishonorable or unethical conduct likely to deceive, defraud and harm the public; all in violation of Subsections (8)(d) and (13) of Section 73-25-29 and Subsections (a) and (b) of Section 73-25-83, Miss. Code (1972) Annotated, as amended.

ORDER

IT IS HEREBY ORDERED, that based upon the Findings of Fact and Conclusions of Law enumerated above, and in accordance with the Board's duty to protect the public, that Mississippi Medical License No. 07887, duly issued to Thomas Alfred Vaughan, M.D., should be, and is hereby, revoked.

IT IS FURTHER ORDERED, that pursuant to Section 73-25-27, a copy of this Determination and Order shall be sent by registered mail, or personally served upon Thomas Alfred Vaughan, M.D.

SO ORDERED, this the 8th day of March 2007.

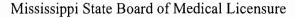
MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

Dewitt G. Crawford, M.D.

President

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI





Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B	Specific Legal Authority Authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule_Section 73-43-11		
)		
Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended Licensure by Examination M.D. and/or D.O.		
(601) 987-3079	amended of suspended		
rhonda@msbml.state.ms.us			
Date Rule Proposed:			
Explanation of the Purpose of the Proposed Rule and	the reason(s) for proposing the rule:		
This regulation addresses the requirements for medical doctors of licensing examination. The regulation change adds a requireme examination as administered by the Board.	or osteopathic physicians to meet in order to be licensed based on their nt that the physician must take and pass the jurisprudence		
	ng any written comments received during the comment period public inspection by contacting the Agency at the above address.		
Date:			
Time: Place:			
An oral proceeding was not held on this rule			
The Agency has considered the written comments and	the presentations made in any oral proceedings, and		
This rule as adopted is without variance from	the proposed rule.		
This rule as adopted differs from the proposed rather than the substance of the rule.	d rule as there are minor editorial changes which affect the form		
the Notice of Proposed Rule Adoption and the co	Proposed Rule Adoption, the logical outgrowth of the contents of		

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

April 8, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman **Division Director**

SOS FORM APA 002 Effective Date 07/29/2005 TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This regulation requires licensee to take and pass the Board's jurisprudence examination.

II. LICENSURE BY EXAMINATION - M.D. AND/OR D.O.

- A. To qualify for admission by examination, an individual shall meet the following requirements, provided that the Board may admit any individual to the examination while reserving its right to deny licensure if that individual fails to meet all requirements for licensure subsequent to success or completion of the examination:
 - 1. Applicant must satisfy the Board that he is at least twenty-one (21) years of age and of good moral character.
 - 2. Present a diploma from a reputable medical college or college of osteopathic medicine, subject to the following conditions:
 - a. If the degree is from a medical college or a college of osteopathic medicine in the United States or Puerto Rico, the medical college must be accredited by the Liaison Committee on Medical Education (LCME), a Joint Committee of the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA), or if a college of osteopathic medicine, must be accredited by the Professional Education Committee of the American Osteopathic Association (AOA).
 - b. If the degree is from a Canadian medical school, the school must be accredited by the Liaison Committee on Medical Education (LCME) and by the Committee on Accreditation for Canadian Medical Schools, as sponsored by the Canadian Medical Association and Association of Canadian Medical Colleges.
 - c. If the degree is from a foreign medical school, applicant must either (i) possess a valid certificate from the ECFMG or (ii) document successful completion of a Fifth Pathway program, as described in Article II, B below.
 - d. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - 3. Applicants for licensure by examination must present documentation of having completed at least one (1) year of postgraduate training in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or by the AOA; or training in Canada accredited by the Royal College of Physicians and Surgeons.

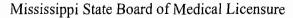
- 4. Present certified copy of birth certificate.
- 5. Subject to the provisions of Article IV below, an applicant must successfully complete and pass all parts/steps of the FLEX or USMLE.
- 6. Must submit an application for medical license on a form supplied by the Board, completed in every detail with a recent photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot picture will not be accepted.
- 7. Submit fee prescribed by the Board; however, any fees related to permanent licensure may be deferred for applicants indicating a desire to practice medicine under a Temporary License or Limited License within the confines of an ACGME or AOA approved postgraduate training program pursuant to Section X.A.1 or Section V of these regulations.
- 8. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- B. A Fifth Pathway Program, as a prerequisite for licensure by examination pursuant to Article II, A2d above, will be considered on an individual basis. Students who have completed the academic curriculum in a foreign medical school and who have fulfilled the conditions hereinafter set forth, may be offered the opportunity to substitute for an internship required by the foreign medical school, an academic year of supervised clinical training prior to entrance into the first year of ACGME- or AOA-approved postgraduate medical education. The supervised clinical training (Fifth Pathway) must be under the direction of a medical school accredited by the LCME. Fifth Pathway will be available to students who have fulfilled the following conditions:
 - 1. Completed, in an accredited American college or university, undergraduate pre-medical work of the quality acceptable for matriculation in an accredited U.S. medical school,
 - Studied medicine at a medical school located outside the United States, Puerto Rico and Canada but which is recognized by the World Health Organization, and
 - 3. Completed all of the formal requirements of the foreign medical school except internship and/or social service.

C. Prior to issuance of a permanent Mississippi medical license, a graduate of a foreign medical school who has successfully completed all other requirements of application for licensure by examination must present documentation of having completed at least three (3) years of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of Physicians and Surgeons.

Amended March 8, 2007.

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI





Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

(601) 987-3079 rhonda@msbml.state.ms.us

Specific Legal Authority Authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule_Section 73-43-11		
Proposed Rule	Rules repealed, amended or suspended by the :{Insert citation to specific rule(s) repealed, pended III. Licensure by Reciprocity or Endorsement M.D.	

Date R	tule Proposed:
Explar	nation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule:
licensu	gulation addresses the requirements for medical doctors or osteopathic physicians to meet in order to be licensed based on their re with another state. The regulation change adds a requirement that the physician must take and pass the jurisprudence ation as administered by the Board.
	gency Rule Making Record for this rule including any written comments received during the comment period e record of any oral proceeding is available for public inspection by contacting the Agency at the above address.
	An oral proceeding was held on this rule:
	Date: Time: Place:
	An oral proceeding was not held on this rule.
The Ag	gency has considered the written comments and the presentations made in any oral proceedings, and
	This rule as adopted is without variance from the proposed rule.
	This rule as adopted differs from the proposed rule as there are minor editorial changes which affect the form rather than the substance of the rule.
	The rule as adopted differs from the proposed rule. The differences however are: Within the scope of the matters in the Notice of Proposed Rule Adoption, the logical outgrowth of the contents of the Notice of Proposed Rule Adoption and the comments submitted in response thereto, and The Notice of Proposed Rule Adoption provided fair warning that the outcome of the proposed rule adoption could be the rule in question.

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

April 8, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman **Division Director**

SOS FORM APA 002 Effective Date 07/29/2005 TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: March 9, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This regulation requires licensee to take and pass the Board's jurisprudence examination.

III. LICENSURE BY RECIPROCITY OR ENDORSEMENT - M.D. AND/OR D.O.

- A. The Board may grant a license to practice medicine without further examination to a graduate in medicine or osteopathic medicine who holds a valid, active license to practice medicine in another state, provided the requirements in said state are equal to those required by this Board.
- B. The Board endorses, for the purpose of reciprocity, licenses to practice medicine obtained in most states by written examination prior to March 8, 1973. Subject to the provisions of Article IV below, all applicants for medical licensure by reciprocity who took the FLEX between March 8, 1973, and January 24, 1985, must have passed the FLEX taken in one three-day sitting with a weighted average of 75 or higher in order to obtain licensure in Mississippi. The Board will not accept scores of more than one administration of the FLEX which have been combined (factored) to provide a FLEX weighted average of 75 or higher. From and after January 24, 1985, an applicant for medical licensure by reciprocity must have passed both Components I and II of the FLEX with a score of 75 to be considered the passing grade for each component. From and after June, 1994, the Board shall endorse, for the purpose of reciprocity, licenses to practice medicine from applicants who have successfully taken Steps 1, 2 and 3 of the USMLE.
- C. Those doctors of osteopathic medicine who graduated prior to June 1, 1973, and who make application for licensure by reciprocity with another state will be considered only if they took and passed the same written licensure examination given in that state at that time to graduates of medical schools. A statement to this effect will be obtained by this Board from that licensing board.
- D. The Board may affiliate with and recognize for the purpose of waiving examination and may grant licenses to Diplomats of the NBME; on or after February 13, 1973, to Diplomats of the NBOME and licentiates of the Medical Council of Canada. If a Diplomat of the NBME or NBOME, the applicant must obtain Certification of Endorsement from that Board and submit same with application. If seeking endorsement with the Medical Council of Canada, the applicant must obtain a Certificate of Standing and submit it with the application.
- E. The applicant must have the application certified by the state board where the original license was obtained by examination.
- F. The Board may grant a license by reciprocity to a graduate of a foreign medical school who was licensed in another state by written examination prior to March 8, 1973, if he is certified by an American Board of Medical Specialties. The applicant must present the certificate from the specialty board stating he is currently certified and comply with all other licensure requirements for foreign medical graduates.
- G. In addition to the above requirements for licensure by reciprocity and/or

endorsement, an individual shall meet the following requirements:

- 1. Applicant must be twenty-one (21) years of age, of good moral character.
- 2. Present a diploma from a reputable medical college or college of osteopathic medicine, subject to the following conditions:
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. If the degree is from a medical college or a college of osteopathic medicine in the United States or Puerto Rico, the medical college must be accredited by the Liaison Committee on Medical Education (LCME), a Joint Committee of the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA) or the College of Osteopathic Medicine must be accredited by the American Osteopathic Association (AOA).
 - c. If the degree is from a Canadian medical school, the school must be accredited by the Liaison Committee on Medical Education (LCME) and by the Committee on Accreditation for Canadian Medical Schools, as sponsored by the Canadian Medical Association and Association of Canadian Medical Colleges.
 - d. If the degree is from a foreign medical school, applicant must either (i) possess a valid certificate from the ECFMG or (ii) document successful completion of a Fifth Pathway program, as described in Article II, B above, and be currently Board Certified by a Specialty Board recognized by the American Board of Medical Specialties or the American Osteopathic Association.
- 3. If a graduate from a medical college or college of osteopathic medicine in the United States, Canada or Puerto Rico, applicant must present documentation of having completed at least one (1) year of postgraduate training in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or by the AOA; or training in Canada accredited by the Royal College of Physicians and Surgeons.
- 4. If a graduate from a foreign medical school, applicant must present documentation of having completed either (i) three (3) or more years of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of Physicians and Surgeons or (ii) at least one year of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of

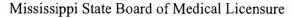
Physicians and Surgeons, be currently Board certified by a Specialty Board recognized by the American Board of Medical Specialties or the American Osteopathic Association and will be based upon approval by the Mississippi State Board of Medical Licensure.

- 5. An applicant who otherwise possesses all of the qualifications for licensure by reciprocity/ endorsement, but has not taken a medical proficiency examination or licensure examination within ten (10) years prior to filing his or her application, must pass the Special Purpose Examination (SPEX) as administered by and under auspices of the Board, unless the applicant:
 - a. Submits satisfactory proof of current certification by an American Board of Medical Specialties or American Osteopathic Association approved specialty board; or
 - b. Submits proof that the applicant's sole purpose for seeking licensure is to serve as the Dean, Chairman of the Department or Faculty of the University of Mississippi School of Medicine. In such case, a license shall remain in effect so long as Licensee is a member of the faculty of the University School of Medicine.
- 6. Present certified copy of birth certificate.
- 7. Must submit an application for medical license on a form supplied by the Board, completed in every detail with a recent photograph (walletsize/passport type) attached. A Polaroid or informal snapshot picture will not be accepted.
- 8. Submit fee prescribed by the Board.
- 9. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- H. Graduates of foreign medical schools seeking licensure by reciprocity or endorsement via Fifth Pathway Programs will be considered on an individual basis subject to those requirements set forth in Section II, B above.

Amended March 8, 2007.

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI





Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B	Specific Legal Authority Authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule Section 73-43-11		
Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the		
(601) 987-3079	Proposed Rule : {Insert citation to specific rule(s) repealed, amended or suspended VI. Licensure by Examination - Podiatric Medicine		
rhonda@msbml.state.ms.us	}		
Date Rule Proposed:			
Explanation of the Purpose of the Proposed Rule and	the reason(s) for proposing the rule:		
	neet in order to be licensed based on their licensing examination. The take and pass the jurisprudence examination as administered by the Board.		
	}		
	ng any written comments received during the comment period public inspection by contacting the Agency at the above address.		
An oral proceeding was held on this rule:			
Date:			
Time: Place:			
An oral proceeding was not held on this rule	•		
The Agency has considered the written comments and	I the presentations made in any oral proceedings, and		
This rule as adopted is without variance from	the proposed rule.		
This rule as adopted differs from the propose rather than the substance of the rule.	d rule as there are minor editorial changes which affect the form		
the Notice of Proposed Rule Adoption and the c	Proposed Rule Adoption, the logical outgrowth of the contents of		

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

April 8, 2007

Signature and Title of Person Submitting Rule-for Filing

Rhonda Freeman Division Director

SOS FORM APA 002 Effective Date 07/29/2005

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: March 9, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This regulation requires licensee to take and pass the Board's jurisprudence examination.

VI. LICENSURE BY EXAMINATION - PODIATRIC MEDICINE

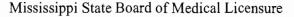
- A. To qualify for admission by examination, an individual shall meet the following requirements, provided that the Board may admit any individual to the examination while reserving its right to deny licensure if that individual fails to meet all requirements for licensure subsequent to success or completion of the examination:
 - 1. Applicant must satisfy the Board that he is at least twenty-one (21) years of age and of good moral character.
 - 2. Applicant must have had at least four (4) years of high school and be graduate of same; he shall have at least one (1) year pre-podiatry college education.
 - 3. Present a diploma from a college of podiatric medicine recognized by the Board as being in good standing, subject to the following conditions:
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. No college of podiatry or chiropody shall be accredited by the Board as a college of good standing which does not require for graduation a course of study of at least four (4) years (eight and one-half [8½] months each) and be recognized by the Council on Education of the American Podiatry Association.
 - 4. Present certified copy of birth certificate.
 - 5. Must successfully take an examination for podiatrists which shall be held concurrently with the regular examinations of the Board given in June and December. The applicant shall be examined in the following subjects: anatomy, histology, physiology, chemistry, pharmacy, materia medica, therapeutics, bacteriology, pathology, surgery, dermatology, neurology, physical therapy, diagnosis and roentgenology, orthopedics, chiropody and chiropodial surgery, limited in their scope to the treatment of the human foot and leg, and if found qualified shall receive a license. The minimum of requirements for license shall be a general average of seventy-five percent (75%) of all the subjects involved, provided that a grade of not less than sixty percent (60%) be made on any one (1) subject or branch given in the examination held. However, applicants are encouraged to take the examinations given by the National Board of Podiatry Examiners.

- 6. Must submit an application for podiatry license on a form supplied by the Board, completed in every detail with a recent photograph (wallet-size/passport-type) attached. A Polaroid or informal snap-shot picture will not be accepted.
- 7. Submit fee prescribed by the Board.
- 8. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.

Amended March 8, 2007.

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI





Specific Legal Authority Authorizing the promulgation of Mississippi State Board of Medical Licensure Rule: (Insert citation to state or federal statute, or c/o Rhonda Freeman rule Section 73-43-11 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216 Reference to Rules repealed, amended or suspended by the Proposed Rule: (Insert citation to specific rule(s) repealed, amended or suspended VII. Licensure by Reciprocity or Endorsement (601) 987-3079 Podiatric Medicine rhonda@msbml.state.ms.us Date Rule Proposed: Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: This regulation addresses the requirements for podiatrists to meet in order to be licensed based on their licensure in another state. The regulation change adds a requirement that the physician must take and pass the jurisprudence examination as administered by the Board. The Agency Rule Making Record for this rule including any written comments received during the comment period and the record of any oral proceeding is available for public inspection by contacting the Agency at the above address. An oral proceeding was held on this rule: Date: Time: Place: An oral proceeding was not held on this rule. The Agency has considered the written comments and the presentations made in any oral proceedings, and This rule as adopted is without variance from the proposed rule. This rule as adopted differs from the proposed rule as there are minor editorial changes which affect the form rather than the substance of the rule. The rule as adopted differs from the proposed rule. The differences however are: Within the scope of the matters in the Notice of Proposed Rule Adoption, the logical outgrowth of the contents of the Notice of Proposed Rule Adoption and the comments submitted in response thereto, and

The Notice of Proposed Rule Adoption provided fair warning that the outcome of the proposed rule adoption could

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

be the rule in question.

April 8, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Division Director

SOS FORM APA 002 Effective Date 07/29/2005



TELEPHONE: (601) 987-3079 FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: March 9, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This regulation requires licensee to take and pass the Board's jurisprudence examination.

VII. LICENSURE BY RECIPROCITY OR ENDORSEMENT - PODIATRIC MEDICINE

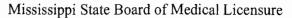
- A. The Board may grant a license to practice podiatric medicine without further examination to a graduate in podiatric medicine who holds a valid, active license to practice podiatric medicine in another state, provided the requirements in said state are equal to those required by this Board and the other state extends the same reciprocal privileges to this state.
- B. If the original license of an applicant was obtained by state board examination, the applicant must have application certified by the state board where original license was obtained by written examination.
- C. The Board may affiliate with and recognize for the purpose of waiving examination and may grant licenses to Diplomats of the National Board of Podiatric Examiners. If a Diplomat of the National Board of Podiatric Examiners, the applicant must obtain certification of endorsement from that Board and submit the same with application.
- D. In addition to the above requirements for licensure by reciprocity and/or endorsement, an individual shall meet the following requirements:
 - 1. Applicant must be twenty-one (21) years of age, and of good moral character.
 - 2. Applicant must have had at least four (4) years high school and be graduate of same; he shall have at least one (1) year pre-podiatry college education.
 - 3. Present a diploma from a college of podiatric medicine recognized by the Board as being in good standing, subject to the following conditions.
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. No college of podiatry or chiropody shall be accredited by the Board as a college of good standing which does not require for graduation a course of study of at least four (4) years (eight and one-half [8½] months each) and be recognized by the Council on Education of the American Podiatry Association.
 - 4. Must present proof of completion of (1) one year of APMA-approved postgraduate training in the U.S. or Canada.

- 5. Present certified copy of birth certificate.
- 6. Must submit an application for medical license on a form supplied by the Board, completed in every detail with a recent photograph (wallet-size/passport-type) attached. A Polaroid or informal snapshot picture will not be accepted.
- 7. Submit fee prescribed by the Board.
- 8. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.

Amended March 8, 2007.

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI





Mississippi State Board of Medical Licensure c/o Rhonda Freeman	Rule: (Insert citation to state or federal statute, or rule Section 73-43-11		
1867 Crane Ridge Drive, Suite 200-B	1810		
Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: {Insert citation to specific rule(s) repealed,		
(601) 987-3079	amended or suspended XXII. Regulation Governing the Practice of Physician		
rhonda@msbml.state.ms.us	Assistants }		
Date Rule Proposed:			
Explanation of the Purpose of the Proposed Rule and	the reason(s) for proposing the rule:		
This regulation addresses the requirements for physician assistar	ats to meet in order to be licensed. The regulation change adds a requirement and take and pass the jurisprudence examination as administered by the		
	ng any written comments received during the comment period public inspection by contacting the Agency at the above address.		
An oral proceeding was held on this rule:			
Date:			
Time:			
Place:			
An oral proceeding was not held on this rule.			
The Agency has considered the written comments and	the presentations made in any oral proceedings, and		
This rule as adopted is without variance from	the proposed rule.		
This rule as adopted differs from the proposed rather than the substance of the rule.	d rule as there are minor editorial changes which affect the form		
The rule as adopted differs from the proposed Within the scope of the matters in the Notice of I			

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

April 8, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Division Director

SOS FORM APA 002 Effective Date 07/29/2005 TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This regulation requires licensee to take and pass the Board's jurisprudence examination.

XXII. REGULATIONS GOVERNING THE PRACTICE OF PHYSICIAN ASSISTANTS

A. SCOPE

- 1. The following regulations pertain to Physician Assistants practicing medicine with physician supervision. Physician Assistants may perform those duties and responsibilities, including diagnosing and the ordering, prescribing, dispensing of prepackaged drugs, and administration of drugs and medical devices as delegated by their supervising physician(s).
- Physician Assistants may provide any medical service which is delegated by the supervising physician when the service is within the Physician Assistant's training and skills; forms a component of the physician's scope of practice; and is provided with supervision.
- Physician Assistants shall be considered the agents of their supervising
 physicians in the performance of all practice-related activities including,
 but not limited to, the ordering of diagnostic, therapeutic, and other
 medical services.

B. DEFINITIONS

- 1. For the purpose of Article XXII only, the following terms have the meanings indicated:
 - a. "Board" means the Mississippi State Board of Medical Licensure.
 - b. "Physician Assistant" means a person who meets the Board's criteria for licensure as a Physician Assistant and is licensed as a Physician Assistant by the Board.
 - c. "Supervising Physician" means a doctor of medicine or a doctor of osteopathic medicine who holds an unrestricted license from the Board, who is in the full-time practice of medicine, and who has been approved by the Board to supervise Physician Assistants.
 - d. "Supervise" or "Supervision" means overseeing and accepting responsibility for the medical services rendered by a Physician Assistant.
 - e. "Primary Office" means the usual practice location of a physician and being the same location reported by that physician to the Mississippi State Board of Medical Licensure and the United States Drug Enforcement Administration.

- f. "NCCPA" means the National Commission on Certification of Physician Assistants.
- g. "PANCE" means the Physician Assistant National Certifying Examination.
- h. "CAAHEP" means the Commission on Accreditation of Allied Health Education Programs.
- "Predecessor or Successor Agency" refers to the agency responsible for accreditation of educational programs for Physician Assistants that preceded CAAHEP or the agency responsible for accreditation of educational programs for physician assistants that succeeded CAAHEP.
- 2. Masculine terms wherever used in this regulation shall also be deemed to include the feminine.

C. QUALIFICATIONS FOR LICENSURE

- 1. Pursuant to Section 73-43-11, Mississippi Code (1972) Annotated, all Physician Assistants who are employed as Physician Assistants by a Department of Veterans Affairs health care facility, a branch of the United States military, or the Federal Bureau of Prisons and who are practicing as Physician Assistants in a federal facility in Mississippi on July 1, 2000, and those Physician Assistants who trained in a Mississippi Physician Assistant program and have been continuously practicing as a Physician Assistant in Mississippi since 1976, shall be eligible for licensure if they submit an application for licensure to the Board by December 31, 2000, and meet the following additional requirements:
 - a. Satisfies the Board that he is at least twenty-one (21) years of age and of good moral character.
 - b. Submits an application for license on a form supplied by the Board, completed in every detail with a recent photograph (walletsize/passport type) attached. A Polaroid or informal snapshot will not be accepted.
 - c. Pays the appropriate fee as determined by the Board.
 - d. Presents a certified copy of birth certificate.

- e. Proof of legal change of name if applicable (notarized or certified copy of marriage or other legal proceeding).
- f. Provides information on registration or licensure in all other states where the applicant is or has been registered or licensed as a Physician Assistant.
- g. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
- h. No basis or grounds exist for the denial of licensure as provided at Article N below.

Physician Assistants licensed under this subsection will be eligible for license renewal so long as they meet standard renewal requirements.

- 2. Before December 31, 2004, applicants for Physician Assistant licensure, except those licensed pursuant to the paragraph above, must be graduates of Physician Assistant educational programs accredited by the Commission on Accreditation of Allied Health Educational Programs or its predecessor or successor agency, have passed the certification examination administered by the National Commission on Certification of Physician Assistants (NCCPA), have current NCCPA certification, and possess a minimum of a baccalaureate degree, and meet the following additional requirements:
 - a. Satisfies the Board that he is at least twenty-one (21) years of age and of good moral character.
 - b. Submits an application for license on a form supplied by the Board, completed in every detail with a recent photograph (walletsize/passport type) attached. A Polaroid or informal snapshot will not be accepted.
 - c. Pays the appropriate fee as determined by the Board.
 - d. Presents a certified copy of birth certificate.
 - e. Proof of legal change of name if applicable (notarized or certified copy of marriage or other legal proceeding).
 - f. Provides information on registration or licensure in all other states where the applicant is or has been registered or licensed as a Physician Assistant.

- g. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
- h. No basis or grounds exist for the denial of licensure as provided at Article N below.

Physician Assistants meeting these licensure requirements will be eligible for license renewal so long as they meet standard renewal requirements.

- 3. On or after December 31, 2004, applicants for Physician Assistant licensure must meet the following requirements:
 - a. Satisfies the Board that he is at least twenty-one (21) years of age and of good moral character.
 - b. Submits an application for license on a form supplied by the Board, completed in every detail with a recent photograph (walletsize/passport type) attached. A Polaroid or informal snapshot will not be accepted.
 - c. Pays the appropriate fee as determined by the Board.
 - d. Presents a certified copy of birth certificate.
 - e. Proof of legal change of name if applicable (notarized or certified copy of marriage or other legal proceeding).
 - f. Possesses a master's degree in a health-related or science field.
 - g. Has successfully completed an educational program for Physician Assistants accredited by CAAHEP or its predecessor or successor agency.
 - h. Passed the certification examination administered by the NCCPA and have current NCCPA certification.
 - i. Provides information on registration or licensure in all other states where the applicant is or has been registered or licensed as a Physician Assistant.
 - j. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.

- Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- 1. No basis or grounds exist for the denial of licensure as provided at Article N below.

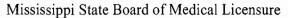
1. Temporary License

- a. The Board may grant a temporary license to an applicant who meets the qualifications for licensure except that the applicant has not yet taken the national certifying examination administered by the NCCPA or the applicant has taken the national certifying examination and is awaiting the results.
- b. A temporary license is valid:
 - (1) for one hundred eighty (180) days from the date of issuance;
 - (2) until the results of an applicant's examination are available;
 - (3) until the Board makes a final decision on the applicant's request for licensure, whichever comes first. The Board may extend a temporary license, upon a majority vote of the Board members, for a period not to exceed one hundred eighty (180) days. Under no circumstances may the Board grant more than one extension of a temporary license.

Amended March 8, 2007.

NOTICE OF RULE ADOPTION—FINAL RULE







Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216 (601) 987-3079 rhonda@msbml.state.ms.us	Rule: {Insert citation to state or federal statute, or rule Section 73-43-11 Reference to Rules repealed, amended or suspended by th Proposed Rule: {Insert citation to specific rule(s) repealed, amended or suspended V. Limited Institutional Licensure
Date Rule Proposed:	
Explanation of the Purpose of the Proposed Rule and	
This regulation addresses the requirements for international med license. The regulation change adds a requirement that the phys jurisprudence examination as administered by the Board.	ical graduates to meet in order to be licensed with a limited institutional ician must appear for a personal interview and take and pass the
	1
An oral proceeding was held on this rule: Date: Time: Place:	public inspection by contacting the Agency at the above address
An oral proceeding was not held on this rule.	
The Agency has considered the written comments and	the presentations made in any oral proceedings, and
✓ This rule as adopted is without variance from	the proposed rule.
This rule as adopted differs from the proposed rather than the substance of the rule.	d rule as there are minor editorial changes which affect the form
The rule as adopted differs from the proposed Within the scope of the matters in the Notice of the Notice of Proposed Rule Adoption and the country The Notice of Proposed Rule Adoption provided	rule. The differences however are: Proposed Rule Adoption, the logical outgrowth of the contents of

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

April 8, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Division Director

SOS FORM APA 002 Effective Date 07/29/2005 TELEPHONE: (601) 987-3079

FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This regulation requires licensee to take and pass the Board's jurisprudence examination.

V. LIMITED INSTITUTIONAL LICENSURE

A. Pursuant to Section 73-25-23, Mississippi Code (1972) Annotated, a Limited Institutional License is available only to graduates of foreign medical schools who are employed or are being considered for employment to practice medicine in one or more of the following Mississippi state-supported institutions located in the same county:

East Mississippi State Hospital, Meridian Ellisville State School, Ellisville Hudspeth Center, Whitfield Mississippi State Department of Health, Jackson Mississippi State Hospital, Whitfield Mississippi State Department of Corrections, Jackson Boswell Retardation Center, Sanatorium University of Mississippi Medical Center, Jackson

It is understood that graduates of foreign medical schools holding a Limited Institutional License, and who are employed by and enrolled in an approved ACGME or AOA postgraduate residency training program at the University of Mississippi Medical Center, shall be authorized to participate in any residency educational program at the University of Mississippi Medical Center, or any of its affiliated training program sites.

- B. An application for limited institutional licensure may be obtained only upon the written request of the director of one of the above-named institutions which have employed or is considering for employment a graduate of a foreign medical school to practice medicine.
- C. A limited institutional license may be issued for a period of one (1) year for practice in a particular institution after a review and favorable recommendations by a majority of the following:
 - 1. President or Secretary, Board of Trustees of Institution
 - 2. Director of Institution
 - 3. President or Secretary, Local Chartered Medical Society in area in which institution is located
 - 4. Member, Board of Trustees, Mississippi State Medical Association in area in which institution is located
 - 5. Member, Mississippi State Board of Medical Licensure from district in

which institution is located

- 6. Executive Officer, Mississippi State Board of Medical Licensure
- D. In addition to the above requirements for a limited institutional license, an applicant shall meet the following requirements:
 - 1. Must be at least twenty-one (21) years of age, of good moral character.
 - 2. Must present original diploma from a reputable medical college or reputable college of osteopathic medicine.
 - Must submit certified copy of valid certificate from the ECFMG or its successor.
 - 4. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
 - Must submit application completed in every detail with recent photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot picture will not be accepted.
 - 6. Must submit fee prescribed by the Board.
 - 7. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- E. Pursuant to Section 73-25-23, Mississippi Code (1972) Annotated, a limited institutional license must be renewed annually, after such review as the State Board of Medical Licensure considers necessary. A graduate of a foreign medical school so licensed may hold such limited institutional license no longer than five (5) years; provided, however, that any graduate of a foreign medical school so licensed and employed by any state institution on January 1, 1981, shall not be subject to the five-year limitation created by statute. Based upon the above law:
 - 1. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution on January 1, 1981, shall be renewable annually based upon the favorable recommendation of the director of the institution by which the licensee is employed.
 - 2. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution from January 2, 1981, through June 30, 1983, shall be renewable annually for five years,

- beginning July 1, 1983, based upon the favorable recommendation of the director of the institution by which the licensee is employed.
- 3. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution on and after July 1, 1983, shall be renewable annually based upon the favorable recommendation of the director of the institution by which the licensee is employed. A graduate of a foreign medical school so licensed may hold such limited institutional license no longer than five (5) years.
- F. Since a limited institutional license is issued to a graduate of a foreign medical school for employment to practice medicine in a particular Mississippi state-supported institution, or institutions located in the same county, such limited institutional license shall become void immediately upon termination of employment of the licensee at the institution, or institutions, at which practice is authorized under the license.
- G. An annual renewal fee shall be prescribed by the Board.

Amended November 19, 1998. Amended March 8, 2007.



NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure



Mississippi State Board of Medical Licensure c/o Rhonda Freeman

Specific Legal Authority authorizing the promulgation on Rule: (Insert citation to state or federal statute, or rule Section 73-43-11		
Proposed Rule :{ amended or susper	s repealed, amended or suspended b Insert citation to specific rule(s) repeal ded XIX. Regulation Concerning Use of Laser	ed,
Devices		}

1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: (Insert citation to specific rule(s) repealed, amended or suspended XIX. Regulation Concerning Use of Laser Devices
(601) 987-3079	
rhonda@msbml.state.ms.us	
Explanation of the Purpose of the Proposed Rule and This regulation amends the Board's regulation con	the reason(s) for proposing the rule: {Insert here} cerning the use of laser devices to include pulsed light or
similar devices.	
This rule is proposed as a 🖊 Final Rule, and/or a 🗖 Ten	nporary Rule (Check one or both boxers as applicable.)
address. Persons making comments should include the	by addressing written comments to the agency at the above heir name and address, as well as other contact information, and d telephone number of the party or parties you represent.
Oral Proceeding: Check one box below	v:
An oral proceeding is scheduled on this rule Place:	on Date: Time:
the above address at least day(s) prior to	the oral proceeding you must make a written request to the agency at the proceeding to be placed on the agenda. The request should as well as other contact information; and if you are an agent or per of the party or parties you represent.
will be held if a written request for an oral proce persons. The written request should be submitted (20) days after the filing of this notice of propose	rule. Where an oral proceeding is not scheduled, an oral proceeding eeding is submitted by a political subdivision, an agency or ten (10) ed to the agency contact person at the above address within twenty sed rule adoption and should include the name, address and telephone d if you are an agent or attorney, the name, address and telephone
Economic Impact Statement: Check one box below	v:
✓ The agency has determined that an economic	impact statement is not required for this rule, or
The concise summary of the economic impac	et statement required is attached.
The entire text of the Proposed Rule including the text of	any rule being amended or changed is attached.
Date Rule Proposed: March 8, 2007	Proposed Effective Date of Rule: 30 days from final filing.

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079

FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: March 9, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This regulation amends the Board's regulation concerning the use of laser devices to include pulsed light or similar devices..

XIX. REGULATION CONCERNING USE OF LASER DEVICES

The use of laser, <u>pulsed light or similar</u> devices, either for invasive or cosmetic procedures, is considered to be the practice of medicine in the State of Mississippi and therefore such use shall be limited to physicians and those directly supervised by physicians, such that a physician is on the premises and would be directly involved in the treatment if required.

Adopted March 18, 1999. Amended May 19, 2005. Amended January 18, 2007.



NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure



Specific Legal Authority authorizing the promulgation of

Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B

Rule: (Insert citation to state or federal statute, or rule Section 73-43-11 Reference to Rules repealed, amended or suspended by the Proposed Rule: (Insert citation to specific rule(s) repealed, Jackson, MS 39216

·	amended or suspended 1. Licensule regulations
(601) 987-3079	
rhonda@msbml.state.m	s.us
Explanation of the Purpose of The changes in this regulation	the Proposed Rule and the reason(s) for proposing the rule: {Insert here} on reflect an attempt to simplify current language.
This rule is proposed as a ☑Fin	al Rule, and/or a Temporary Rule (Check one or both boxers as applicable.)
ddress. Persons making com	ws on the proposed rule by addressing written comments to the agency at the above ments should include their name and address, as well as other contact information, and , the name, address and telephone number of the party or parties you represent.
Oral Proceeding:	Check one box below:
An oral proceeding i	s scheduled on this rule on Date: Time:
the above address at lea include your name, add	and present evidence at the oral proceeding you must make a written request to the agency at st day(s) prior to the proceeding to be placed on the agenda. The request should ress, telephone number as well as other contact information; and if you are an agent or ress and telephone number of the party or parties you represent.
will be held if a written persons. The written re (20) days after the filing	is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) quest should be submitted to the agency contact person at the above address within twenty g of this notice of proposed rule adoption and should include the name, address and telephone making the request; and if you are an agent or attorney, the name, address and telephone parties you represent.
Economic Impact Statement:	Check one box below:

E

The agency has determined that an economic impact statement is not required for this rule, or

The concise summary of the economic impact statement required is attached.

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Date Rule Proposed: March 8, 2007

Proposed Effective Date of Rule: 30 days from final filing.

senc Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The changes in this regulation reflect an attempt to simplify and update current language.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

I. LICENSURE REGULATIONS GOVERNING THE PRACTICE OF MEDICAL DOCTORS, OSTEOPATHIC PHYSICIANS AND PODIATRISTS

AUTHORITY: CHAPTERS 25 and 27, TITLE 73, MISSISSIPPI CODE (1972), ANNOTATED, AS AMENDED

A. SCOPE

These regulations apply to all applicants for licensure to practice medicine, osteopathic medicine or podiatric medicine in the State of Mississippi whether by examination or by endorsement, and to all individuals practicing medicine, osteopathic medicine or podiatric medicine within the State whether licensed or unlicensed.

B. DEFINITIONS

- 1. For the purpose of Article I only, the following terms have the meanings indicated:
 - a. "Board" means the Mississippi State Board of Medical Licensure.
 - b. "ECFMG" means the Education Commission for Foreign Medical Graduates.
 - c. "FLEX" means the Federation Licensing Examination
 administered through the Federation of State Medical Boards of
 the United States, Incorporated
 - d. "USMLE" means United States Medical Licensing Examination administered jointly through the Federation of State Medical Boards of the United States, Incorporated, and the National Board of Medical Examiners.
 - e. "NBME" means National Board of Medical Examiners.
 - f. "NBOME" means the National Board of Osteopathic Medical Examiners.
 - g. "SPEX" means the Special Purpose Examination administered through the Federation of State Medical Boards of the United States, Incorporated.

- h. "Foreign Medical School" means any medical college or college of osteopathic medicine located outside the United States, Canada or Puerto Rico.
- "LCME" means the Liaison Committee on Medical Education, the organization recognized by the American Medical Association for accrediting American medical schools.
- j. "LMCC" means Licentiate of the Medical Council of Canada.
- k. "AOA" means American Osteopathic Association.
- "ACGME" means Accreditation Council of Graduate Medical Education.
- m. "Good Moral Character" as applied to an applicant, means that the applicant has not, prior to or during the pendency of an application to the Board, been guilty of any act, omission, condition or circumstance which would provide legal cause under Section 73-25-29 or Section 73-25-83, Mississippi Code (1972), as amended, for the suspension or revocation of medical licensure.
- 2. Masculine terms wheresoever used in this regulation shall also be deemed to include the feminine.
- 3. The word "article" wheresoever used in these regulations shall mean "regulation."

C. DUTY TO OBTAIN LICENSE

- 1. Any physician, osteopathic physician, or podiatrist desiring to practice in this state must first obtain a license to do so by contacting the Mississippi State Board of Medical Licensure, Post Office Box 9268, Jackson, Mississippi 39286-9268; telephone (601) 987-3079 at its current address or website address.
- 2. When an inquiry concerning licensure is received, an application eliciting certain pertinent information is sent to the practitioner. The practitioner must complete an application and submit it to the Board in a manner prescribed by the Board. References submitted on the application are queried, as well as the American Medical, Osteopathic, or Podiatry Associations, Federation of State Medical Boards, National Practitioners Data Bank, other states in which the practitioner is or has been licensed, entities where the practitioner is or has been employed, and hospitals

where the practitioner has held staff privileges.

- 3. A physician, osteopathic physician, or podiatrist who is participating in or who has participated in an impaired professionals/disabled doctors program as approved by the Board must document a two-year period of abstinence from any abusive use of mood-altering drugs, which shall include, but not be limited to, alcohol and all substances listed in Schedules I through V of the Uniform Controlled Substances Law, Mississippi Code (1972) Annotated, from the date of completion of the program before he is eligible for a permanent license to practice medicine/podiatry in Mississippi.
- 4. Prior to the issuance of, or reinstatement of a license, any physician, osteopathic physician, or podiatrist who has not actively practiced for a three (3) year period shall be required to participate in a Board approved physician assessment program and/or clinical skills assessment program to assure post-licensure competency.

A physician, osteopathic physician or podiatrist shall be deemed to have not "actively" practiced medicine if during said three (3) year period the physician, osteopathic physician or podiatrist has not treated any patients for remuneration, other than friends and family.

This section excludes those physicians, osteopathic physicians, or podiatrists who perform charity work or work in research.

Amended April 15, 1999.



NOTICE OF PROPOSED RULE ADOPTION



STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Specific Legal Authority authorizing the promulgation of Mississippi State Board of Medical Rule: {Insert citation to state or federal statute, or rule Section 73-43-11 Licensure c/o Rhonda Freeman Reference to Rules repealed, amended or suspended by the 1867 Crane Ridge Drive, Suite 200-B Proposed Rule: { Insert citation to specific rule(s) repealed, Jackson, MS 39216 amended or suspended II. Licensure By Examination - M.D. and/or (601) 987-3079 rhonda@msbml.state.ms.us Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: {Insert here} The changes in this regulation reflect an attempt to simplify and update current language. This rule is proposed as a Final Rule, and/or a Temporary Rule (Check one or both boxers as applicable.) Persons may present their views on the proposed rule by addressing written comments to the agency at the above address. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. Oral Proceeding: Check one box below: An oral proceeding is scheduled on this rule on Date: Time: Place: If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at the above address at least _____ day(s) prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Economic Impact Statement:** Check one box below: The agency has determined that an economic impact statement is not required for this rule, or The concise summary of the economic impact statement required is attached. The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Signature and Title of Person Submitting Rule for Filing

Date Rule Proposed: March 8, 2007

SOS FORM APA 001 Effective Date 07/29/2005

Proposed Effective Date of Rule: 30 days from final filing.

Rhonda Freeman Division Director

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The changes in this regulation reflect an attempt to simplify and update current language.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

II. LICENSURE BY EXAMINATION - M.D. AND/OR D.O.

- A. To qualify for admission by examination, an individual shall meet the following requirements, provided that the Board may admit any individual to the examination while reserving its right to deny licensure if that individual fails to meet all requirements for licensure subsequent to success or completion of the examination:
 - 1. Applicant must satisfy the Board that he is at least twenty-one (21) years of age and of good moral character.
 - 2. Present a diploma from a reputable medical college or college of osteopathic medicine, subject to the following conditions:
 - a. If the degree is from a medical college or a college of osteopathic medicine in the United States or Puerto Rico, the medical college must be accredited by the Liaison Committee on Medical Education (LCME), a Joint Committee of the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA), or if a college of osteopathic medicine, must be accredited by the Professional Education Committee of the American Osteopathic Association (AOA).
 - b. If the degree is from a Canadian medical school, the school must be accredited by the Liaison Committee on Medical Education (LCME) and by the Committee on Accreditation for Canadian Medical Schools, as sponsored by the Canadian Medical Association and Association of Canadian Medical Colleges.
 - c. If the degree is from a foreign medical school, applicant must either (i) possess a valid certificate from the ECFMG or (ii) document successful completion of a Fifth Pathway program, as described in Article II, B below.
 - d. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - 3. Applicants for licensure by examination must present documentation of having completed at least one (1) year of postgraduate training in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or by the AOA; or training in Canada

accredited by the Royal College of Physicians and Surgeons.

- 4. Present certified copy of birth certificate or valid passport.
- 5. Subject to the provisions of Article IV below, an applicant must successfully complete and pass all parts/steps of the FLEX or USMLE.
- Must submit complete an application for medical license on a form supplied by the Board, completed in every detail and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot picture will not be accepted.
- 7. Submit fee prescribed by the Board; however, any fees related to permanent licensure may be deferred for applicants indicating a desire to practice medicine under a Temporary License or Limited License within the confines of an ACGME or AOA approved postgraduate training program pursuant to Section X.A.1. or Section V. of these regulations.
- 8. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- B. A Fifth Pathway Program, as a prerequisite for licensure by examination pursuant to Article II, A2d above, will be considered on an individual basis. Students who have completed the academic curriculum in a foreign medical school and who have fulfilled the conditions hereinafter set forth, may be offered the opportunity to substitute for an internship required by the foreign medical school, an academic year of supervised clinical training prior to entrance into the first year of ACGME- or AOA-approved postgraduate medical education. The supervised clinical training (Fifth Pathway) must be under the direction of a medical school accredited by the LCME. Fifth Pathway will be available to students who have fulfilled the following conditions:
 - Completed, in an accredited American college or university, undergraduate pre-medical work of the quality acceptable for matriculation in an accredited U.S. medical school,
 - 2. Studied medicine at a medical school located outside the United States, Puerto Rico and Canada but which is recognized by the World Health Organization, and
 - 3. Completed all of the formal requirements of the foreign medical school except internship and/or social service.



NOTICE OF PROPOSED RULE ADOPTION



STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1 Já

Specific Legal Authority authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule. Section 73-43-11	
Reference to Rules repealed, amended or suspended by the Proposed Rule: (Insert citation to specific rule(s) repealed, amended or suspended III. Licensure by Reciprocity or Endoresement	
M.D. and/or D.O.	

1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended III. Licensure by Reciprocity or Endoresement M.D. and/or D.O.			
(601) 987-3079				
rhonda@msbml.state.ms.us				
Explanation of the Purpose of the Proposed Rule a The changes in this regulation reflect an attempt	and the reason(s) for proposing the rule: (Insert here) t to simplify and update current language.			
This rule is proposed as a Final Rule, and/or a Temporary Rule (Check one or both boxers as applicable.)				
address. Persons making comments should include	ule by addressing written comments to the agency at the above e their name and address, as well as other contact information, and and telephone number of the party or parties you represent.			
Oral Proceeding: Check one box be	low:			
An oral proceeding is scheduled on this ru Place:	le on Date: Time:			
the above address at least day(s) prior	at the oral proceeding you must make a written request to the agency at to the proceeding to be placed on the agenda. The request should er as well as other contact information; and if you are an agent or mber of the party or parties you represent.			
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Economic Impact Statement: Check one box be	low:			
The agency has determined that an econom	nic impact statement is not required for this rule, or			
The concise summary of the economic imp	pact statement required is attached.			
The entire text of the Proposed Rule including the text	of any rule being amended or changed is attached.			
Date Rule Proposed: March 8, 2007	Proposed Effective Date of Rule: 30 days from final filing.			

Date Rule Proposed: March 8, 2007

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The changes in this regulation reflect an attempt to simplify and update current language.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

III. LICENSURE BY RECIPROCITY OR ENDORSEMENT - M.D. AND/OR D.O.

- A. The Board may grant a license to practice medicine without further examination to a graduate in medicine or osteopathic medicine who holds a valid, active license to practice medicine in another state, provided the requirements in said state are equal to those required by this Board.
- B. The Board endorses, for the purpose of reciprocity, licenses to practice medicine obtained in most states by written examination prior to March 8, 1973. Subject to the provisions of Article IV below, all applicants for medical licensure by reciprocity who took the FLEX between March 8, 1973, and January 24, 1985, must have passed the FLEX taken in one three-day sitting with a weighted average of 75 or higher in order to obtain licensure in Mississippi. The Board will not accept scores of more than one administration of the FLEX which have been combined (factored) to provide a FLEX weighted average of 75 or higher. From and after January 24, 1985, an applicant for medical licensure by reciprocity must have passed both Components I and II of the FLEX with a score of 75 to be considered the passing grade for each component. From and after June, 1994, the Board shall endorse, for the purpose of reciprocity, licenses to practice medicine from applicants who have successfully taken Steps 1, 2 and 3 of the USMLE.
- C. Those doctors of osteopathic medicine who graduated prior to June 1, 1973, and who make application for licensure by reciprocity with another state will be considered only if they took and passed the same written licensure examination given in that state at that time to graduates of medical schools. A statement to this effect will be obtained by this Board from that licensing board.
- D. The Board may affiliate with and recognize for the purpose of waiving examination and may grant licenses to Diplomats of the NBME; on or after February 13, 1973, to Diplomats of the NBOME and licentiates of the Medical Council of Canada. If a Diplomat of the NBME or NBOME, the applicant must obtain have a Certification of Endorsement from that Board and submit same with application submitted directly to the Board. If seeking endorsement with the Medical Council of Canada, the applicant must obtain have a Certificate of Standing and submit it with the application submitted directly to the Board.
- E. The applicant must have the application certified by the state board where the original license was obtained by examination submit a certified copy of the examination to the Board.
- F. The Board may grant a license by reciprocity to a graduate of a foreign medical school who was licensed in another state by written examination prior to March 8, 1973, if he is certified by an American Board of Medical Specialties.

The applicant must present the certificate from the specialty board stating he is eurrently certified and A statement verifying that the applicant is currently certified must be submitted directly to the Board by the American Board of Medical Specialties Board. The applicant must comply with all other licensure requirements for foreign medical graduates.

- G. In addition to the above requirements for licensure by reciprocity and/or endorsement, an individual shall meet the following requirements:
 - 1. Applicant must be twenty-one (21) years of age, of good moral character.
 - 2. Present a diploma from a reputable medical college or college of osteopathic medicine, subject to the following conditions:
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. If the degree is from a medical college or a college of osteopathic medicine in the United States or Puerto Rico, the medical college must be accredited by the Liaison Committee on Medical Education (LCME), a Joint Committee of the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA) or the College of Osteopathic Medicine must be accredited by the American Osteopathic Association (AOA).
 - c. If the degree is from a Canadian medical school, the school must be accredited by the Liaison Committee on Medical Education (LCME) and by the Committee on Accreditation for Canadian Medical Schools, as sponsored by the Canadian Medical Association and Association of Canadian Medical Colleges.
 - d. If the degree is from a foreign medical school, applicant must either (i) possess a valid certificate from the ECFMG or (ii) document successful completion of a Fifth Pathway program, as described in Article II, B above, and be currently Board Certified by a Specialty Board recognized by the American Board of Medical Specialties or the American Osteopathic Association.
 - 3. If a graduate from a medical college or college of osteopathic medicine in the United States, Canada or Puerto Rico, applicant must present documentation of having completed at least one (1) year of postgraduate training in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or by the AOA; or training in

Canada accredited by the Royal College of Physicians and Surgeons.

- 4. If a graduate from a foreign medical school, applicant must present documentation of having completed either (i) three (3) or more years of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of Physicians and Surgeons or (ii) at least one year of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of Physicians and Surgeons, be currently Board certified by a Specialty Board recognized by the American Board of Medical Specialties or the American Osteopathic Association and will be based upon approval by the Mississippi State Board of Medical Licensure.
- An applicant who otherwise possesses all of the qualifications for licensure by reciprocity/ endorsement, but has not taken a medical proficiency examination or licensure examination within ten (10) years prior to filing his or her application, must pass the Special Purpose Examination (SPEX)* as administered by and under auspices of the Board, unless the applicant:
 - a. Submits satisfactory proof of current certification by an American Board of Medical Specialties or American Osteopathic Association approved specialty board; or
 - b. Submits proof that the applicant's sole purpose for seeking licensure is to serve as the Dean, Chairman of the Department or Faculty of the University of Mississippi School of Medicine. In such case, a license shall remain in effect so long as Licensee is a member of the faculty of the University School of Medicine.

^{*} SPEX (SPECIAL PURPOSE EXAMINATION) is a cognitive examination assisting licensing jurisdictions in their assessment of current competence requisite for general, undifferentiated medical practice by physicians who hold or have held a valid license in a U.S. jurisdiction. SPEX is made available through the Federation of State Medical Boards of the United States, Incorporated.

- 6. Present certified copy of birth certificate or valid passport.
- 7. Must submit complete an application for medical license on a form supplied by the Board, completed in every detail and submit it to the Board in a manner prescribed by the Board with a recent passport type photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot picture will not be accepted.
- 8. Submit fee prescribed by the Board.
- 9. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- H. Graduates of foreign medical schools seeking licensure by reciprocity or endorsement via Fifth Pathway Programs will be considered on an individual basis subject to those requirements set forth in Section II, B above.



CRETARY OF STATE

NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Mississippi State Board of Medical Licensure c/o Rhonda Freeman

Mississippi State Board of Medical Licensure	Specific Legal Authority authorizing the promulgation of Rule: (Insert citation to state or federal statute, or rule Section 73-43-11
c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended IV. Licensure Examinations
(601) 987-3079 rhonda@msbml.state.ms.us	
Explanation of the Purpose of the Proposed Rul- The changes in this regulation reflect an atten	e and the reason(s) for proposing the rule: {Insert here} mpt to simplify and update current language.
Persons may present their views on the proposed address. Persons making comments should include:	Temporary Rule (Check one or both boxers as applicable.) d rule by addressing written comments to the agency at the above ude their name and address, as well as other contact information, and ss and telephone number of the party or parties you represent. below:
An oral proceeding is scheduled on this Place:	s rule on Date: Time:
the above address at least day(s) pri include your name, address, telephone num	ice at the oral proceeding you must make a written request to the agency at ior to the proceeding to be placed on the agenda. The request should inber as well as other contact information; and if you are an agent or number of the party or parties you represent.
	this rule. Where an oral proceeding is not scheduled, an oral proceeding proceeding is submitted by a political subdivision, an agency or ten (10)

Economic Impact Statement:

Check one box below:

The agency has determined that an economic impact statement is not required for this rule, or

The concise summary of the economic impact statement required is attached.

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Date Rule Proposed: March 8, 2007

Proposed Effective Date of Rule: 30 days from final filing.

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman Division Director



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption

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The changes in this regulation reflect an attempt to simplify and update current language.

Any comments concerning the proposed regulation may be sent to the following address:

IV. LICENSURE EXAMINATIONS

For the purpose of licensing by examination and reciprocity, the Board recognizes three (3) separate and distinct examinations, to-wit: The examinations administered by the NBME, FLEX and USMLE. The Board adopted the FLEX as a method of licensure by examination on March 8, 1973. Prior to this date, the Board administered a written examination and endorsed, for the purposes of reciprocity, licenses to practice medicine or osteopathic medicine obtained in most states by written examination. A separate discussion of each examination and this Board's requirements for the purpose of licensure is as follows:

A. FLEX

- 1. The Board adopted the Federation Licensing Examination (FLEX) as the method of licensure by examination on March 8, 1973. The FLEX is given on each June and December, the dates being set by the FLEX Examination Board of the Federation of State Medical Boards of the United States, Incorporated.—The last regular administration of the FLEX will be was December, 1993. During the interim, the Board will recognize FLEX as a valid medical licensing examination subject to all requirements heretofore and hereinafter set forth.
- 2. Prior to January 24, 1985, the FLEX examination was divided into three components:

Day I - Basic Science Day II - Clinical Science Day III - Clinical Competence

In order to pass this examination, each applicant must have obtained a FLEX weighted average of 75 with Day I given a value of 1/6 of the entire examination, Day II given a value of 2/6, and Day III given a value of 3/6. The Board may make an exemption to the weighted average of 75 if the applicant has completed an approved residency program and is currently board certified by a specialty board recognized by the American Board of Medical Specialties or the American Osteopathic Association.

From and a After January 24, 1985, the Board has approved administration of a new FLEX examination with a different design from that administered since 1973. This examination is also a three-day examination, but and is comprised of two components. Component I consists of one and one-half (1½) days and judges the readiness of a physician to practice medicine in a supervised setting. Component II

consists of one and one-half (1½) days and judges the readiness of a physician to practice independently. A score of 75 is considered a passing grade for each component. If taken separately, Component I must be passed before taking Component II.

- 3. The Board encourages all applicants to take both Components I and II in one three day sitting following graduation and as soon as possible following receipt of the M.D. or D.O. degree. However, Component I and Component II can be taken separately at different sittings. In this case, candidates are encouraged to take Component I as soon as possible after graduation with Component II taken at the next administration. An applicant has seven (7) years in which to pass both components of the FLEX. and aAn applicant is required to repeat only that component failed. A candidate who is unsuccessful in passing the FLEX after three (3) attempts will be required to take one additional year of post-graduate training approved by the Accreditation Council for Graduate Medical Education (ACGME) before being eligible to take the FLEX again. Following completion of the year of post- graduate training, applicant may be allowed three (3) additional attempts to pass the FLEX.
- 4. Courtesy candidates for the administration of FLEX, if accepted, will be assessed an additional fee.

B. USMLE

- 1. The Board adopted the United States Medical Licensing Examination (USMLE) as an additional method of licensure by examination on September 16, 1993. The USMLE replaces FLEX and the NBME certification examinations during a phase-in period from 1992 to 1994. Unlike the three-day (two component) FLEX, USMLE is a three-step examination that consists of three two-day examinations, Step 1, Step 2 and Step 3. Each step is complementary to the other; no step can stand alone in the assessment of readiness for medical licensure. Unlike the FLEX, which must be taken upon or after graduation from medical school, most applicants will take Step 1 and 2 of the USMLE during their medical school years. Step 3 will be taken after graduation.
- 2. To be eligible for Step 1 or Step 2 of the USMLE, an applicant must be an officially enrolled medical student officially enrolled in or a graduate of a United States, Puerto Rican or Canadian medical school accredited by the LCME or the AOA, or an officially enrolled medical student officially enrolled in or a graduate of a foreign medical school and eligible for examination by the ECFMG for a certificate.

- 3. To be eligible to take Step 3 of USMLE, an applicant must, (a) submit complete an application for a Mississippi medical license and, (b) meet all other requirements for licensure, as provided in Section II above.
- 4. A score of 75 is necessary to successfully pass each step of the USMLE.
- beginning when the examinee passes his first Step. The Board, at its discretion, may waive this requirement based on extraordinary circumstances. The Board encourages all applicants to take Step 3 of the USMLE as soon as possible following receipt of the M.D. or D.O. degree. An applicant has seven (7) years in which to pass all steps of the USMLE. A candidate who is unsuccessful in passing Step 3 after 3 (three) attempts will be required to take one (1) additional year of ACGME-approved postgraduate training before being eligible to take Step 3 again. Following completion of the year of postgraduate training, the applicant may be allowed three (3) additional attempts to pass Step 3 of the USMLE.
- 6. Courtesy candidates for the administration of the USMLE, if accepted, will be assessed an additional fee.

C. NBME or NBOME

The Board recognizes for the purpose of reciprocity and waiving examination, diplomats of the NBME and on or after February 13, 1973, diplomats of the NBOME. Both examinations are administered in three (3) parts, Parts I, II and III. Applicants must <a href="https://parts.number.nu

D. EXAM COMBINATIONS

After Now that the FLEX and examinations administered by the NBME have been phased out, the Board will accept passing scores for the following combinations of the FLEX, NBME and USMLE examinations:

EXAMINATION SEQUENCE	ACCEPTABLE COMBINATIONS
NBME Part I plus NBME Part II plus NBME Part III	NBME Part I or USMLE Step 1 plus NBME Part II or USMLE Step 2 plus NBME Part III or USMLE Step 3
FLEX Component I plus FLEX Component II	FLEX Component I plus USMLE Step 3 or NBME Part I or USMLE Step 1 plus NBME Part II or USMLE Step 2 plus FLEX Component II
USMLE Step 1 plus USMLE Step 2 plus USMLE Step 3	

Amended September 13, 1997. Amended January 18, 2001. Amended February 18, 2003.



NOTICE OF PROPOSED RULE ADOPTION



STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

Specific Legal Authority authorizing the promulgation of Rule: {Insert citation to state or federal statute, or ule Section 73-43-11
Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed, mended or suspended V. Limited Institutional Licensure

, odokoon, me oom to	amended or suspended V. Limited Institutional Licensure
(601) 987-3079)
rhonda@msbml.state.ms.us	
Explanation of the Purpose of the Proposed Ro The changes in this regulation reflect an atte	alle and the reason(s) for proposing the rule: {Insert here} empt to simplify and update current language.
This rule is proposed as a Final Rule, and/or a	Temporary Rule (Check one or both boxers as applicable.)
address. Persons making comments should inc	ed rule by addressing written comments to the agency at the above clude their name and address, as well as other contact information, and less and telephone number of the party or parties you represent.
Oral Proceeding: Check one bo	x below:
An oral proceeding is scheduled on the Place:	is rule on Date: Time:
the above address at least day(s) p include your name, address, telephone nu	ence at the oral proceeding you must make a written request to the agency at rior to the proceeding to be placed on the agenda. The request should umber as well as other contact information; and if you are an agent or e number of the party or parties you represent.
will be held if a written request for an orapersons. The written request should be s (20) days after the filing of this notice of	on this rule. Where an oral proceeding is not scheduled, an oral proceeding all proceeding is submitted by a political subdivision, an agency or ten (10) submitted to the agency contact person at the above address within twenty proposed rule adoption and should include the name, address and telephone est; and if you are an agent or attorney, the name, address and telephone ent.
Economic Impact Statement: Check one bo	x below:
☑The agency has determined that an economic and the control of the control o	onomic impact statement is not required for this rule, or
The concise summary of the economic	impact statement required is attached.
The entire text of the Proposed Rule including the	text of any rule being amended or changed is attached.

Date Rule Proposed: March 8, 2007

Proposed Effective Date of Rule: 30 days from final filing.

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman **Division Director**



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The changes in this regulation reflect an attempt to simplify and update current language.

Any comments concerning the proposed regulation may be sent to the following address:

V. LIMITED INSTITUTIONAL LICENSURE

A. Pursuant to Section 73-25-23, Mississippi Code (1972) Annotated, a Limited Institutional License is available only to graduates of foreign medical schools who are employed or are being considered for employment to practice medicine in one or more of the following Mississippi state-supported institutions located in the same county:

East Mississippi State Hospital, Meridian
Ellisville State School, Ellisville
Hudspeth Center, Whitfield
Mississippi State Department of Health, Jackson
Mississippi State Hospital, Whitfield
Mississippi State Department of Corrections, Jackson
Boswell Retardation Center, Sanatorium
University of Mississippi Medical Center, Jackson

It is understood that graduates of foreign medical schools holding a Limited Institutional License, and who are employed by and enrolled in an approved ACGME or AOA postgraduate residency training program at the University of Mississippi Medical Center, shall be authorized to participate in any residency postgraduate educational program at the University of Mississippi Medical Center, or any of its affiliated training program sites.

- B. An application for limited institutional licensure may be obtained only upon the written request of the director of one of the above-named institutions which have employed or is considering for employment employing a graduate of a foreign medical school to practice medicine.
- C. A limited institutional license may be issued for a period of one (1) year for practice in a particular institution after a review and favorable recommendations by a majority of the following:
 - 1. President or Secretary, Board of Trustees of Institution
 - 2. Director of Institution
 - 3. President or Secretary, Local Chartered Medical Society in area in which institution is located
 - 4. Member, Board of Trustees, Mississippi State Medical Association in area in which institution is located
 - 5. Member, Mississippi State Board of Medical Licensure from district in

which institution is located

- 6. Executive Officer, Mississippi State Board of Medical Licensure
- D. In addition to the above requirements for a limited institutional license, an applicant shall meet the following requirements:
 - 1. Must be at least twenty-one (21) years of age, of good moral character.
 - 2. Must present original diploma from a reputable medical college or reputable college of osteopathic medicine.
 - 3. Must submit certified copy of valid certificate from the ECFMG or its successor.
 - 4. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
 - 5. Must submit an application completed in every detail with recent <u>passport type</u> photograph (wallet size/passport type) attached. A Polaroid or informal snapshot picture will not be accepted.
 - 6. Must submit fee prescribed by the Board.
 - 7. Must appear for a personal interview in the office of the Mississippi State
 Board of Medical Licensure and successfully pass the Jurisprudence
 Examination as administered by the Board.
- E. Pursuant to Section 73-25-23, Mississippi Code (1972) Annotated, a limited institutional license must be renewed annually, after such review as the State Board of Medical Licensure considers necessary. A graduate of a foreign medical school so licensed may hold such limited institutional license no longer than five (5) years; provided, however, that any graduate of a foreign medical school so licensed and employed by any state institution on January 1, 1981, shall not be subject to the five-year limitation created by statute. Based upon the above law:
 - 1. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution on January 1, 1981, shall be renewable annually based upon the favorable recommendation of the director of the institution by which the licensee is employed.
 - 2. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution from January 2, 1981, through June 30, 1983, shall be renewable annually for five years, beginning July 1, 1983, based upon the favorable recommendation of the

director of the institution by which the licensee is employed.

- 3. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution on and after July 1, 1983, shall be renewable annually based upon the favorable recommendation of the director of the institution by which the licensee is employed. A graduate of a foreign medical school so licensed may hold such limited institutional license no longer than five (5) years.
- F. Since a limited institutional license is issued to a graduate of a foreign medical school for employment to practice medicine in a particular Mississippi state-supported institution, or institutions located in the same county, such limited institutional license shall become void immediately upon termination of employment of the licensee at the institution, or institutions, at which practice is authorized under the license.
- G. An annual renewal fee shall be prescribed by the Board.

Amended November 19, 1998.



MISSISSIPPI SECRETARY OF STATE

Oral Proceeding:

NOTICE OF PROPOSED RULE ADOPTION

COPY

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Persons may present their views on the proposed rule by addressing written comments to the agency at the above address. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent.

This rule is proposed as a Final Rule, and/or a Temporary Rule (Check one or both boxers as applicable.)

Check one box below:

An oral proceeding is scheduled on this rule on Date:

Place:

If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at the above address at least _____ day(s) prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent.

An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent.

Time:

Economic Impact Statement: Check one box below:

The agency has determined that an economic impact statement is not required for this rule, or

The concise summary of the economic impact statement required is attached.

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Date Rule Proposed: March 8, 2007

Proposed Effective Date of Rule: 30 days from final filing.

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman Division Director



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The changes in this regulation reflect an attempt to simplify and update current language.

Any comments concerning the proposed regulation may be sent to the following address:

VI. LICENSURE BY EXAMINATION - PODIATRIC MEDICINE

- A. To qualify for admission by examination, an individual shall meet the following requirements, provided that the Board may admit any individual to the examination while reserving its right to deny licensure if that individual fails to meet all requirements for licensure subsequent to success or completion of the examination:
 - 1. Applicant must satisfy the Board that he is at least twenty-one (21) years of age and of good moral character.
 - 2. Applicant must have had at least four (4) years of high school and be graduate of same; he shall have at least one (1) year pre-podiatry college education.
 - 3. Present a diploma from a college of podiatric medicine recognized by the Board as being in good standing, subject to the following conditions:
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. No college of podiatry or chiropody shall be accredited by the Board as a college of good standing which does not require for graduation a course of study of at least four (4) years (eight and one-half [8½] months each) and be recognized by the Council on Education of the American Podiatry Association.
 - 4. Present certified copy of birth certificate or valid passport.
 - Must successfully take an examination for podiatrists which shall be held concurrently with the regular examinations of the Board given in June and December. The applicant shall be examined in the following subjects: anatomy, histology, physiology, chemistry, pharmacy, materia medica, therapeutics, bacteriology, pathology, surgery, dermatology, neurology, physical therapy, diagnosis and roentgenology, orthopedics, chiropody and chiropodial surgery, limited in their scope to the treatment of the human foot and leg, and if found qualified shall receive a license. The minimum of requirements for license shall be a general average of seventy-five percent (75%) of all the subjects involved, provided that a grade of not less than sixty percent (60%) be made on any one (1) subject or branch given in the examination held. However, applicants are encouraged to take the examinations given by the National Board of Podiatry Examiners.

- 6. Must submit complete an application for podiatry license on a form supplied by the Board, completed in every detail and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph (wallet size/passport type) attached. A Polaroid or informal snap shot picture will not be accepted.
- 7. Submit fee prescribed by the Board.
- 8. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.



NOTICE OF PROPOSED RULE ADOPTION



MISSISSIPPI SECRETARY OF STATE

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Specific Legal Authority authorizing the promulgation of Mississippi State Board of Medical Rule: (Insert citation to state or federal statute, or rule Section 73-43-11 Licensure c/o Rhonda Freeman Reference to Rules repealed, amended or suspended by the 1867 Crane Ridge Drive, Suite 200-B Proposed Rule: { Insert citation to specific rule(s) repealed, Jackson, MS 39216 amended or suspended VII. Licensure by Reciprocity or Endoresment Podiatric Medicine (601) 987-3079 rhonda@msbml.state.ms.us Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: {Insert here} The changes in this regulation reflect an attempt to simplify and update current language. This rule is proposed as a Final Rule, and/or a Temporary Rule (Check one or both boxers as applicable.) Persons may present their views on the proposed rule by addressing written comments to the agency at the above address. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Oral Proceeding:** Check one box below: An oral proceeding is scheduled on this rule on Date: Time: Place: If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at the above address at least _____ day(s) prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Economic Impact Statement:** Check one box below: The agency has determined that an economic impact statement is not required for this rule, or The concise summary of the economic impact statement required is attached. The entire text of the Proposed Rule including the text of any rule being amended or changed is attached. Proposed Effective Date of Rule: 30 days from final filing. Date Rule Proposed: March 8, 2007

Signature and Title of Person Submitting Rule for Filing

leamon

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman Division Director



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The changes in this regulation reflect an attempt to simplify and update current language.

Any comments concerning the proposed regulation may be sent to the following address:

VII. LICENSURE BY RECIPROCITY OR ENDORSEMENT - PODIATRIC MEDICINE

- A. The Board may grant a license to practice podiatric medicine without further examination to a graduate in podiatric medicine who holds a valid, active license to practice podiatric medicine in another state, provided the requirements in said state are equal to those required by this Board and the other state extends the same reciprocal privileges to this state.
- B. If the original license of an applicant was obtained by state board examination, the applicant must have application certified by the state board where original license was obtained by written examination submit a certified copy of the examination directly to the Board.
- C. The Board may affiliate with and recognize for the purpose of waiving examination and may grant licenses to Diplomats of the National Board of Podiatric Examiners. If a Diplomat of the National Board of Podiatric Examiners, the applicant must obtain have certification of endorsement from that Board-and submitted directly to the Board-the same with application.
- D. In addition to the above requirements for licensure by reciprocity and/or endorsement, an individual shall meet the following requirements:
 - 1. Applicant must be twenty-one (21) years of age, and of good moral character.
 - Applicant must have had at least four (4) years high school and be graduate of same; he shall have at least one (1) year pre-podiatry college education.
 - 3. Present a diploma from a college of podiatric medicine recognized by the Board as being in good standing, subject to the following conditions.
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. No college of podiatry or chiropody shall be accredited by the Board as a college of good standing which does not require for graduation a course of study of at least four (4) years (eight and one-half [8½] months each) and be recognized by the Council on Education of the American Podiatry Association.
 - 4. Present certified copy of birth certificate or valid passport.

- 5. Must submit complete an application for medical license on a form supplied by the Board, completed in every detail and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot picture will not be accepted.
- 6. Submit fee prescribed by the Board.
- 7. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- 8. Must present proof of completion of (1) one year of APMA-approved postgraduate training in the U.S. or Canada.



NOTICE OF PROPOSED RULE ADOPTION



STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Specific Legal Authority authorizing the promulgation of Mississippi State Board of Medical Rule: (Insert citation to state or federal statute, or Licensure rule Section 73-43-17 c/o Rhonda Freeman Reference to Rules repealed, amended or suspended by the 1867 Crane Ridge Drive, Suite 200-B Proposed Rule: [Insert citation to specific rule(s) repealed. Jackson, MS 39216 amended or suspended IX. Subversion of Licensing Examination Process (601) 987-3079 rhonda@msbml.state.ms.us Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: {Insert here} The Board is rescinding this regulation based on it being antiquated. This rule is proposed as a [7] Final Rule, and/or a Temporary Rule (Check one or both boxers as applicable.) Persons may present their views on the proposed rule by addressing written comments to the agency at the above address. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Oral Proceeding:** Check one box below: An oral proceeding is scheduled on this rule on Date: Time: Place: If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at the above address at least _____ day(s) prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Economic Impact Statement:** Check one box below: The agency has determined that an economic impact statement is not required for this rule, or The concise summary of the economic impact statement required is attached. The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Rhonda Freeman Division Director

Date Rule Proposed: March 8, 2007

Signature and Title of Person Submitting Rule for Filing

neamo

SOS FORM APA 001 Effective Date 07/29/2005

Proposed Effective Date of Rule: 30 days from final filing.



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The Board is rescinding this regulation based on it being antiquated.

Any comments concerning the proposed regulation may be sent to the following address:

IX. SUBVERSION OF LICENSING EXAMINATION PROCESS

- An applicant examinee who engages or attempts to engage in conduct which subverts or undermines the integrity of the examination process shall be subject to the sanctions specified in Paragraphs F, G and H of this subpart.
- B. Conduct which subverts or undermines the integrity of the licensing examination process in violation of Section 73-25-29(f), Mississippi Code (1972) Annotated, shall be deemed to include:
 - 1. refusing or failing to fully and promptly comply with any rules, procedures, instructions, directions or requests made or prescribed by the Chief Proctor or an Assistant Proctor;
 - 2. removing from the examination room or rooms any of the examination materials;
 - 3. reproducing or reconstructing, by copying, duplication, written notes or electronic recording, any portion of the licensing examination;
 - selling, distributing, buying, receiving, obtaining or having unauthorized possession of a future, current or previously administered licensing examination;
 - communicating in any manner with any other examinee or any other person during the administration of the examination;
 - 6. copying answers from another examinee or permitting one's answers to be copied by another examinee during the administration of the examination;
 - 7. having in one's possession during the administration of the examination any materials or objects other than the examination materials distributed, including, without limitation, any books, notes, recording devices, or other written, printed or recorded materials or data of any kind;
 - 8. impersonating an examinee by appearing for and as an applicant and taking the examination for, as and in the name of the applicant other than himself:
 - 9. permitting another person to appear for and take the examination on one's behalf and in one's name; or
 - 10. engaging in any conduct which disrupts the examination or the taking thereof by other examinees.

- C. When, during the administration of the examination, the Chief Proctor or any Assistant Proctor has reasonable cause to believe that an applicant-examinee is engaging or attempting to engage, or has engaged or attempted to engage, in conduct which subverts or undermines the integrity of the examination process, the Chief Proctor shall take such action as he deems necessary or appropriate to terminate such conduct and shall report such conduct in writing to the Board.
- D. In the event of suspected conduct described by Paragraphs IX, B 5 or 6, the subject applicant examinee shall be permitted to complete the examination, but shall be removed at the earliest practical opportunity to a location precluding such conduct.
- E. When the Board, upon information provided by the Chief Proctor, has probable cause to believe that an applicant has engaged in or attempted to engage in conduct which subverts or undermines the integrity of the examination process, the board shall so advise the applicant in writing, setting forth the grounds for its finding of probable cause, specifying the sanctions which are mandated or permitted for such conduct by Paragraphs F, G and H of this subpart and provide the applicant with an opportunity for hearing pursuant to Sections 73-25-27 or 73-27-13, Mississippi Code (1972) Annotated. Unless waived by the applicant, the Board's findings of fact, its conclusions of law under these rules, and its decision as to the sanctions, if any, to be imposed shall be made in writing and served upon the applicant.
- F. An applicant who is found by the Board, prior to the administration of the examination, to have engaged in conduct or to have attempted to engage in conduct which subverts or undermines the integrity of the examination process may be permanently disqualified from taking the examination and for medical licensure in the State of Mississippi.
- G. An applicant examinee who is found by the Board to have engaged or to have attempted to engage in conduct which subverts or undermines the integrity of the examination process shall be deemed to have failed the examination. Such failure shall be recorded in the official records of the Board.
- H. In addition to the sanctions permitted or mandated by Subsections F and G of this section, as to an applicant examinee found by the Board to have engaged in or to have attempted to engage in conduct which subverts or undermines the integrity of the examining process, the Board may:
 - 1. revoke, suspend or impose probationary conditions on any license or permit issued to such applicant;
 - 2. disqualify the applicant, permanently or for a specified period of time, from eligibility for licensure in the State of Mississippi;

3. disqualify the applicant, permanently or for a specified number of subsequent administrations of the examination, from eligibility for examination.



NOTICE OF PROPOSED RULE ADOPTION



MISSISSIPPI SECRETARY OF STATE

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Mississippi State Board of Medi Licensure	Rule: {Insert citation to state or federal statute, or rule Section 73-43-11
c/o Rhonda Freeman	Tuic
1867 Crane Ridge Drive, Suite : Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended X. Temporary Licensure
(601) 987-3079 rhonda@msbml.state.ms.us	
Explanation of the Purpose of the Propo The changes in this regulation reflect	osed Rule and the reason(s) for proposing the rule: {Insert here} an attempt to simplify and update current language.
This rule is proposed as a Final Rule, an	nd/or a Temporary Rule (Check one or both boxers as applicable.)
address. Persons making comments sho	proposed rule by addressing written comments to the agency at the above uld include their name and address, as well as other contact information, and e, address and telephone number of the party or parties you represent.
Oral Proceeding: Check	one box below:
An oral proceeding is schedule Place:	d on this rule on Date: Time:
the above address at least c include your name, address, telep	nt evidence at the oral proceeding you must make a written request to the agency at lay(s) prior to the proceeding to be placed on the agenda. The request should hone number as well as other contact information; and if you are an agent or lephone number of the party or parties you represent.
will be held if a written request for persons. The written request show (20) days after the filing of this no	duled on this rule. Where an oral proceeding is not scheduled, an oral proceeding r an oral proceeding is submitted by a political subdivision, an agency or ten (10) ald be submitted to the agency contact person at the above address within twenty price of proposed rule adoption and should include the name, address and telephone he request; and if you are an agent or attorney, the name, address and telephone represent.
Economic Impact Statement: Check	one box below:
▼The agency has determined that	t an economic impact statement is not required for this rule, or
The concise summary of the ec	onomic impact statement required is attached:
The entire text of the Proposed Rule includ	ing the text of any rule being amended or changed is attached.
Date Rule Proposed: March 8, 2007	Proposed Effective Date of Rule: 30 days from final filing.

Rhonda Freeman Division Director

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The changes in this regulation reflect an attempt to simplify and update current language.

Any comments concerning the proposed regulation may be sent to the following address:

X. TEMPORARY LICENSURE

- A. Mississippi temporary medical licenses may be issued to applicants for licensure in Mississippi only after completion of an application for licensure by (a) examination; (b) reciprocity with another state; or (c) endorsement of the National Board of Medical Examiners, National Board of Examiners for Osteopathic Physicians and Surgeons, or the Medical Council of Canada (LMCC) under the following conditions:
 - 1. A restricted temporary medical license may be issued upon proper completion of an application for medical licensure by examination or by reciprocity/ endorsement to an applicant who otherwise meets all requirements for licensure except completion of the postgraduate training requirements provided in Sections II, A3 and II, A4 above and successful completion of Step 3 of USMLE as provided in Section IV, B3 above. Such restricted temporary license shall entitle the physician to practice medicine only within the confines of an ACGME or AOA approved postgraduate training program in this State and may be renewed annually for the duration of the internship, residency, or fellowship program post graduate training for a period not to exceed five (5) years.
 - 2. An unrestricted temporary medical license may be issued in an exceptional case to an applicant seeking licensure by reciprocity or by endorsement. Such an unrestricted temporary license shall remain valid only for a period of time sufficient for applicant to submit required documents and credentials to complete an application for permanent licensure, but in no instance to exceed 30 days.
- B. The State Board of Medical Licensure may issue a temporary license to practice medicine for a period not to exceed 90 days at a youth camp licensed by the State Department of Health to any nonresident physician who is not licensed to practice medicine in this state or to any resident physician who is retired from the active practice of medicine in this state while serving as a volunteer at such camp.
 - 1. Nonresident Physician
 - a. must have favorable references from two physicians with whom the applicant has worked or trained within the last year;
 - must have <u>written</u> certification in <u>writing</u> from the medical licensing authority in the state in which the applicant resides that he holds a currently valid license to practice medicine in that state; and

- c. must submit fee prescribed by the Board.
- 2. Retired Resident Physician
 - a. must be in good standing with the Mississippi State Board of Medical Licensure, and
 - b. must submit fee as prescribed by the Board.
- C. The State Board of Medical Licensure may issue a temporary license to practice medicine to physicians who have been admitted for treatment in a drug and/or alcohol treatment program approved by the Board, or who are enrolled in the fellowship of addictionology in the Mississippi State Medical Association Impaired Professionals Program; provided that, a nonresident applicant shall hold a valid (unrestricted) license to practice medicine in another state and the medical licensing authority of that state shall certify to the Board of Medical Licensure in writing that such license is in good standing.
 - 1. A temporary license issued under this subsection shall be valid for a period of ninety (90) days but may be renewed every ninety (90) days for the duration of the fellowship or treatment program. If the applicant discontinues treatment or leaves the fellowship program the temporary license shall automatically become null and void. The Board may rescind or extend this temporary license for cause.
 - 2. A temporary license issued to a physician under this subsection shall be limited to the out-patient phase of the treatment program or the time necessary to complete the fellowship of addictionology. The physician to whom the license is issued may administer treatment and care within the scope of the drug and/or alcohol treatment program or fellowship in an institutional setting and shall not otherwise practice in this state. A physician licensed under this subsection shall not apply to the U.S. Drug Enforcement Administration for a controlled substances registration certificate and must be under the supervision of another physician holding a valid and unrestricted license in this state.
 - 3. A physician who has had his permanent license to practice in this state revoked or suspended by the Board due to habitual personal use of intoxicating liquors or narcotic drugs, or any other drug having addiction-forming or addiction-sustaining liability, may be granted a temporary license pursuant to this subsection provided the temporary license is not in conflict with the prior disciplinary order of the Board rendered against the physician.
 - 4. The applicant applying for a ninety-day temporary license to practice

while in treatment in an approved drug and/or alcohol treatment program or while enrolled in the fellowship of addictionology shall pay a fee prescribed by the Board (not to exceed \$50.00) to the Board. No additional fee shall be charged for an extension.

D. Mississippi temporary medical licenses are issued under the condition that the licensee shall not apply to the U.S. Drug Enforcement Administration for a Controlled Substances Registration Certificate.



MISSISSIPPI SECRETARY OF STATE

NOTICE OF PROPOSED RULE ADOPTION



STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Specific Legal Authority authorizing the promulgation of Mississippi State Board of Medical Rule: {Insert citation to state or federal statute, or rule Section 73-43-11 Licensure c/o Rhonda Freeman Reference to Rules repealed, amended or suspended by the 1867 Crane Ridge Drive, Suite 200-B Proposed Rule: { Insert citation to specific rule(s) repealed, Jackson, MS 39216 amended or suspended XI. Duty to Notify Board of Change of Address. (601) 987-3079 rhonda@msbml.state.ms.us Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: {Insert here} The changes in this regulation reflect an attempt to simplify and update current language. This rule is proposed as a Final Rule, and/or a Temporary Rule (Check one or both boxers as applicable.) Persons may present their views on the proposed rule by addressing written comments to the agency at the above address. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. Oral Proceeding: Check one box below: Time: An oral proceeding is scheduled on this rule on Date: Place: If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at the above address at least _____ day(s) prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Economic Impact Statement:** Check one box below: The agency has determined that an economic impact statement is not required for this rule, or The concise summary of the economic impact statement required is attached. The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Rhonda Freeman Division Director

Date Rule Proposed: March 8, 2007

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Proposed Effective Date of Rule: 30 days from final filing.



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The changes in this regulation reflect an attempt to simplify and update current language.

Any comments concerning the proposed regulation may be sent to the following address:

XI. DUTY TO NOTIFY BOARD OF CHANGE OF ADDRESS

Any physician, osteopathic physician or podiatrist who is licensed or receives a license to practice medicine in this state and thereafter moves his medical practice to a location different from that noted in the application upon which he received a license changes his or her practice location, shall immediately notify the Board in writing of the change of location of his intended practice. Failure to notify within 30 days could result in disciplinary action.



NOTICE OF PROPOSED RULE ADOPTION



MISSISSIPPI SECRETARY OF STATE

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Mississippi State Board of Med Licensure	Kule:	(Insert citation to state or federal statute, or ection 73-43-11
c/o Rhonda Freeman	Tuic	
1867 Crane Ridge Drive, Suite Jackson, MS 39216	Propos	ence to Rules repealed, amended or suspended by the sed Rule: { Insert citation to specific rule(s) repealed, ed or suspended XII. Release of Medical Records
(601) 987-3079		}
rhonda@msbml.state.ms.us		
	et an attempt to simplify and	for proposing the rule: {Insert here} d update current language. Additions to
regulation are based on Mississippi	Code 11-1-52.	
· .		
This rule is proposed as a Final Rule,	and/or a 🏻 Temporary Rule	(Check one or both boxers as applicable.)
		ng written comments to the agency at the above d address, as well as other contact information, and
		number of the party or parties you represent.
Oral Proceeding: Chec	ck one box below:	
An oral proceeding is schedu Place:	iled on this rule on Date:	Time:
the above address at least	day(s) prior to the proceeding the phone number as well as other	reding you must make a written request to the agency at g to be placed on the agenda. The request should er contact information; and if you are an agent or y or parties you represent.
will be held if a written request a persons. The written request she (20) days after the filing of this	for an oral proceeding is submould be submitted to the agent notice of proposed rule adoption the request; and if you are an	n oral proceeding is not scheduled, an oral proceeding nitted by a political subdivision, an agency or ten (10) cy contact person at the above address within twenty ion and should include the name, address and telephone agent or attorney, the name, address and telephone
Economic Impact Statement: Chec	k one box below:	
☑The agency has determined the	hat an economic impact states	nent is not required for this rule, or
The concise summary of the	economic impact statement re	quired is attached.
The entire text of the Proposed Rule inclu	uding the text of any rule bein	g amended or changed is attached.
Date Rule Proposed: March 8 200	7 Propos	ed Effective Date of Rule: 30 days from final filing

Rhonda Freeman Division Director

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The changes in this regulation reflect an attempt to simplify and update current language. Additions to this regulation are based on Mississippi Code 11-1-52.

Any comments concerning the proposed regulation may be sent to the following address:

XII. RELEASE OF MEDICAL RECORDS

A. DEFINITIONS

For the purpose of Article XII only, the following terms have the meanings indicated:

- 1. "Physician" means any person licensed to practice medicine, osteopathic medicine or podiatric medicine in the State of Mississippi.
- 2. "Medical Records" means all records and/or documents relating to the treatment of a patient, including, but not limited to, family histories, medical histories, report of clinical findings and diagnosis, laboratory test results, X-rays, reports of examination and/or evaluation and any hospital admission/discharge records which the physician may have.
- 3. "Patient" means a natural person who receives or should have received health care from a licensed physician, under a contract, express or implied, whether or not the physician is compensated for services rendered.
- 4. "Legal Representative" means an attorney, guardian, custodian, or in the case of a deceased patient, the executor/administrator of the estate, surviving spouse, heirs and/or devisees.

B. MEDICAL RECORDS - PROPERTY OF PHYSICIAN/CLINIC

Medical records, as defined herein, are and shall remain the property of the physician or physicians, in whose clinic or facility said records are maintained, subject, however, to reasonable access to the information contained in said records as set forth herein below.

C. TRANSFER OF PATIENT RECORDS TO ANOTHER PHYSICIAN

A physician who formerly treated a patient shall not refuse for any reason to make the information contained in his medical records of that patient available upon request by the patient, or legal representative of the patient, to another physician presently treating the patient. The physician has a right to request a written release from the patient or legal representative of the patient, authorizing the transfer prior to transfer of said documents. Upon receipt of the written release and authorization, the physician must tender a copy of said documents to the other physician within a reasonable period of time. Transfer of said documents shall not be withheld because of an unpaid bill for medical services, but the physician is entitled to reasonable compensation paid in advance for any copy expenses as provided at Paragraph F below.

D. RELEASE OF PATIENT RECORDS TO PATIENT

A physician shall, upon request of the patient, patient's legal representative, or other person holding a written release and authorization (hereinafter, "authorized requesting party"), provide a copy of a patient's medical record to the authorized requesting party; provided, however, where release of psychiatric/psychological records directly to a patient would be deemed harmful to the patient's mental health or well-being, the physician shall not be obligated to release the records directly to the patient, but shall, upon request, release the records to the patient's legal representative. The physician has a right to request a written authorization prior to release of the records. Upon receipt of the written release and authorization, the physician must tender a copy of the records to the authorized requesting party within a reasonable period of time. Transfer of the records shall not be withheld because of an unpaid bill for medical services, but the physician is entitled to reasonable compensation paid in advance for any copy expenses as provided at Paragraph F below.

E. NARRATIVE SUMMARY OF MEDICAL RECORD

In some cases, a requesting party may wish to obtain a narrative summary of the medical record, in lieu of, or in addition to a copy of the medical record. Upon such a request, the physician may provide the narrative summary. The physician may charge a reasonable fee for the time devoted to preparation of the medical record narrative summary.

F. DUPLICATION AND ADMINISTRATIVE FEES

Licensees have a right to be reimbursed for duplication and other expenses relating to requests for medical records. The copying charge is set by Senate Bill 2004 (Statute number to be assigned) of the 2004 First Extraordinary Session, effective July 1, 2004, Mississippi Code Annotated, Section 11-1-52, as follows: Any medical provider or hospital or nursing home or other medical facility shall charge no more than the following amounts to patients or their representatives for photocopying any patient's records: Twenty Dollars (\$20.00) for pages one (1) through twenty (20); One Dollar (\$1.00) per page for the next eighty (80) pages; Fifty Cents (50¢) per page for all pages thereafter. Ten percent (10%) of the total charge may be added for postage and handling. Fifteen Dollars (\$15.00) may be recovered by the medical provider or hospital or nursing home or other medical facility for retrieving medical records in archives at a location off the premises where the facility/office is located. In addition, the actual costs of reproducing xrays or other special records may be included. The duplication and administrative fees authorized herein are not intended to include or restrict any fees charged in relation to expert testimony.

A licensee shall only charge normal, reasonable and customary charges for a deposition related to a patient that the physician is treating or has treated.

Any licensee shall charge no more than Twenty-five Dollars (\$25.00) for executing a medical record affidavit, when the affidavit is requested by the patient or the patient's representative.

G. EXCLUSION

Federal or state agencies providing benefit programs are excluded from the above stated fees. Records that are requested by state or federal agencies for said benefit programs shall pay an acceptable rate as established by the requesting federal or state agency.

H. VIOLATION OF REGULATIONS

A refusal by a physician to release patient records as enumerated above shall constitute unprofessional conduct, dishonorable or unethical conduct likely to deceive, defraud or harm the public in violation of Mississippi Code (1972) Annotated, Section 73-25-29(8)(d), as amended.

Amended March 16, 1995. Amended July 18, 2002. Amended September 18, 2003. Amended September 16, 2004.



NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure



Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216	Specific Legal Authority authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule Section 73-43-11 } Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended XVII. Rules of Procedure
(601) 987-3079	}
rhonda@msbml.state.ms.us Explanation of the Purpose of the Proposed Rule and the	process (c) for proposing the rule: (Insert here)
The changes in this regulation reflect an attempt to sin	mplify and update current language. Due to the Board
not employing a medical consultant at this time, this re Executive Director.	aulation is being amended to reflect the duties of the
This rule is proposed as a Final Rule, and/or a Tempor	rary Rule (Check one or both boxers as applicable.)
Persons may present their views on the proposed rule by address. Persons making comments should include their if you are an agent or attorney, the name, address and telegraphs.	name and address, as well as other contact information, and
Oral Proceeding: Check one box below:	
An oral proceeding is scheduled on this rule on I Place:	Date: Time:
the above address at least day(s) prior to the	oral proceeding you must make a written request to the agency at proceeding to be placed on the agenda. The request should well as other contact information; and if you are an agent or of the party or parties you represent.
will be held if a written request for an oral proceeding persons. The written request should be submitted to (20) days after the filing of this notice of proposed recommendation.	Where an oral proceeding is not scheduled, an oral proceeding ng is submitted by a political subdivision, an agency or ten (10) to the agency contact person at the above address within twenty rule adoption and should include the name, address and telephone you are an agent or attorney, the name, address and telephone
Economic Impact Statement: Check one box below:	
☑The agency has determined that an economic imp	pact statement is not required for this rule, or
The concise summary of the economic impact sta	atement required is attached.
The entire text of the Proposed Pule including the text of any	rula baing amandad or abangad is attached

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Date Rule Proposed: March 8, 2007

Proposed Effective Date of Rule: 30 days from final filing.

Signature and Title of Person Submitting Rule for Filing

> SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman Division Director

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The changes in this regulation reflect an attempt to simplify and update current language. Due to the Board not employing a medical consultant at this time, this regulation is being amended to reflect the duties of the Executive Director.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

XVII. RULES OF PROCEDURE

AUTHORITY:

CHAPTER 41, TITLE 73, MISSISSIPPI CODE (1972)

ANNOTATED, AS AMENDED

A. SCOPE

The following Rules of Procedure apply to all individuals licensed to practice medicine, osteopathic medicine and podiatric medicine in the State of Mississippi.

B. DEFINITIONS

For the purpose of Article XVII only, the following terms have the meanings indicated:

- 1. "Board" means the Mississippi State Board of Medical Licensure.
- 2. "Mississippi Medical Practice Act" means Sections 73-25-1, et seq., pertaining to licensure and discipline of individuals practicing medicine or osteopathic medicine, and Sections 73-27-1, et seq., pertaining to licensure and discipline of individuals practicing podiatric medicine, or any amendments or additions to said statutes which may hereinafter be made.
- 3. "Licensee" or "Physician" means any individual licensed to practice medicine, osteopathic medicine or podiatric medicine in the State of Mississippi.
- 4. "Respondent" means a physician against whom a disciplinary proceeding has been initiated.
- 5. "Complaint Counsel" means the attorney retained by the Board to prosecute physicians pursuant to the Mississippi Medical Practice Act.
- 6. <u>"Executive Director" means the chief executive officer or other designee</u> employed by the Board to run the day to day operations of the Board.
- 7. Masculine terms, when used in the following Rules of Procedure, shall also be deemed to include the feminine.

C. COMPLAINT/INVESTIGATION

1. An investigation of alleged violation(s) of the Mississippi Medical Practice Act may be initiated by the Investigative Staff of the Board either:

- a. in response to a written complaint or adverse information duly received by the Board, or
- b. based on information independently developed by the Investigative Staff of the Board.
- 2. Upon receipt of information indicating a possible violation of the Mississippi Medical Practice Act, the Investigative Staff with advice and consultation from the Board's Medical Consultant Executive Director, shall make an initial determination as to whether the information justifies further investigation. A case may be dismissed without further investigation based on a determination of either:
 - a. lack of jurisdiction, or
 - b. no violation of the Mississippi Medical Practice Act.
- During an investigation, the Investigative Staff may interview and take the statements of witnesses and licensees. During an interview of a licensee, the Investigative Staff shall inform the licensee of the nature and purpose for the investigation and, if requested, provide licensee with a copy of any written complaint which may have prompted the investigation, provided, that if anonymity has been requested a complainant has requested anonymity, all identifying data of the complainant shall be removed therefrom.

D. INITIATION OF DISCIPLINARY ACTION

1. Upon conclusion of an investigation, the Investigative Staff with advice and consultation from the Board's Medical Consultant shall make a determination as to the existence of proper jurisdiction and violation of the Mississippi Medical Practice Act. The Investigative Staff shall present the results of the investigation to the Board's President, who may then authorize the issuance of a summons and affidavit, naming the accused licensee as a respondent in the proceedings. The Board's President, in his discretion, may delegate the aforementioned authority to another member of the Board or the Board's Medical Consultant.

Upon conclusion of an investigation, the results shall be presented to the Board's Executive Director to determine if there is proper jurisdiction and violation of the Mississippi Medical Practice Act. The Board's Executive Director may then authorize the issuance of a summons and affidavit, naming the accused licensee as a respondent in the proceedings.

a. The summons, signed by the Board's Executive Officer Director, shall set forth:

- (1) the style of the action,
- (2) the name and address of the accused respondent,
- (3) the address, date, and time at which the respondent is summoned to appear before the Board,
- (4) the specific sections of the Mississippi Medical Practice Act which the respondent is charged with violating, and
- (5) the actions which the Board has the authority to take, including placing the physician on probation, the terms of which may be set by the Board, suspending his right to practice medicine for a time deemed proper by the Board, revoking his license, or taking any other action in relation to his license as the Board may deem proper under the circumstances.
- b. The affidavit, signed by the investigating officer, shall set forth, in numbered paragraphs, a concise statement of the material facts and allegations to be proven, including:
 - (1) facts giving rise to the Board's jurisdiction,
 - (2) facts constituting legal cause for administrative action against the respondent, and
 - (3) the statutory provisions alleged to have been violated by the respondent.
- 2. The summons and affidavit shall be delivered to the respondent, either through registered certified mail or by personal service.
- 3. The summons shall name a date for hearing not less than thirty (30) days or more than sixty (60) days from the date of the mailing or service of the summons.
- 4. The summons and affidavit shall bear the name, address, and telephone number of Complaint Counsel.
- 5. All pleadings, motions or other papers permitted or required to be filed with the Board in connection with a pending disciplinary proceeding shall be filed by personal delivery at or by mail to the office of the Board. A copy of all papers filed with the Board shall be delivered by registered

<u>certified</u> mail or personally served on opposing counsel of record.

- 6. All pleadings, motions or other papers shall be submitted on plain white, letter size (8 ½ x 11") bond, with margins of at least one inch on all sides and text double spaced except as to quotations and other matter customarily single spaced; shall bear the style and caption of the case as it appears on the summons and shall include the certificate of the attorney or person making the filing that service of a copy of the same has been effected in the manner prescribed by Subsection 5 above.
- 7. The Board may refuse to accept for filing any pleading, motion or other paper not in conformity with the requirements of this rule.
- 8. Within fifteen (15) days of service of the summons and affidavit, or such longer time as the Board, on motion of the respondent may permit, the respondent shall answer the summons/affidavit, admitting or denying each of the separate allegations of fact and of law set forth therein. Any matters admitted by the respondent shall be deemed proven and established for purposes of adjudication. Any matters or allegations not specifically denied are admitted for the purposes of the hearing. In the event that respondent does not file a response to the affidavit, all matters asserted therein shall be deemed admitted.
- 9. Any respondent may be represented before the Board by an attorney at law who:
 - a. is admitted to practice in the State of Mississippi, or
 - b. has been given express permission by the Board to appear on behalf of respondent.
- 10. Upon service of a summons and affidavit pursuant to Subsection 2 above, a respondent who is represented by legal counsel with respect to the proceeding shall personally or through such counsel, give written notice to the Board of the name, address and telephone number of such counsel. Following receipt of proper notice of representation, all further notices, affidavits, subpoenas, orders or other process related to the proceeding shall be served on respondent through the designated counsel of record.

E. SUBPOENAS

1. For the purpose of disciplinary hearings, the Board acting by and through its Executive <u>Director</u>, may subpoen a persons and papers on its own behalf and on behalf of a respondent.

- 2. Before the Board shall issue on behalf of a respondent any subpoena for persons or papers, the respondent shall:
 - a. File with the Board a written request for the issuance of said subpoenas, identifying with certainty the identity and address of all individuals to be subpoenaed, along with a concise description of the records to be subpoenaed with the identity and address of the custodian of said records.
 - b. All requests for the issuance of subpoenas shall be filed with the Board sufficiently distant in time to allow for the preparation and mailing of said subpoenas at least fifteen (15) days before the scheduled hearing date. The Board shall not be responsible for the timely receipt of subpoenas issued after the aforementioned deadline.
- All subpoenas issued by the Board either on its own behalf or on behalf of a respondent shall be effected by either personal service of process or certified mail.
- 4. Any subpoena issued by the Board shall be returnable within 10 days to either the Board or other location as specified in the subpoena.
- 5. No subpoena shall be issued for the purpose of discovery, the means and manner of discovery being set forth at Paragraph F below.
- 6. The Board shall charge a respondent a reasonable fee, not to exceed \$25.00 per subpoena, for preparation and mailing of subpoenas.

F. DISCOVERY

- 1. Upon written request by a respondent or his counsel, Complaint Counsel of the Board shall disclose and permit respondent or his counsel to inspect, copy or photograph the following information and material, which is in the possession, custody, or control of the Board, or the existence of which is known to the Complaint Counsel:
 - a. Names and addresses of all witnesses proposed to be called in Complaint Counsel's case in chief, together with a copy of the contents of any statement, written, recorded, or otherwise preserved, of each such witness.
 - b. Copy of any written or recorded statement of respondent and the substance of any oral statement made by the respondent.

- Copy of any criminal record of a respondent, if proposed to be used.
- d. Any written reports or statements of experts, if proposed to be offered as evidence in connection with the particular case.
- e. All records, documents, physical evidence or photographs which may be offered as evidence in Complaint Counsel's case in chief.
- f. Any exculpatory material concerning the respondent. The Board shall charge a respondent a reasonable fee, not to exceed 50¢ per copy, payable in advance of delivery of copied documents.
- 2. The Board may deny disclosure authorized by Subsection 1 if it finds that there is a substantial risk to any person of physical harm, intimidation, bribery, economic reprisals, or unnecessary embarrassment, resulting from such disclosure, which outweighs any usefulness of the disclosure to respondent or his counsel.
- 3. If respondent requests discovery under this rule, respondent shall, promptly disclose to Complaint Counsel and permit him to inspect, copy or photograph, the following information and material which is in the possession, custody, or control of respondent or his counsel, or the existence of which is known to respondent or his counsel:
 - a. Names and addresses of all witnesses proposed to be called in Respondent's defense, together with a copy of the contents of any statement, written, recorded, or otherwise preserved, of each such witness.
 - b. All records, documents, physical evidence or photographs which may be offered as evidence in Respondent's defense.
 - c. Any written reports or statements of experts, if proposed to be offered as evidence in connection with the particular case.
- 4. No depositions shall be taken in preparation for matters to be heard before the Mississippi State Board of Medical Licensure.

G. AMENDMENT OF PLEADINGS

 The Complaint Counsel of the Board may amend a summons and affidavit after being duly served upon respondent at any time prior to the scheduled hearing date, provided, the amendment is for the purpose of correcting a clerical error or clarifying facts set forth in the affidavit. A summons/affidavit may be amended to add additional charges or counts provided the amended summons and affidavit is served upon respondent not less than thirty (30) days from the scheduled hearing date or by mutual agreement of the parties.

 A respondent may amend his answer as a matter of course at any time before the answer is due. Otherwise, a respondent may amend his answer only by leave of the Board. Leave shall be freely given when justice so requires.

H. PRE-HEARING MOTIONS

- 1. All pre-hearing motions shall be filed not later than fifteen (15) days prior to the scheduled hearing. Said motion shall be accompanied by a memorandum setting forth a succinct explanation of the grounds on which relief is sought. A motion may be accompanied by an affidavit as necessary to establish facts alleged in support of the motion.
- 2. Within ten (10) days of the filing of any motion, opposing counsel may file a memorandum in opposition to the initial motion.

I. CONTINUANCES

- 1. Hearings shall be held before the full Board at the time and place designated in the summons, unless a continuance is granted for just cause by the Board. A motion for a continuance must be filed with the Board at least fifteen (15) days prior to the scheduled hearing, or upon a showing of good cause, at any time prior to the hearing.
- 2. It must be recognized that the Board consists of nine (9) practicing physicians representing various regions of the State. Unlike the judiciary, Board members are not in the business of conducting hearings, therefore hearings will be held only during regularly scheduled meetings or other date established by order of the Board. Attorneys representing physicians should take this fact into consideration. A scheduled hearing may be continued if the respondent shows substantial, legitimate grounds for continuing the hearing, based on the balance of:
 - a. The right of respondent to a reasonable opportunity to prepare and present a defense, and
 - b. The Board's responsibility to protect the public health, safety and welfare.

- 3. Where the counsel for respondent has a scheduling conflict on the initial hearing date, continuances will be liberally granted. However, Respondent's Counsel must submit written proof of the scheduling conflict. Thereafter, no further continuances will be granted based solely on scheduling conflicts.
- 4. So that counsel for the respondent and Complaint Counsel shall be able to adequately prepare for hearing, any motion for a continuance filed within the time limitations specified at Subsection 1 above, will be immediately considered by the Board's President, who shall have the authority to grant or deny said motion. If granted, the order will be presented to the Board at the scheduled hearing date at which time the order will be formally entered and the rescheduled hearing date set.
- 5. It is the responsibility of the respondent to make a prompt decision as to whether to appear before the Board pro se (without counsel) or retain counsel for this purpose. Unless due to extraordinary circumstances, the Board will <u>not</u> consider as a valid ground for continuance, the Respondent's last minute decision to retain counsel.

J. INFORMAL SETTLEMENT, PRE-HEARING STIPULATIONS, CONSENT ORDERS

- 1. All disciplinary proceedings initiated by the Board shall be brought to a final resolution through one of three means:
 - a. disciplinary hearings before the full Board,
 - b. acceptance by the Board of a mutually agreeable Consent Order in lieu of hearing, or
 - c. dismissal of the case.
- 2. As to disciplinary proceedings duly noticed and docketed for hearing, counsel for respondent and Complaint Counsel may agree, or the Board's President may require, that an Informal Settlement Conference be held for the purpose of possible resolution, simplifying the issues for hearing or promoting stipulations as to facts and proposed evidentiary offerings which will not be disputed at hearing.
- 3. The Informal Settlement Conference shall be conducted by respondent and/or his counsel and the Complaint Counsel. Other parties who may attend include the investigating officer, the Board's medical consultantExecutive Director, or any other party who may contribute to

the conference. Board members shall not participate in the Informal Settlement Conference, other than to approve a Consent Order as hereinafter provided.

- 4. Discovery or exchange of information may be accomplished during the Informal Settlement Conference.
- 5. The Informal Settlement Conference may result in:
 - a. dismissal of the case,
 - b. return of the case for further investigation,
 - c. preparation of a proposed Consent Order as a resolution of the matter, or
 - d. proceed with the scheduled hearing.
- Any action which the Board may take following a full disciplinary hearing 6. may be taken in lieu thereof by Consent Order, duly executed by the respondent. Because of the lengthy dockets before the Board, Informal Settlement Conferences must be held in sufficient time to allow consummation of negotiations of a Consent Order at least ten (10) working days prior to the scheduled hearing date. After the terms of a Consent Order have been prepared, the Board's President Executive Director, shall have the authority to accept, reject or modify the terms of a Consent Order. The Board's President, in his discretion, may delegate the aforementioned authority to another member of the Board or the Board's Medical Consultant. When a mutually acceptable Consent Order has been accepted by the Board's President Executive Director, other Board member or Medical Consultant as herein above provided, it shall be binding on the Board, but not effective until full Board approval. Notwithstanding, it is still the responsibility of the respondent to personally appear before the Board on the scheduled hearing date to answer any questions which the Board may have prior to full Board approval.
- 7. If the parties to the Informal Settlement Conference are unable to reach a mutually agreeable Consent Order and the matter is to proceed to a full Board hearing, the parties <u>shall</u> agree in writing by stipulation, to the following:
 - a. any undisputed claims, facts, testimony, documents or issues,
 - b. evidence to be introduced without objection, and

c. an estimate of the time required for the hearing.

K. FORMAL HEARING

- At a disciplinary hearing, opportunity shall be given to Complaint Counsel
 and respondent to present evidence on all issues of fact and argument on
 all issues of law and policy involved, to call, examine, and cross-examine
 witnesses, and to offer and introduce documentary evidence and exhibits
 as may be required for full and true disclosure of the facts and disposition
 of the matter.
- 2. All testimony and other proceedings shall be recorded by a certified stenographer who shall be retained by the Board.
- During the disciplinary hearing, the Board's President, acting as the presiding officer, or his designee, shall rule on all evidentiary questions, but in his discretion may consult with the entire panel in executive session. At such hearing, the Board may be assisted by the Mississippi Attorney General, or his designee, who shall not have been involved in any way with the case otherwise. The Board's presiding officer may delegate ruling on procedural and evidentiary issues to the Attorney General or his designee.
- 4. In all disciplinary hearings before the Board, the record of the case shall include:
 - a. the summons and affidavit issued,
 - b. the Respondent's answer to the summons and affidavit,
 - c. all pleadings, motions, and rulings issued,
 - d. evidence received or considered at the hearing,
 - e. offers of proof, objections, and rulings thereon,
 - f. the Board's order or other disposition made by the Board.
- 5. Disciplinary hearings before the Board shall be conducted in the following order:
 - a. opening statements,
 - b. Complaint Counsel's case in chief,

- c. respondent's case in chief,
- d. Complaint Counsel's rebuttal,
- e. closing statements.

Questioning of witnesses shall be conducted in the following order:

- a. direct examination,
- b. cross-examination,
- c. redirect examination.
- 6. Upon conclusion of the hearing, the Board shall conduct its deliberations in Executive Session, outside the presence of the parties. The Board shall then render its determination and order, setting forth Findings of Fact, Conclusions of Law and Order. Although the Board's decision may be announced immediately following deliberations, the Board shall be provided adequate time for preparation of the written determination and order. A copy of such determination and order shall be sent by registered certified mail, or served personally upon the respondent. The decision of the Board revoking, suspending or otherwise disciplining respondent shall become final thirty (30) days after so mailed or served unless within said period the respondent appeals the decision to the Chancery Court, as provided by law.

L. REINSTATEMENT OF LICENSE

The procedural requirements enumerated above shall also apply to petition duly filed with the Board seeking reinstatement of a license pursuant to Section 73-25-32, Mississippi Code (1972) Annotated.

M. EFFECTIVE DATE OF REGULATIONS

- 1. The above procedural rules and regulations shall become effective June 19, 1995.
- 2. The above Rules of Procedure are adopted by the Board to implement its authority to investigate alleged violations of the Mississippi Medical Practice Act, conduct hearings on disciplinary matters, and consider petitions for termination of probationary and suspended licenses and restoration of revoked licenses, all as enumerated in Section 73-43-11, Mississippi Code (1972) Annotated.

3. The above Rules of Procedure shall not be interpreted to alter or amend that which is otherwise provided by Mississippi statutory law.



NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure



SOS FORM APA 001

Effective Date 07/29/2005

Mississippi State Board of Medical Licensure	Rule: {Insert citation to state or federal statute, or rule Section 73-43-11
c/o Rhonda Freeman	
1867 Crane Ridge Drive, Suite 200-l Jackson, MS 39216	Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended XXI. CME Requirements for State of MS
(601) 987-3079	Physicians, Osteopathic Physicians and Podiatrists
rhonda@msbml.state.ms.us	
· ·	
The changes in this regulation reflect an att	tule and the reason(s) for proposing the rule: {Insert here} tempt to simplify and update current language.
This rule is proposed as a AFinal Pule, and/or a	Temporary Rule (Check one or both boxers as applicable.)
This rule is proposed as a Firmai Rule, and/or a	Temporary Rule (Check one of both boxers as applicable.)
	sed rule by addressing written comments to the agency at the above aclude their name and address, as well as other contact information, and
	ress and telephone number of the party or parties you represent.
Oral Proceeding: Check one b	ox below:
An oral proceeding is scheduled on t	his rule on Date: Time:
the above address at least day(s) include your name, address, telephone r	dence at the oral proceeding you must make a written request to the agency at prior to the proceeding to be placed on the agenda. The request should number as well as other contact information; and if you are an agent or ne number of the party or parties you represent.
will be held if a written request for an o persons. The written request should be (20) days after the filing of this notice o	on this rule. Where an oral proceeding is not scheduled, an oral proceeding ral proceeding is submitted by a political subdivision, an agency or ten (10) submitted to the agency contact person at the above address within twenty of proposed rule adoption and should include the name, address and telephone uest; and if you are an agent or attorney, the name, address and telephone esent.
Economic Impact Statement: Check one be	ox below:
☑The agency has determined that an ed	conomic impact statement is not required for this rule, or
The concise summary of the econom	ic impact statement required is attached.
The entire text of the Proposed Rule including th	e text of any rule being amended or changed is attached.
Date Rule Proposed: March 8, 2007	Proposed Effective Date of Rule: 30 days from final filing.

Rhonda Freeman Division Director

Signature and Title of Person Submitting Rule for Filing

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The changes in this regulation reflect an attempt to simplify and update current language.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

XXI. CME REQUIREMENTS FOR STATE OF MISSISSIPPI PHYSICIANS, OSTEOPATHIC PHYSICIANS AND PODIATRISTS

A. BASIC REQUIREMENT

Every Mississippi licensee must earn or receive not less than forty (40) hours of Category I continuing medical education in a two-year cycle as a condition precedent to renewing his or her license for the next fiscal year. Excess hours may not be carried over to another two-year cycle. For the purpose of this regulation, the two-year period begins July 1, 2000, and every two years thereafter.

- Category I continuing medical education shall mean those programs of
 continuing medical education designated as Category I which are
 sponsored or conducted by those organizations approved by the
 Mississippi State Medical Association, American Medical Association or
 by the Accreditation Council for Continuing Medical Education
 (ACCME) to sponsor or conduct Category I continuing medical education
 programs.
- 2. Programs of continuing medical education designated as Category I-A which are sponsored or conducted by organizations or entities accredited by the American Osteopathic Association to sponsor or conduct Category I-A continuing medical education for osteopathic physicians.
- 3. Programs of continuing medical education designated as a "prescribed hour" which are sponsored or conducted by organizations or entities accredited by the American Academy of Family Physicians to sponsor or conduct "prescribed hours" of continuing medical education.
- 4. Programs of continuing medical education designated as "cognates" which are sponsored or conducted by organizations or entities which are accredited by the American College of Obstetrics and Gynecology to sponsor or conduct approved cognates on obstetrical and gynecological related subjects.
- Programs of continuing medical education designated as Category I-A
 which are sponsored or conducted by organizations or entities accredited
 by the Council on Podiatric Medical Education to sponsor or conduct
 Category I-A continuing medical education for podiatrists.

B. PERSONS AFFECTED

Every Mississippi licensee is required to comply with the minimum requirement for continuing medical education established by these rules and regulations.

C. EXEMPTION FOR INITIAL LICENSES

Physicians, osteopaths or podiatrists receiving their initial license to practice medicine in Mississippi after June 30, or receiving their board certification after June 30, are exempt from the minimum continuing medical education requirement for the two-year period following their receiving a license or board certification. The forty (40) hour continuing education certification will be due within the next two-year cycle.

July 1, 2000 through June 30, 2002 (1st cycle) July 1, 2002 through June 30, 2004 (2nd cycle) July 1, 2004 through June 30, 2006 (3rd cycle) July 1, 2006 through June 30, 2008 (4th cycle)

For instance, a physician receiving an initial license August 3, 2001, will not have to complete forty (40) hours of CME until July 1, 2002, through June 30, 2004. All CME's must be acquired within the two-year cycle.

A. EFFECTIVE DATE

The first time for reporting continuing medical education activity will be the renewal period for the fiscal year beginning July 1, 2002, when reporting on continuing medical education work earned during the two-year period of July 1, 2000, to June 30, 2002.

B. RECORD KEEPING REQUIREMENT

- 1. Every licensee shall maintain records of attendance or certificates of completion demonstrating compliance with the minimum continuing medical education requirement. Documentation adequate to demonstrate compliance with the minimum continuing medical education requirements of this regulation shall consist of certificates of attendance, completion certificates, proof of registration, or similar documentation issued by the organization or entity sponsoring or conducting the continuing medical education program. These records must be maintained by the physician for a period of three (3) years following the year in which the continuing medical education credits were earned and are subject to examination by representatives of the State Board of Medical Licensure upon request. If a physician is on a hospital medical staff, it is recommended these certificates and hours be recorded with the primary hospital medical staff records.
- 2. With his or her annual renewal application, every licensee must certify the completion of the minimum continuing medical education requirement established under these regulations. Failure to maintain records

documenting that a physician has met the minimum continuing medical education requirement, and/or failure to provide such records upon request to the Mississippi State Board of Medical Licensure, is hereby declared to be unprofessional conduct and may constitute grounds, within the discretion of the Mississippi State Board of Medical Licensure, for the suspension of the physician's license to practice medicine.

C. ANNUAL RENEWAL

As a condition for annual renewal of license, beginning with the fiscal year July 1, 2002, through June 30, 2003, every physician, osteopath or podiatrist will be required to <u>eertify</u> biennially <u>certify</u> on his or her annual renewal form, that he or she has earned the required 40 hours of approved Category 1 continuing medical education requirement. The Board will randomly select physicians to ensure complete compliance with this requirement. If deficiencies are identified, licensee must complete deficiencies within six (6) months of date of notification. Failure to comply may result in the suspension of licensee's license.

Any physician, osteopath or podiatrist practicing during the time of a suspended license shall be considered an illegal practitioner and shall be subject to penalties provided for violation of the Medical Practice Act, and for costs incurred in the enforcement of this regulation.

D. WAIVER

A physician, osteopath or podiatrist who is unable to meet the minimum continuing medical education requirement for legitimate cause may apply to the Mississippi State Board of Medical Licensure for a waiver of the requirement prior to April 1 of the last year of the two-year cycle. Such waiver may be granted or denied within the sole discretion of the Mississippi State Board of Medical Licensure.

E. COMPLIANCE REVIEW

It shall be the responsibility of the Mississippi State Board of Medical Licensure to enforce the provisions of this regulation by review of the records maintained by physicians subject to this rule which demonstrate compliance with the program for continuing medical education. This compliance review may be conducted by the Board by random or designated sample, by mail or in person, or otherwise at the discretion of the Board. Non-compliance may result in the suspension of the physician's license to practice medicine under the Medical Practice Act.

F. EFFECTIVE DATE OF REGULATION

The above rules and regulations pertaining to Continuing Medical Education shall become effective February 16, 2000.



NOTICE OF PROPOSED RULE ADOPTION



STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Mississippi State Board of Medical Licensure c/o Rhonda Freeman

Specific Legal Authority authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule Section 73-43-11

1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended XXII. Regulations Governing the Practice of Physician Assistants
(601) 987-3079	1 Hydrodan Accordance
rhonda@msbml.state.ms.us	
	implify and update current language. The addition of
Section C. 4.c. is based on an amendment to Mississ	SIDDI Code 73-20-3.
	· · · · · · · · · · · · · · · · · · ·
This rule is proposed as a ✓ Final Rule, and/or a ☐ Tempo	orary Rule (Check one or both boxers as applicable.)
address. Persons making comments should include thei	y addressing written comments to the agency at the above ir name and address, as well as other contact information, and elephone number of the party or parties you represent.
Oral Proceeding: Check one box below:	
An oral proceeding is scheduled on this rule on Place:	Date: Time:
the above address at least day(s) prior to the	e oral proceeding you must make a written request to the agency at e proceeding to be placed on the agenda. The request should well as other contact information; and if you are an agent or of the party or parties you represent.
will be held if a written request for an oral proceed persons. The written request should be submitted (20) days after the filing of this notice of proposed	e. Where an oral proceeding is not scheduled, an oral proceeding ding is submitted by a political subdivision, an agency or ten (10) to the agency contact person at the above address within twenty rule adoption and should include the name, address and telephone f you are an agent or attorney, the name, address and telephone
Economic Impact Statement: Check one box below:	
The agency has determined that an economic in	npact statement is not required for this rule, or
The concise summary of the economic impact s	statement required is attached.
The entire text of the Proposed Rule including the text of ar	ny rule being amended or changed is attached.
Pate Rule Proposed March 9 2007	Proposed Effective Date of Rule: 20 days from final films

March 8, 2007

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

March 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The changes in this regulation reflect an attempt to simplify and update current language. The addition of Section C.4.c. is based on an amendment to Mississippi Code 73-26-3.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

XXII. REGULATIONS GOVERNING THE PRACTICE OF PHYSICIAN ASSISTANTS

A. SCOPE

- 1. The following regulations pertain to Physician Assistants practicing medicine with physician supervision. Physician Assistants may perform those duties and responsibilities, including diagnosing and the ordering, prescribing, dispensing of prepackaged drugs, and administration of drugs and medical devices as delegated by their supervising physician(s).
- 2. Physician Assistants may provide any medical service which is delegated by the supervising physician when the service is within the Physician Assistant's training and skills; forms a component of the physician's scope of practice; and is provided with supervision.
- 3. Physician Assistants shall be considered the agents of their supervising physicians in the performance of all practice-related activities including, but not limited to, the ordering of diagnostic, therapeutic, and other medical services.

B. DEFINITIONS

- 1. For the purpose of Article XXII only, the following terms have the meanings indicated:
 - a. "Board" means the Mississippi State Board of Medical Licensure.
 - b. "Physician Assistant" means a person who meets the Board's criteria for licensure as a Physician Assistant and is licensed as a Physician Assistant by the Board.
 - c. "Supervising Physician" means a doctor of medicine or a doctor of osteopathic medicine who holds an unrestricted license from the Board, who is in the full-time practice of medicine, and who has been approved by the Board to supervise Physician Assistants.
 - d. "Supervise" or "Supervision" means overseeing and accepting responsibility for the medical services rendered by a Physician Assistant.
 - e. "Primary Office" means the usual practice location of a physician and being the same location reported by that physician to the Mississippi State Board of Medical Licensure and the United States Drug Enforcement Administration.

- f. "NCCPA" means the National Commission on Certification of Physician Assistants.
- g. "PANCE" means the Physician Assistant National Certifying Examination.
- h. "CAAHEP" means the Commission on Accreditation of Allied Health Education Programs.
- i. "Predecessor or Successor Agency" refers to the agency responsible for accreditation of educational programs for Physician Assistants that preceded CAAHEP or the agency responsible for accreditation of educational programs for physician assistants that succeeded CAAHEP.
- 2. Masculine terms wherever used in this regulation shall also be deemed to include the feminine.

C. QUALIFICATIONS FOR LICENSURE

- 1. Pursuant to Section 73-43-11, Mississippi Code (1972) Annotated, all Physician Assistants who are employed as Physician Assistants by a Department of Veterans Affairs health care facility, a branch of the United States military, or the Federal Bureau of Prisons and who are practicing as Physician Assistants in a federal facility in Mississippi on July 1, 2000, and those Physician Assistants who trained in a Mississippi Physician Assistant program and have been continuously practicing as a Physician Assistant in Mississippi since 1976, shall be eligible for licensure if they submit an application for licensure to the Board by December 31, 2000, and meet the following additional requirements:
 - a. Satisfies the Board that he is at least twenty-one (21) years of age and of good moral character.
 - b. Submits an application for license on a form supplied by the Board, completed in every detail with a recent photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot will not be accepted.
 - c. Pays the appropriate fee as determined by the Board.
 - d. Presents a certified copy of birth certificate.
 - e. Proof of legal change of name if applicable (notarized or certified copy of marriage or other legal proceeding).

- f. Provides information on registration or licensure in all other states where the applicant is or has been registered or licensed as a Physician Assistant.
- g. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
- h. No basis or grounds exist for the denial of licensure as provided at Article N below.

Physician Assistants licensed under this subsection will be eligible for license renewal so long as they meet standard renewal requirements.

- 2. Before December 31, 2004, applicants for Physician Assistant licensure, except those licensed pursuant to the paragraph above, must be graduates of Physician Assistant educational programs accredited by the Commission on Accreditation of Allied Health Educational Programs or its predecessor or successor agency, have passed the certification examination administered by the National Commission on Certification of Physician Assistants (NCCPA), have current NCCPA certification, and possess a minimum of a baccalaureate degree, and meet the following additional requirements:
 - a. Satisfies the Board that he is at least twenty-one (21) years of age and of good moral character.
 - b. Submits an application for license on a form supplied by the Board, completed in every detail with a recent photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot will not be accepted.
 - c. Pays the appropriate fee as determined by the Board.
 - d. Presents a certified copy of birth certificate.
 - e. Proof of legal change of name if applicable (notarized or certified copy of marriage or other legal proceeding).
 - f. Provides information on registration or licensure in all other states where the applicant is or has been registered or licensed as a Physician Assistant.
 - g. Must have favorable references from two (2) physicians licensed in

the United States with whom the applicant has worked or trained.

h. No basis or grounds exist for the denial of licensure as provided at Article N below.

Physician Assistants meeting these licensure requirements will be eligible for license renewal so long as they meet standard renewal requirements.

- 3. On or after December 31, 2004, applicants for Physician Assistant licensure must meet the following requirements:
 - a. Satisfies the Board that he is at least twenty-one (21) years of age and of good moral character.
 - b. Submits Complete an application for license on a form supplied by the Board, completed in every detail and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph (wallet-size/passport type) attached. A Polaroid or informal snapshot will not be accepted.
 - c. Pays the appropriate fee as determined by the Board.
 - d. Presents a certified copy of birth certificate or valid passport.
 - e. Proof of legal change of name if applicable (notarized or certified copy of marriage license or other legal proceeding).
 - f. Possesses a master's degree in a health-related or science field.
 - g. Has successfully completed an educational program for Physician Assistants accredited by CAAHEP or its predecessor or successor agency.
 - h. Passed the certification examination administered by the NCCPA and have current NCCPA certification.
 - Provides information on registration or licensure in all other states where the applicant is or has been registered or licensed as a Physician Assistant.
 - j. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
 - k. Must appear for a personal interview in the office of the

Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.

1. No basis or grounds exist for the denial of licensure as provided at Article N below.

4. Temporary License

- a. The Board may grant a temporary license to an applicant who meets the qualifications for licensure except that the applicant has not yet taken the national certifying examination administered by the NCCPA or the applicant has taken the national certifying examination and is awaiting the results or the applicant has not obtained a minimum of a master's degree in a health-related or science field.
- b. A temporary license <u>issued upon the basis of the NCCPA not being</u> taken or the applicant awaiting the <u>results</u> is valid:
 - (1) for one hundred eighty (180) days from the date of issuance;
 - (2) until the results of an applicant's examination are available; or
 - (3) until the Board makes a final decision on the applicant's request for licensure, whichever comes first. The Board may extend a temporary license, upon a majority vote of the Board members, for a period not to exceed one hundred eighty (180) days. Under no circumstances may the Board grant more than one extension of a temporary license.
- c. A temporary license may be issued to an applicant who has not obtained a master's degree so long as the applicant can show proof of enrollment in a master's program that will, when completed, meet the master's degree requirement. The temporary license will be valid no longer than one (1) year, and may not be renewed.

D. REQUIREMENT OF PROTOCOL - PRESCRIBING/DISPENSING

1. Physician Assistants shall practice according to a Board-approved protocol which has been mutually agreed upon by the Physician Assistant and the supervising physician. Each protocol shall be prepared taking into

consideration the specialty of the supervising physician, and must outline diagnostic and therapeutic procedures and categories of pharmacologic agents which may be ordered, administered, dispensed and/or prescribed for patients with diagnoses identified by the Physician Assistant. Each protocol shall contain a detailed description of back-up coverage if the supervising physician is away from the primary office. Although licensed, no Physician Assistant shall practice until a duly executed protocol has been approved by the Board.

- 2. Except as hereinafter provided in Paragraph 3 below, Physician Assistants may not write prescriptions for or dispense controlled substances or any other drug having addiction-forming or addiction-sustaining liability. A Physician Assistant may, however, administer such medications pursuant to an order by the supervising physician according to the protocol worked out with the physicianif in the protocol.
- Prescribing Controlled Substances and Medications by Physician Assistants.
 - a. Scope.

Pursuant to these regulations, authorized Physician Assistants may prescribe controlled substances in Schedules II through V.

- b. Application for Authority to Prescribe Controlled Substances
 - (21) Physician Assistant applicants applying for controlled substance prescriptive authority must complete a Board approved educational program prior to making application.
 - (12) In order to obtain the authority to prescribe controlled substances in any schedule, the Physician Assistant shall submit an application to approved by the Board on an application form duly designated and amended from time to time by the Board.
- Incorporation of Physician Regulations Pertaining to Prescribing, Administering and Dispensing of Medication.
 For the purpose of directing the manner in which Physician Assistants may prescribe controlled substances, the Board incorporates Article XXIII of the Board's Regulations Pertaining

Prescribing, Administering and Dispensing of Medication as applied to Physicians, including but not limited to all Definitions,

Maintenance of Records and Inventories, Use of Diet Medication, Use of Controlled Substances for Chronic (Non-Terminal) Pain, and Prescription Guidelines. All Physician Assistants authorized to prescribe controlled substances shall fully comply with these regulations.

- d. Registration for Controlled Substances Certificate Prescriptive Authority.
 - (1) Every Physician Assistant authorized to practice in Mississippi who prescribes any controlled substance within Mississippi or who proposes to engage in the prescribing of any controlled substance within Mississippi must be registered with the U. S. Drug Enforcement Administration in compliance with title 21 CFR Part 1301 Food and Drugs.
 - Pursuant to authority granted in Miss. Code Ann. §41-29-(2) 125, the Board hereby adopts, in lieu of a separate registration with the Board, the registration with the U.S. Drug Enforcement Administration as required in Subparagraph c (1) above, provided, however, where a Physician Assistant already possesses a controlled substances registration certificate for a practice location in another state or jurisdiction, the Physician Assistant may not transfer or otherwise use the same registration until he meets the training requirements set forth in Sub-paragraph 3 (b) (2). In the event, however, a Physician Assistant has had limitations or other restrictions placed upon his license wherein he is prohibited from handling controlled substances in any or all schedules, said Physician Assistant shall be prohibited from registering with the U. S. Drug Enforcement Administration for a Uniform Controlled Substances Registration Certificate without first being expressly authorized to do so by order of the Board.
 - (3) The registration requirement set forth in these regulations does not apply to the distribution and manufacture of controlled substances. Any physician who engages in the manufacture of distribution of controlled substances or legend drugs shall register with the Mississippi State Board of Pharmacy pursuant to Miss. Code Ann. Section73-21-105. For the purposes herein, "distribute" shall mean the delivery of a drug other than by administering, prescribing, or dispensing. The word "manufacture" shall have the same meaning as set forth in Miss. Code Ann. Section73-

e. Drug Maintenance, Labeling and Distribution Requirements

Persons registered to prescribe controlled substances may order, possess, prescribe, administer, distribute or conduct research with those substances to the extent authorized by their registration and in conformity with the other provisions of these regulations and in conformity with provisions of the Mississippi Uniform Controlled Substances Law, Miss. Code Ann. §41-29-101 et. seq., except Physician Assistants may not receive samples of controlled substances. A Physician Assistant may receive and distribute prepackaged medications or samples of non-controlled substances for which the Physician Assistant has prescriptive authority.

E. SUPERVISION

- 1. Before any physician shall supervise a Physician Assistant, the physician must first (a) present to the Board's Executive Director, a duly executed protocol, (b) appear personally before the Board or its Executive Director, and (c) obtain written approval to act as a supervising physician. The facts and matters to be considered by the Board when approving or disapproving a protocol or supervision arrangement, shall include, but are not limited to, how the supervising physician and Physician Assistant plan to implement the protocol, the method and manner of supervision, consultation, referral and liability.
- 2. Where two or more physicians anticipate executing a protocol to supervise a Physician Assistant, it shall not be necessary that all of the physicians personally appear before the Board or Executive Director as required in Subsection 1 above. In this situation, the physician who will bear the primary responsibility for the supervision of the Physician Assistant shall make the required personal appearance.

F. SUPERVISING PHYSICIAN LIMITED

- No physician shall be authorized to supervise a Physician Assistant unless that physician holds an unrestricted license to practice medicine in the State of Mississippi.
- Supervision means overseeing activities of, and accepting responsibility for, <u>all</u> medical services rendered by the Physician Assistant. Except as described in Subsection 3, supervision must be continuous, but shall not be construed as necessarily requiring the physical presence of the supervising physician.

- 3. New graduate Physician Assistants and all Physician Assistants newly practicing in Mississippi, except those licensed under provision C1, require the on-site presence of a supervising physician for one hundred twenty (120) days.
- 4. The Physician Assistant's practice shall be confined to the primary office or clinic of the supervising physician or any hospital(s) or clinic or other health care facility within the same community where the primary office is located, wherein the supervising physician holds medical staff privileges. Exceptions to this requirement may be granted on an individual basis, provided the location(s) of practice are set forth in the protocol.
- 5. The supervising physician must provide adequate means for communication with the Physician Assistant. Communication may occur through the use of technology which may include, but is not limited to, radio, telephone, fax, modem, or other telecommunication device.
- 6. The supervising physician shall, on at least a monthly basis, conduct a review of the records/charts of at least ten percent (10%) of the patients treated by the Physician Assistant, said records/charts selected on a random basis. During said review, the supervising physician shall note the medical and family histories taken, results of any and all examinations and tests, all diagnoses, orders given, medications prescribed, and treatments rendered. The review shall be evidenced by the supervising physician placing his signature or initials next to each of the above areas of review, and shall submit proof of said review to the Board upon request.

G. NUMBER OF PHYSICIAN ASSISTANTS SUPERVISED

No physician shall supervise more than two (2) Physician Assistants at any one time. A physician supervising two (2) nurse practitioners may not supervise a Physician Assistant.

H. TERMINATION

The Physician Assistant and supervising physician shall notify the Board in writing <u>immediately</u> upon the Physician Assistant's termination; physician retirement; withdrawal from active practice; or any other change in employment, functions or activities. Failure to notify can result in disciplinary action.

I. DUTY TO NOTIFY BOARD OF CHANGE OF ADDRESS

Any Physician Assistant who is licensed or receives a license to practice as a

Physician Assistant in this state and thereafter changes his or her practice location from what was noted in the application upon which he received a license, shall immediately notify the Board in writing of the change of location. Failure to notify within 30 days could result in disciplinary action.

J. CONTINUING EDUCATION

Each licensed Physician Assistant must show proof of completing 50 hours of CME each year, 20 hours of which must be Category I, as defined by the Accreditation Council for Continuing Medical Education (ACCME). Physician Assistants who are certified by the NCCPA may meet this requirement by providing evidence of current NCCPA certification.

All Physician Assistants authorized to prescribe controlled substances must show proof of completing 50 hours of CME each year, 20 hours of which must be Category 1, as defined by the ACCME, and 10 hours of which must be related to the prescribing of medications with an emphasis on controlled substances.

K. IDENTIFICATION

- 1. The supervising physician shall be responsible to ensure that any Physician Assistant under his supervision does not advertise or otherwise hold himself out in any manner which would tend to mislead the general public or patients. Physician Assistants shall at all times when on duty wear a name tag, placard or plate identifying themselves as Physician Assistants.
- 2. Physician Assistants may not advertise in any manner which implies that the Physician Assistant is an independent practitioner.
- 3. A person not licensed as a Physician Assistant by the Board who holds himself out as a Physician Assistant is subject to the penalties applicable to the unlicensed practice of medicine.

L. PHYSICIAN LIABILITY

Prior to the supervision of a Physician Assistant, the physician's and/or Physician Assistant's insurance carrier must forward to the Board a Certificate of Insurance.

M. RENEWAL SCHEDULE

- 1. The license of every person licensed to practice as a Physician Assistant in the State of Mississippi shall be renewed annually.
- 2. On or before May 1 of each year, the State Board of Medical Licensure shall mail an application for renewal of license to every Physician

Assistant to whom a license was issued or renewed during the current licensing year. The applicant shall complete the application and return it to the Board before June 30 with documentation of completing each year 50 hours of CME, 20 hours of which must be Category I, or current NCCPA certification and the renewal fee of an amount established by the Board. The payment of the annual license renewal fee shall be optional with all Physician Assistants over the age of seventy (70) years. Upon receipt of the application and fee, the Board shall verify the accuracy of the application and issue to applicant a certificate of renewal for the ensuing year, beginning July 1 and expiring June 30 of the succeeding calendar year. Such renewal shall render the holder thereof a licensed Physician Assistant as stated on the renewal form.

- 3. A Physician Assistant practicing in Mississippi who allows his license to lapse by failing to renew the license as provided in Subsection 2 may be reinstated by the Board on satisfactory explanation for such failure to renew, by completion of a reinstatement form, and upon payment of the renewal fee for the current year, and shall be assessed a fine of Twenty-five Dollars (\$25.00) plus an additional fine of Five Dollars (\$5.00) for each month thereafter that the license renewal remains delinquent.
- 4. Any Physician Assistant not practicing in Mississippi who allows his license to lapse by failing to renew the license as provided in Subsection 2 may be reinstated by the Board on satisfactory explanation for such failure to renew, by completion of a reinstatement form, and upon payment of the arrearage for the previous five (5) years and the renewal fee for the current year.
- 5. Any Physician Assistant who allows his license to lapse shall be notified by the Board within thirty (30) days of such lapse.
- 6. Any person practicing as a Physician Assistant during the time his license has lapsed shall be considered an illegal practitioner and shall be subject to the same penalties as provided at Mississippi Code (1972) Annotated, Section 73-25-14.

N. DISCIPLINARY PROCEEDINGS

 GROUNDS FOR DISCIPLINARY ACTION AGAINST PHYSICIAN ASSISTANTS

For the purpose of conducting disciplinary actions against individuals licensed to practice as Physician Assistants, the Board hereby incorporates those grounds for the non-issuance, suspension, revocation, or restriction

of a license or the denial of reinstatement or renewal of a license, as set forth in Mississippi Code (1972) Annotated, Sections 73-25-29 and 73-25-83. As a basis for denial, suspension, revocation or other restriction, the Board may initiate disciplinary proceedings based upon any one or more of those grounds as set forth in Sections 73-25-29 and 73-25-83, and may make provision for the assessment of costs as provided therein.

2. HEARING PROCEDURE AND APPEALS

No individual shall be denied a license or have his license suspended, revoked or restriction placed thereon, unless the individual licensed as a Physician Assistant has been given notice and opportunity to be heard. For the purpose of notice, disciplinary hearings and appeals, the Board hereby adopts and incorporates by reference all provisions of the "Rules of Procedure" now utilized by the Board for those individuals licensed to practice medicine, osteopathic medicine, and podiatric medicine in the State of Mississippi.

3. REINSTATEMENT OF LICENSE

- a. A person whose license to practice as a Physician Assistant has been revoked, suspended, or otherwise restricted may petition the Mississippi State Board of Medical Licensure to reinstate his license after a period of not less than one (1) year has elapsed from the date of the revocation or suspension. The procedure for the reinstatement of a license that is suspended for being out of compliance with an order for support, as defined in Section 93-11-153, shall be governed by Sections 93-11-157 or 93-11-163, as the case may be.
- b. The petition shall be accompanied by two (2) or more verified recommendations from physicians or osteopaths licensed by the Board of Medical Licensure to which the petition is addressed and by two (2) or more recommendations from citizens each having personal knowledge of the activities of the petitioner since the disciplinary penalty was imposed and such facts as may be required by the Board of Medical Licensure.

The petition may be heard at the next regular meeting of the Board of Medical Licensure but not earlier than thirty (30) days after the petition was filed. No petition shall be considered while the petitioner is under sentence for any criminal offense, including any period during which he is under probation or parole. The hearing may be continued from time to time as the Board of Medical Licensure finds necessary.

c. In determining whether the disciplinary penalty should be set aside and the terms and conditions, if any, which should be imposed if the disciplinary penalty is set aside, the Board of Medical Licensure may investigate and consider all activities of the petitioner since the disciplinary action was taken against him, the offense for which he was disciplined, his activity during the time his certificate was in good standing, his general reputation for truth, professional ability and good character; and it may require the petitioner to pass an oral examination.

O. IMPAIRED PHYSICIAN ASSISTANTS

- 1. For the purpose of the Mississippi Disabled Physician Law, Mississippi Code (1972) Annotated, Sections 73-25-51 to 73-25-67, any individual licensed to practice as a Physicians Assistant, shall be subject to restriction, suspension, or revocation, in the case of disability by reason of one or more of the following:
 - a. mental illness;
 - b. physical illness, including but not limited to deterioration through the aging process, or loss of motor skills; and/or
 - c. excessive use or abuse of drugs, including alcohol.
- 2. If the Board has reasonable cause to believe that a Physician Assistant is unable to practice with reasonable skill and safety to patients because of one or more of the conditions described above, referral of the Physician Assistant shall be made, and action taken, if any, in the manner as provided in Sections 73-25-55 through 73-25-65, including referral to the Mississippi Recovering Physicians Program, sponsored by the Mississippi State Medical Association.

P. EFFECTIVE DATE OF REGULATIONS

The above rules and regulations pertaining to the Practice of Physician Assistants shall become effective September 1, 2000; as amended September 16, 2004; as amended May 19, 2005.

It is the policy of the Mississippi State Board of Medical Licensure that any licensee who submits a false certification as to compliance with continuing medical education (CME) shall:

- 1. Receive a letter of reprimand.
- 2. Obtain the delinquent CME within 90 days.
- 3. Failing to meet #2, have his license to practice medicine in the State of Mississippi suspended until such time as the delinquent CME is obtained.
- 4. Be assessed investigative fees.

MINUTES EXECUTIVE COMMITTEE MEETING MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE MAY 16, 2007

MEMBERS PRESENT:

Dewitt G. Crawford, M.D., Louisville, President Philip T. Merideth, M.D., J.D., Jackson, Vice President Don A. Gibson, M.D., Richland, Secretary

ALSO PRESENT:

H. Vann Craig, M.D., Director Stan T. Ingram, Complaint Counsel for the Board Ellen O'Neal, Assistant Attorney General Rhonda Freeman, Division Director, Licensure Division Thomas Washington, Division Director, Investigative Division Frances Scott, Special Projects Officer, Investigative Division Sherry Harris, Administrative Assistant

The Executive Committee of the Mississippi State Board of Medical Licensure met on Wednesday, May 16, 2007, at 2:00 p.m. in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

PERSONAL APPEARANCE BY W. SCOTT HADDON, M.D., RALEIGH, NC, MISSISSIPPI MEDICAL LICENSE NUMBER 15080

Dr. Craig advised that this matter was discussed at the March 7, 2007, Executive Committee meeting. The Board had sent Dr. Haddon a Consent Order due to disciplinary action imposed against him by the South Carolina Board and Dr. Haddon had failed to sign and return. The Board's concerns with Dr. Haddon are: 1) failing to return the Consent Order; and, 2) not notifying the Board of his change of address.

Dr. Haddon joined the meeting but was not represented by legal counsel. He executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference.

Dr. Craig advised Dr. Haddon that he had been asked to appear before the Executive Committee to explain why he failed to sign and return the Consent Order and also why he failed to notify the Board of his change of address.

Dr. Haddon stated that his permanent address has not changed because he is only performing locum tenens in Brookhaven, MS, and still maintains his North Carolina residence. Dr. Haddon stated that he did not sign and return the Consent Order because he thought that to do so would mean that he would be giving up his Mississippi license and he did not want to give up his MS license when he had already complied with South Carolina's request. Dr. Haddon advised that he had attended BMI in Atlanta, GA, and was in full compliance with South Carolina's request. Dr. Crawford requested a copy of BMI's report. Dr. Haddon advised that he did not have the report with him, but had no problem in providing a copy.

After a brief discussion, motion was made by Dr. Merideth, seconded by Dr. Gibson, and carried unanimously that Mr. Ingram contact Dr. Haddon's attorney in South Carolina on the exact status of Dr. Haddon's Consent Order and draft a modified Consent Order that is agreeable with this Board and Dr. Haddon's attorney that informs this Board of both North Carolina's and South Carolina's requests, information relative to the BMI report, and advises this Board of changes on an on-going basis. Dr. Crawford requested that Dr. Haddon advise the Board of all locum tenens address changes since Dr. Haddon advised that he will begin working in Tupelo next month.

CME AUDIT - NO RESPONSE

- 1. Morton Franklin Longnecker, M.D., Biloxi, MS
- 2. Mohammed S. Akram, M.D., Verona, NJ

After a brief discussion on handling physicians that have not responded to CME audit letters, motion was made by Dr. Merideth, seconded by Dr. Crawford, and carried unanimously to mark the "Do not renew" block on the online profile. This will prohibit the physician from being able to renew their license online and require them to contact Board staff before they can renew their license.

RETENTION ON CLOSED COMPLAINT FILES

Dr. Craig advised that the office is getting short on storage space and wanted guidance on retention of closed complaint and/or deceased physician files. After a brief discussion, Dr. Merideth suggested that the Board start by polling the Federation and other states as to their process and retention of files.

PROPOSED TEMPORARY LICENSURE REQUIREMENTS

Dr. Craig advised that we do not currently have training permits and applicants must complete the entire application process. The Board had an incident where a resident had completed the rotation at the University of Mississippi Medical Center (UMC) before their application was complete.

Ms. Freeman provided a draft regulation and a modified licensure application that would alleviate the problem in the future. After a brief discussion, Dr. Crawford suggested that there be a one time renewal on the restricted temporary license. This matter was referred to the Full Board for approval.

PHYSICIAN ASSISTANTS

- 1. Definition of community
- 2. Protocol changes
- 3. Botox
 - a. PA's off-label use of Botox
 - b. Pain management

Dr. Craig advised that he is receiving calls and would like guidance in several physician assistants issues. Dr. Craig stated that his understanding of "community" is that the supervising physician can be at the physician assistant's location in 30 minutes or the distance is 30 miles or less. The Executive Committee unanimously agreed with Dr. Craig's definition.

Dr. Craig also asked if the Board has authority to make changes to protocols once they have been signed. After a brief discussion, Mr. Ingram advised that the Board has the right to protect the public and the community and since protocols are subject to approval by the Board, then the Board has the right to revisit and make necessary changes.

Dr. Craig advised that the Board has received a request from Dr. Staggs, who specializes in pain management, to allow his physician assistant to perform cosmetic Botox injections and cosmetic fillers. Dr. Craig stated this would be allowing a physician assistant authority to use Botox off-label. After a brief discussion, Mr. Ingram advised the Executive Committee to request that Dr. Staggs and his PA provide the Board with a copy of their scope of practice to insure Botox is included. Dr. Merideth requested this matter be discussed before the Full Board on May 17, 2007.

APPLICATION FOR FREE STANDING CLINIC FROM ALFREDO RODGRIGUEZ-TORRES, M.D., NATCHEZ, MS

Dr. Craig advised that in a conversation with Dr. Easterling, Dr. Easterling stated that nurse practitioners could not apply for Schedule II prescriptive authority. Dr. Craig advised that he had gone through the file and found an agreement between the Board of Nursing and MSBML that stated nurse practitioners could be certified for Schedule II's with the proper training. Dr. Craig said the nurse practitioner would have to apply for Schedules II and III and secure approval from the Board of Nursing and the Joint Practice Committee. Dr. Craig advised that Dr. Easterling objects and feels this is not valid.

Ellen O'Neal, Assistant Attorney General, stated that she has received a phone call from her counterpart at the Board of Nursing (BON), Woody Woodcock, raising concerns they have relative to nurse practitioners and changes MSBML is making without joint promulgation. The BON believes MSBML is dictating the terms of the quality improvement plans and believes nurse practitioners are allowed to prescribe Schedule II drugs.

Dr. Merideth is the Board's representative on the Board of Nursing. Dr. Merideth stated that the BON objects to MSBML's checking nurse practitioner's protocols. Dr. Craig said we are simply verifying the physician's information on the protocol and that is the Board's responsibility. Mr. Washington, Division Director, Investigative Division, advised that his staff has not visited any nurse practitioners.

There was also a brief discussion about the number of nurse practitioners one physician can supervise. Dr. Crawford stated that the Board has limited the number to two (2) nurse practitioners per physician and if a physician supervises two (2) nurse practitioners they are <u>not</u> allowed to also supervise a physician assistant.

Dr. Craig advised that he has received a phone call from Sheree Zbylot, RN, Interim Executive Director of the Board of Nursing, requesting a Joint Committee meeting to discuss these issues. At this time, a date for the meeting has not been determined.

Dr. Merideth advised that since he has been a member of the BON Expanded Role Committee nurse practitioners have been submitting requests and justification when they make application for Schedules II and III. He stated that nurse practitioners are not given this authority unless they provide justification.

THE EXECUTIVE COMMITTEE RECESSED AT 3:45 P.M. AND RECONVENED AT 3:50 P.M.

APPROVAL OF "A BRIDGE TO RECOVERY" TREATMENT FACILITY TO BE ADDED TO BOARD'S APPROVED FACILITIES LIST

Dr. Craig advised that the Board had received a request from Gary D. Carr, M.D., Medical Director, Mississippi Professionals Health Program (MPHP) to add "A Bridge to Recovery" to the Board's approved treatment facilities. After a brief discussion, motion was made by Dr. Crawford, seconded by Dr. Merideth, and carried unanimously that the request be tabled for more information concerning the program.

PERSONAL APPEARANCE BY DARCEY G. KOBS, JR., M.D., HATTIESBURG, MISSISSIPPI MEDICAL LICENSE NUMBER 05934

Dr. Kobs was not present or represented by legal counsel. Dr. Craig advised that Heber Simmons, III, attorney for Dr. Kobs, had sent a letter requesting the hearing be postponed until the September 2007 meeting.

Dr. Craig advised that Dr. Kobs' hospital privileges had been revoked at Forrest General Hospital due to some potential mis-reads of MRI's or CT's which resulted in a delay in diagnoses of several patients.

After a brief discussion, motion was made by Dr. Crawford, seconded by Dr. Merideth, and carried unanimously to offer Dr. Kobs a Consent Order limiting his practice to reading standard x-rays and no night and/or weekend calls. If Dr. Kobs signs the Consent Order, there will no longer be a need for him to appear before the Board.

ERNEST KAYE JOHNSON, III, M.D., NASHVILLE, TN, MISSISSIPPI MEDICAL LICENSE NUMBER 08242, CONSENT ORDER

Dr. Craig reviewed the Consent Order executed by Dr. Johnson, which mirrors the actions of the Tennessee Board of Medical Examiners. Motion was made by Dr. Merideth, seconded by Dr. Gibson, and carried unanimously to accept the Consent Order, a copy of which is attached hereto and incorporated by reference.

TED ALAN GLASS, M.D., FREDERICKSBURG, VA, MISSISSIPPI MEDICAL LICENSE NUMBER 18347, VOLUNTARY SURRENDER

Dr. Craig reviewed the Surrender of Medical License executed by Dr. Glass, which was a voluntary surrender to avoid an evidentiary hearing before the Mississippi State Board of Medical Licensure. Motion was made by Dr. Gibson, seconded by Dr. Merideth, and carried unanimously to accept the Surrender of Medical License, a copy of which is attached hereto and incorporated by reference.

BRYAN "TIP" SULLIVAN, DPM, JACKSON, MISSISSIPPI MEDICAL LICENSE 80089

Dr. Craig reviewed a letter from Dr. Sullivan requesting release from his second five (5) year contract with the Mississippi Professionals Health Program (MPHP). Dr. Craig also advised that Dr. Carr had referred the matter to the Board.

Dr. Craig advised that Dr. Sullivan had self-reported a violation of his contract when at the advice of one professional had a social drink to determine if he was truly an alcoholic. When Dr. Sullivan self-reported the violation it resulted in a series of COPAC sessions and the requirement to enter into a new five (5) year contract.

After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. Merideth, and carried that MSBML continue to monitor Dr. Sullivan for the balance of his second contract and continue random drug testing by the Board.

UPDATE ON REFERRALS FROM EXECUTIVE COMMITTEE MEETING OF MARCH 7, 2007

Dr. Craig advised that the Executive Committee had requested that he investigate additional information concerning Ralph Arnold Smith, M.D. Dr. Craig advised that Medicaid has not proceeded with actions against Dr. Smith in four and a half (4 ½) years. Medicaid recently requested that Dr. Smith pay \$250,000 and was given 30 days to respond. To date, we have not heard the outcome of Medicaid's request. It was the decision of the Committee to further investigate the matter and determine the status of the Medicaid demand.

Dr. Craig discussed a policy he drafted at the request of the Ethics Committee concerning the sale of goods from physicians' offices. Dr. Craig advised that the policy mirrors the American Medical Association's Code of Medical Ethics concerning the sale of products from a physician's office. Dr. Merideth advised that the Ethics Committee will meet Thursday morning and will bring the policy before the Full Board for discussion. There was further discussion about making a profit from the sale of products in a physician's office, but this will be addressed at the Ethics Committee meeting.

OTHER BUSINESS

Dr. Craig advised he had received an anonymous complaint concerning a now deceased patient but the family of the individual does not wish to sign the release allowing the Board authority to investigate the matter. The complaint is against a physician, Dr. Patrick Sewell, an interventional radiologist, that operates an outpatient surgery clinic. Dr. Sewell maintains that he does not come under the Board's Rules and Regulations of Office Based Surgery because his office is on the 2nd floor and the operating room is on the 1st floor of the building.

Mr. Ingram advised the Executive Committee that review of medical records without a patient release is authorized by Miss. Code Ann. 73-25-28, provided that the Board, after review of the complaint or information, must make a determination of reasonable cause to inspect and copy such patient records. Afer further discussion and review of the complaint, motion was made by Dr. Merideth, seconded by Dr. Gibson, and carried unanimously that the Executive Committee finds that reasonable cause does exist to inspect and copy such patient records pursuant to Miss. Code Ann. 73-25-28. An order and finding was entered authorizing Dr. Craig and a Board Investigator to obtain and copy records necessary for the investigation.

Dr. Craig advised that a complaint had been received from the Dental Board against Donald Clarence Faucett, M.D., a plastic surgeon, that operates a spa and offers teeth whitening. The Dental Board believes this is outside the practice of medicine and is the practice of dentistry. After a brief discussion, motion was made by Dr. Crawford, seconded by Dr. Merideth, and carried unanimously to refer back to the Dental Board to advise Dr. Faucett that this procedure is outside the practice of medicine.

Dr. Craig advised that Texas has already taken action against Ray Anthony Harron, M.D., one of the physicians which the Board's investigative staff had been trying to contact to summon to appear before the Board in a hearing. Dr. Craig advised that Texas has restricted Dr. Harron from practice in Texas until his license expires in June, he has agreed not to renew his license, and agreed not to petition for reinstatement. Mr. Ingram advised that the Executive Committee could amend Dr. Harron's Summons and Affidavit to mirror the actions taken by Texas.

Dr. Craig advised that the Board had received information that on March 1, 2007, Arkansas issued an emergency suspension on the license of John Eric Henriksen, M.D., who currently holds an active Mississippi license. Dr. Craig stated that Arkansas has postponed the hearing until June. Mr. Ingram advised the Board could mirror Arkansas' actions, but if his license is summarily suspended, he must be offered a hearing within 15 days and it appears that more information is needed. Ms. Scott advised that she has placed a call to Arkansas to obtain more information.

Dr. Craig requested guidance in a request from David W. Peeler, M.D., an interventional radiologist in Southhaven. Dr. Peeler has been requesting temporary licenses for the past year to bring in out-of-state physicians to educate them in a procedure he performs. We have been allowing the physicians to come in under the 5 day consultation rule but technically this is education/training done on patients. Dr. Craig advised that he has written Dr. Peeler a letter requesting additional information about the procedures, but in the meantime, how does the Executive Committee want the requests handled? After a brief discussion, motion was made by Dr. Crawford, seconded by Dr. Gibson, and carried unanimously to request that Dr. Craig and Ms. Freeman draft a regulation to present at the July meeting that would allow training for out-of-state residents/physicians in these circumstances.

Dr. Craig advised that he has received a call from Ibrahim Seki, M.D., who holds an active Mississippi license. Dr. Seki works in an after-hours clinic in Vidalia, LA. Dr. Seki advised that he had self-admitted himself to Brentwood for chronic insomnia. Dr. Craig advised that he has talked with Dr. Seki's employer and there have not been any problems; however, Dr. Carr wants Dr. Seki to undergo an evaluation with MPHP. After

a brief discussion, the Executive Committee unanimously agreed to advise Dr. Seki that since he maintains his practice in LA that he should self report to LA and have them send their report to our Board and MPHP.

Dr. Craig advised that Pitt Vesom, M.D., had recently completed his application for a Mississippi license. Dr. Vesom had agreed to be monitored by MPHP; however his new employer would not sign MPHP's contract. Dr. Vesom has written a letter requesting that his license be put on inactive status but there is no inactive status provision. Dr. Craig questioned how we should handle his license since they were contingent on the monitoring contract. After a brief discussion, Mr. Ingram suggested to write Dr. Vesom advising him that his license is active until June 2008, he does have the option to surrender his license, but in the event he plans to keep his license until expiration of same, that he must practice under the parameters previously dictated by the Board, which would require the monitoring contract.

Dr. Craig advised that a request has been received from a company by the name of Ingenix to purchase our physician database. We do have companies that purchase this information for credentialing; however, it is Ingenix's intent to post the information on their internet site. In order to get the information you must have a subscription with them. After a brief discussion, the Executive Committee decided to write them denying their request.

Dr. Craig requested assistance in how the Executive Committee wishes to handle Dr. Joe Burnett's request for an early release from his monitoring contract. Dr. Burnett has been under contract with MPHP for two (2) years and he originally signed a five (5) year contract. Dr. Carr is basically leaving the decision to the Board. Dr. Carr stated that he had initially requested that Dr. Burnett go for inpatient treatment, which Dr. Burnett declined. Also, Dr. Carr stated that he has suggested that Dr. Burnett seek a second opinion and he has not complied. After a brief discussion, motion was made by Dr. Merideth, seconded by Dr. Crawford, and carried unanimously that we request a letter from Dr. Carr recommending Dr. Burnett's contract with MPHP be dropped and he be monitored by MSBML.

Dr. Craig discussed the need to add the cost of the criminal background check to the licensure fee. Currently, the initial fee is \$500.00. The criminal background check is going to cost us approximately \$32.00 each. With the equipment and administrative cost, we recommend an additional \$50.00 fee to cover the cost. Motion was made by Dr. Gibson, seconded by Dr. Merideth, and carried unanimously to increase the original fee for licensure to \$550.00.

Dr. Craig requested guidance in handling positive results on background checks. Mr. Ingram advised the Board should handle on a case-by-case basis.

Dr. Craig asked if the Board wishes to delay issuance of license while we are waiting on results. After discussion, the Executive Committee agreed to wait on the results before issuing a license.

Dr. Craig also requested how the Board would like to handle falsification on applications or if we discover different information on background check. After a brief discussion, the Executive Committee agreed that the omission of substantive information needs to be addressed by the Executive Committee on a case-by-case basis. Dr. Crawford also suggested that the Committee authorize the Executive Director to make the decision on whether to handle or to bring such matters before the Executive Committee in a show cause hearing.

Dr. Craig stated the need for a Board policy to provide hospitals on the handling of reportable actions. Mr. Ingram advised that this matter had come up before and there is a difference of opinions as to what is reportable. After a brief discussion, Mr. Ingram stated that some kind of communication needs to be made to the hospital medical staffs across the state as to what is reportable and what is not and do so in a way to not create a deterrence to the physicians voluntarily seeking advocacy through the MPHP. Mr. Ingram advised that Dr. Craig, Dr. Carr and the Executive Committee needs to agree on a policy statement to provide guidance to the medical community. Motion was made by Dr. Crawford, seconded by Dr. Gibson, and carried unanimously that Dr. Craig, Dr. Carr and Mr. Ingram work to get the necessary information together and provide the guidelines to the Mississippi Hospital Association for distribution.

Dr. Craig discussed the need for a fee increase for duplicate wallet cards. We have a new wallet card that includes a bar code on the back with pertinent physician information to be used during disaster emergencies. After a brief discussion, motion was made by Dr. Crawford, seconded by Dr. Merideth, and carried unanimously to increase the duplicate wallet card fee from \$10.00 to \$20.00.

Dr. Craig advised that we have another issue with a resident from UMC which is an international medical graduate in her third (3) year of residency with a limited institutional medical license which is only active for five (5) years. The problem is she was allowed to leave the state and go to another state to perform research for two (2) years. UMC sponsored her limited institutional medical license in Mississippi for the two (2) years that she was out-of-state. As a result, however, she passed the seven (7) year time frame to take the USMLE. After a brief discussion, motion was made by Dr. Crawford, seconded by Dr. Gibson, and carried unanimously to allow this physician a

two (2) year extension on her limited institutional license to complete the program and also allow waiver on the 7 year rule.

Ms. Freeman is to communicate with UMC the Board's concerns with licensure issues and policies.

Ms. Freeman requested assistance in handling physicians that are not complying with the regulation to advise the Board of address changes. The Board's regulation advises that failure to notify the Board within 30 days of an address change could result in disciplinary action. After a brief discussion, motion was made by Dr. Crawford, seconded by Dr. Gibson, and carried unanimously to check the "Do not renew" block on the online renewal. When the physician thereafter contacts the Board because they are not allowed access to renew online, they are to be advised that they are in violation of Regulation XI by not advising the Board of their change of address. Also, the Executive Director was authorized to issue a letter of non-public reprimand for violating the Board's regulation by failing to notify the Board of a change of address.

ADJOURNMENT

There being no further business, the meeting recessed at 7:10 P.M. until 8:45 A.M. on Thursday, May 17, 2007.

DEWITT G. CRAWFORD, M

President

Minutes taken and transcribed by Sherry Harris Administrative Assistant May 16, 2007

AGREEMENT TO APPEAR INFORMALLY BEFORE EXECUTIVE COMMITTEE

I, Werner Scott Haddon, M.D., have requested an opportunity to appear informally before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal, no disciplinary action will be taken without my express written consent. In so doing, I have been advised and understand the following:

- 1. During the meeting, the Executive Committee may or may not be represented by legal counsel. Notwithstanding, I understand that I have a right, if I so choose, to employ legal counsel and have counsel present during the informal meeting.
- 2. I authorize the Committee Members to review and examine any statements, documentary evidence, or materials concerning the allegations during my informal appearance.
- 3. Because the purpose of my appearance is to avoid a hearing before the Board. I agree that presentation to and consideration by the Committee of any facts, matters, and documents pertaining to my case shall not unfairly or illegally prejudice the Committee members from further participation or consideration in the event a formal disciplinary hearing is later conducted. Stated differently, in the event the pending matter is not resolved following my appearance before the Committee, I will not object to any of the Committee members from further participating in subsequent meetings or hearings that may be conducted in relation to this matter.
- By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed: with legal counsel present (name of counsel: ✓ without legal counsel present **EXECUTED**, this the <u>/6</u> day of _

4.



IN THE MATTER OF PHYSICIAN'S LICENSE

MS Board of Mackey Licensure

OF

ERNEST KAYE JOHNSON, III, M.D.

CONSENT ORDER

WHEREAS, ERNEST KAYE JOHNSON, III, M.D., hereinafter referred to as "Licensee" is the current holder of License No. 08242, issued June 09, 1978, for the practice of medicine in the State of Mississippi;

WHEREAS, on July 26, 2006, Licensee's Tennessee medical license number 10912 was publicly reprimanded after it was determined that he failed to follow the state rules of Tennessee while engaging in a collaborative arrangement with several nurse practitioners at Bordeaux Long Term Care facility. As a condition of this reprimand, Licensee agreed to make available for inspection by the Tennessee Board of Medical Examiners medical records where he has supervised nurse practitioners within six (6) months from ratification of Tennessee's Letter of Reprimand ratified on July 26, 2006. The Letter of Reprimand from the Tennessee Board of Medical Examiner's is attached hereto as "Exhibit A," and incorporated herein by reference;

WHEREAS, pursuant to Subsections (8)(d) and (9) of Section 73-25-29, Mississippi Code (1972), Annotated, the aforementioned Letter of Reprimand constitutes restrictions placed on Licensee's license in another jurisdiction, grounds for which the Mississippi State Board of Medical Licensure may revoke the Mississippi medical license of Licensee, suspend his right to practice for a time deemed proper by the Board, place his license on probation, the terms

of which may be set by the Board or take any other action in relation to his license as the Board may deem proper under the circumstances;

WHEREAS, it is the desire of Licensee to avoid a hearing before the Mississippi State Board of Medical Licensure and in lieu thereof agrees to accept this Letter of Reprimand regarding his license to practice medicine in the State of Mississippi;

NOW, THEREFORE, the Mississippi State Board of Medical Licensure, with consent of Licensee as signified by his joinder herein, does hereby issue a Letter of Reprimand and Licensee acknowledges that this reprimand is a formal disciplinary action and is reportable to the Data Bank or similar agency.

This Consent Order shall be subject to approval by the Board. If the Board fails to approve this Consent Order, in whole or in part, it shall have no force or effect on the parties. It is further understood and agreed that the purpose of this Consent Order is to avoid a hearing before the Board. In this regard, Licensee authorizes the Board to review and examine any documentary evidence or materials concerning Licensee prior to or in conjunction with its consideration of this Consent Order. Should this Consent Order not be accepted by the Board, it is agreed that presentation to and consideration of this Consent Order and other documents and matters pertaining thereto by the Board shall not unfairly or illegally prejudice the Board or any of its members from further participation or consideration of the resolution of the proceeding.

Recognizing his right to notice of charges specified against him, to have such charges adjudicated pursuant to Miss. Code Ann. Section 73-25-27 (1972), to be represented therein by legal counsel of his choice, and to a final decision rendered upon written findings of fact and conclusions of law, ERNEST KAYE JOHNSON, III, M.D., nonetheless, hereby waives his right

to notice and a formal adjudication of charges and authorizes the Board to enter an order accepting this Consent Order.

Signed this the 26th day of Male, 2007.

FRNEST KAYEKOHNSON, III. M.D.

Terri A. Avant

Witness

Blocop

ACCEPTED AND APPROVED, this the // day of the MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE.

DEWITT G. CRAWFORD,

PRESIDENT

IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

TED ALAN GLASS, M.D.

SURRENDER OF MEDICAL LICENSE

WHEREAS, Ted Alan Glass, M.D., hereinafter referred to as "Licensee", is the current holder of License Number 18347 to practice medicine in the State of Mississippi;

WHEREAS, on or about March 3, 2006, in accordance with Mississippi Code §73-25-83(c), the University of Mississippi Medical Center, Jackson, Mississippi, reported to the Mississippi State Board of Medical Licensure that Licensee had resigned his position while under investigation by the hospital;

WHEREAS, in response to the above information, the investigative staff of the the Mississippi State Board of Medical Licensure conducted an independent investigation and has determined that reasonable cause exists to believe that Licensee is in violation of Mississippi Code Ann. §73-25-83;

WHEREAS, such conduct, if established in a due process hearing before the Board, would constitute unprofessional, dishonorable or unethical conduct in violation of Miss. Code Ann. §73-25-29(3), §73-25-29(4), §73-25-29(8)(a), §73-25-29(8)(d), §73-25-29(10), and §73-25-29(13) being grounds for which the Mississippi State Board of Medical Licensure may place Licensee's medical license on probation, the terms of which may be set by the Board, suspend his right to practice for a time

deemed proper by the Board, revoke said license, or take any other action in relation to said license as the Board may deem proper under the circumstances;

WHEREAS, in response to the findings of the investigation, Licensee plead guilty before the United States District Court, Southern District of Mississippi to a single count violation of 21U.S.C. §843(a)(3), Acquiring a Controlled Substance by Fraud, on or about November 30, 2006;

WHEREAS, it is the desire of the Licensee to avoid an evidentiary hearing before the before the Mississippi State Board of Medical Licensure, and in lieu thereof consents to the unconditional surrender of his license to practice medicine in the State of Mississippi;

NOW, THEREFORE, Licensee hereby voluntarily surrenders his medical license (Number 18347) to practice medicine in the State of Mississippi. Licensee understands that this is an unconditional surrender. In the event Licensee later decides to practice medicine in the State of Mississippi, it will be necessary for him to make application with the Board. At such time, the Board reserves the right to utilize all evidence, including all facts and matters developed during the current investigation, as part of the consideration of any application.

EXECUTED this the $\frac{\iota \Im}{2}$ day of April 2007.

Jed alan Han Mo TED ALAN GLASS, M.D. ACCEPTED AND APPROVED this the day of May 2007, by the Mississippi

State Board of Medical Licensure.

President

Mississippi State Board of

Medical Licensure

MINUTES RECESSED EXECUTIVE COMMITTEE MEETING MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE MAY 17, 2007

MEMBERS PRESENT:

Dewitt G. Crawford, M.D., Louisville, President Philip T. Merideth, M.D., J.D., Jackson, Vice President Don A. Gibson, M.D., Richland, Secretary

ALSO PRESENT:

H. Vann Craig, M.D., Executive Director Rhonda Freeman, Division Director, Licensure Division Sherry Harris, Administrative Assistant

The Executive Committee of the Mississippi State Board of Medical Licensure met on Thursday, May 17, 2007, at 8:45 a.m. President Dewitt Crawford reconvened the recessed meeting.

SALARY ADJUSTMENT FOR EXECUTIVE DIRECTOR, H. VANN CRAIG, M.D.

Dr. Craig excused himself from the Executive Committee meeting during the salary discussion. At the request of Dr. Crawford, Ms. Freeman supplied the Executive Committee with information concerning the Board's budget.

After a brief discussion, motion was made by Dr. Merideth, seconded by Dr. Gibson, and carried unanimously to increase the Executive Director's salary from the current \$122,994.64 to \$130,000.00 effective July 1, 2007.

DR. CRAIG ENTERED THE MEETING AT 8:55 A.M.

REQUEST FOR INCREASE ON ALL INITIAL LICENSES

Ms Freeman advised that at Wednesday's Executive Committee meeting the request for a \$50.00 increase to cover the cost of fingerprinting did not include physician assistants and limited license. Motion was made by Dr. Gibson, seconded by Dr. Merideth, and carried unanimously to add the increase to physician assistants and limited license and to make the \$50.00 increase for all licenses effective June 1, 2007.

RECESSED EXECUTIVE COMMITTEE MEETING MAY 17, 2007 Page 2

W. JOSEPH BURNETT, M.D., GREENWOOD, MISSISSIPPI MEDICAL LICENSE NUMBER 05093

Dr. Craig advised that he had received a call from Gary D. Carr, M.D., Medical Director, Mississippi Professionals Health Program (MPHP) stating that Dr. Burnett was wanting to terminate his MPHP contract early. Dr. Craig stated that Dr. Carr advised that Dr. Burnett could get a second opinion from an approved program but MPHP believes that Dr. Burnett needs to remain under contract.

After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. Merideth, and carried unanimously to advise Dr. Burnett that the Executive Committee agreed that he should continue to be monitored by MPHP, or seek a second opinion and submit to an evaluation at a Board approved facility.

ADJOURNMENT

There being no further business, the meeting adjourned at 9:00 a.m.

Dewitt G. Crawford, M.D.

President

Minutes taken and transcribed by Sherry Harris Administrative Assistant May 17, 2007

BOARD MINUTES MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE MAY 17, 2007

The regularly scheduled meeting of the Mississippi State Board of Medical Licensure was held on Thursday, May 17, 2007, in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

The following members were present:

Dewitt G. Crawford, M.D., Louisville, President Philip T. Merideth, M.D., J.D., Jackson, Vice President Don A. Gibson, M.D., Richland, Secretary Larry B. Aycock, M.D., McComb Virginia M. Crawford, M.D., Hattiesburg A. Wallace Conerly, M.D., Jackson S. Randall Easterling, M.D., Vicksburg William S. Mayo, D.O., Oxford

Also present:

H. Vann Craig, M.D., Director
Stan T. Ingram, Complaint Counsel for the Board
Ellen O'Neal, Special Assistant Attorney General
Rhonda Freeman, Division Director, Licensure Division
Thomas Washington, Division Director, Investigative Division
Frances Scott, Special Projects Officer, Investigative Division
Sherry Harris, Administrative Assistant
Cecil R. Burnham, Jackson, Consumer Health Committee
Martha Thompson, Oxford, Consumer Health Committee

Not present:

William B. Harper, D.O., Greenwood Wesley Breland, Hattiesburg, Consumer Health Committee

The meeting was called to order at 9:10 a.m. by Dr. Crawford, President. The invocation was given by Dr. Mayo. Dr. Crawford welcomed Sheree Zbylot, RN, Interim Executive Director of the Board of Nursing and all other visitors present at the meeting.

Dr. Craig recognized the following five (5) Board employees who have completed ten (10) or more years of service with the agency with a crystal biscuit jar that was embossed with their name and the Board seal. Those recognized were:

> Arlene Davis - 12 years of service Rhonda Freeman - 13 years of service Regina Lyle - 11 years of service Frances Scott - 11 years of service Thomas Washington - 15 years of service

APPROVAL OF CERTIFICATION OF MISSISSIPPI LICENSES TO OTHER ENTITIES FOR THE PERIOD MARCH 1, 2007, THROUGH APRIL 30, 2007

One hundred seventy-five (175) licenses were certified to other states for the period March 1, 2007, through April 30, 2007. Motion was made by Dr. Easterling, seconded by Dr. Mayo, and carried unanimously to approve these certifications.

APPROVAL OF LICENSES ISSUED FOR THE PERIOD MARCH 1, 2007, THROUGH APRIL 30, 2007

Seventy-one (71) licenses were issued for the period March 1, 2007, through April 30, 2007. Motion was made by Dr. Gibson, seconded by Dr. Mayo, and carried unanimously to approve these licenses.

REVIEW OF MINUTES OF THE EXECUTIVE COMMITTEE MEETING DATED MARCH 7, 2007, AND MINUTES OF THE BOARD MEETING DATED MARCH 8, 2007

Minutes of the Executive Committee Meeting dated March 7, 2007, and Minutes of the Board Meeting dated March 8, 2007, were reviewed. Dr. Gibson moved for approval of the minutes as submitted. Dr. Mayo seconded the motion, and it carried unanimously.

Dr. Easterling advised that he was confused with the wording on page 6 and page 7 of the Executive Committee Minutes relative to UMC monitoring some physicians rather than referring them to MPHP. Dr. Easterling stated that for UMC to monitor in-house is a conflict and wants UMC to be advised that all residents/physicians with problems of impairment are to be referred to MPHP. An editorial change to page 7, paragraph 2, will be changed to reflect that in the future UMC will refer all residents/physicians with problems of impairment to MPHP.

REPORT OF MAY 16, 2007, EXECUTIVE COMMITTEE MEETING

Dr. Craig briefly reported on Wednesday's Executive Committee meeting. Dr. Craig advised that the Executive Committee discussed handling of physicians that are not complying with the Board's regulation regarding change of address.

Dr. Craig advised that the Executive Committee voted to check the "Do not renew" block on the physician's profile so that the physician would not be allowed to renew online until they have contacted the Board and provided a current address. A letter of non-public reprimand for violating the Board's regulation of failing to notify the Board of a change of address within 30 days and advising the violation could result in disciplinary action will be issued.

Dr. Craig advised that several issues were discussed concerning physician assistants. Dr. Craig stated that the Executive Committee was in agreement with the definition of community to be 30 minutes or no more than 30 miles from the supervising physician. The Executive Committee agreed that the Board has the responsibility to protect the public and in so doing can meet with the physician and physician assistant and make changes or revisit protocols when necessary.

Dr. Craig advised that the Executive Committee discussed a letter from a physician who specializes in pain management, to allow his physician assistant to perform cosmetic Botox injections and cosmetic fillers. Dr. Craig stated this would be allowing a physician assistant to use Botox off-label. Dr. Craig advised that the Executive Committee agreed to write the physician requesting training and expertise for him and for his physician assistant in cosmetic use. Dr. Easterling recommends that the physician examine the patient before a physician assistant or nurse practitioner is allowed to use drugs off-label. Marla Moore, PA, Mississippi Academy of Physician Assistants (MAPA) President-elect was in attendance and advised that the American Academy of Physician Assistants (AAPA) does not have an official policy on off-label prescribing since all prescribing by a PA is delegated by their supervising physician. MAPA would recommend that MSBML not develop additional regulations but have the administration of off-label drugs disclosed to MSBML during the protocol approval process. After a brief discussion, Dr. D. Crawford referred the matter to the Scope of Practice Committee for further review and update at the July Board meeting.

Dr. Craig advised that the Executive Committee discussed an application for a Free Standing Clinic and the nurse practitioners were requesting Schedule II controlled substance authority. Dr. Craig advised there had been a lengthy discussion about nurse practitioners having Schedule II and III prescriptive authority. Sheree Zbylot, RN, Interim Executive Director of the Board of Nursing, addressed the Board and advised that all nurse practitioner protocols are scrutinized by the Expanded Role Committee. MSBML has a member (Dr. Merideth) on the committee that reviews the protocols. Ms. Zbylot advised that the nurse practitioner and physician must write a letter requesting and justifying the need to be approved for Schedule II and III controlled substance prescriptive authority. After a brief discussion, Dr. D. Crawford referred the matter to the Scope of Practice Committee for further review.

Dr. Craig advised that the Executive Committee approved a Consent Order on a physician which mirrors the actions of the Tennessee Board of Medical Examiners, and approved the Voluntary Surrender of Medical License from a physician to avoid an evidentiary hearing.

Dr. Craig advised that the Executive Committee had approved an increase in the initial license fee from \$500.00 to \$550.00 to cover the cost of performing criminal background checks. Dr. Craig stated the need that this cost cover all licenses, to include, M.D.'s., D.O's., Limited Institutional, Podiatric and Physician Assistants, and will become effective June 1, 2007. Motion was made by Dr. Gibson, seconded by Dr. Mayo, and carried unanimously that the increase will apply for all initial licensure applications.

Dr. Craig advised that the Executive Committee was proposing a regulation to address the temporary training license for out-of-state residents and a modified application. After a brief discussion and editorial changes, motion was made by Dr. Easterling, seconded by Dr. Conerly, and carried unanimously of the Board's intent to adopt the temporary training license for out-of-state physicians, and the modified application with editorial changes. A copy of the proposed regulation is attached hereto and incorporated by reference. The proposed regulation will be filed with the Secretary of State under the Administrative Procedures Act.

Dr. Craig presented other informational items, which are reflected in the Executive Committee Minutes. Motion was made by Dr. Aycock, seconded by Dr. Mayo, and carried unanimously to approve the actions of the Executive Committee.

REPORTS FROM COMMITTEES

Consumer Health - Mr. Breland (Chair), Ms. Thompson, Mr. Burnham

Mr. Burnham advised there was no new information to report.

Education & Workforce - Dr. Conerly (Chair), Dr. Aycock, Dr. Mayo

Dr. Conerly advised that he had attended a meeting at the Department of Health with Dr. D. Crawford, Dr. Craig, and Ms. Freeman concerning emergency workforce planning. They are requesting our assistance in securing physician information for the data bank. Motion was made by Dr. Conerly, seconded by Dr. Gibson, and carried unanimously to offer our support and provide the needed information to the committee.

Scope of Practice - Dr. Merideth (Chair), Dr. Easterling, Dr. Aycock

Dr. Merideth advised there was no new information to report.

Professional Health Program - Dr. Gibson (Chair), Dr. Mayo, Dr. Merideth

Dr. Gibson advised there was no new information to report.

Rules, Regulation & Legislative - Dr. Easterling (Chair), Dr. D. Crawford, Dr. Harper

Dr. Easterling advised there was no new information to report.

Ethics - Dr. Merideth (Chair), Dr. V. Crawford, Dr. Conerly

Dr. Merideth advised that the Ethics Committee met this morning concerning a policy for the sale of health related products from physicians' offices. A copy of the proposed policy was distributed and discussed. After several suggestions and editorial changes, motion was made by Dr. Merideth, seconded by Dr. Gibson, and carried unanimously to table the matter until the July meeting and request that suggestions and/or changes be relayed to the Ethics Committee.

Electronic Medical Records - Dr. D. Crawford (Chair), Dr. V. Crawford, Dr. Mayo

Dr. Crawford advised that a presentation will be made at the July meeting on this matter. Currently, the Board's rules and regulations allow electronic transmission from computer to fax, but does not allow computer to computer. Dr. Crawford stated the DEA does not allow electronic transmission of controlled substance.

ELECTION OF BOARD OFFICERS

Dr. D. Crawford, Chair of the Nominating Committee, addressed the Board and advised that the Nominating Committee had met and wished to nominate Dr. Merideth as President, Dr. Gibson as Vice President, and Dr. Mayo as Secretary beginning July 1, 2007. Dr. Crawford opened the floor for nominations. Since there were no additions and/or objections, Dr. Crawford announced the nominations as approved.

HEARING IN THE CASE OF RAY A. HARRON, M.D., BRIDGEPORT, WV, MISSISSIPPI MEDICAL LICENSE NUMBER 14223

Dr. Harron was not present or represented by legal counsel. Mr. Ingram advised the Board that the investigative staff had attempted to summon Dr. Harron by certified letter but to date the return receipt has not been received. Mr. Ingram advised that the Executive Committee had discussed Dr. Harron's case on Wednesday, wherein it was revealed that the State of Texas has already taken action against Dr. Harron. The order from Texas was an agreed order in which Dr. Harron agreed not to renew his Texas license when it expires in June, and prohibits Dr. Harron from practicing in that State during the remaining period. Dr. Harron also agreed never to petition the Board for reinstatement. Mr. Ingram stated if it is the will and pleasure of the Board, Mississippi can mirror Texas' actions. Motion was made by Dr. Mayo, seconded by Dr. Conerly, and carried unanimously to mirror the actions taken by Texas.

HEARING IN THE CASE OF GLYN R. HILBUN, M.D., MADISON, MISSISSIPPI MEDICAL LICENSE NUMBER 04679

Dr. Hilbun was not present or represented by legal counsel. Mr. Ingram advised that he had received a letter from Dr. Hilbun's attorney, Cynthia H. Speetjens, requesting a continuance due to a scheduling conflict.

Motion was made by Dr. Mayo, seconded by Dr. Conerly, and carried unanimously to grant the continuance until July 12, 2007. The Order of Continuance is attached hereto and incorporated by reference.

HEARING IN THE CASE OF KEVIN S. COOPER, M.D., PASCAGOULA, MISSISSIPPI MEDICAL LICENSE NUMBER 13038

Dr. Cooper was not present or represented by legal counsel. Mr. Ingram advised that Dr. Cooper's attorney, Earl Denham, had requested a continuance until the July 12, 2007, meeting.

Motion was made by Dr. Conerly, seconded by Dr. Gibson, and carried unanimously to grant the continuance until July 12, 2007. The Order of Continuance is attached hereto and incorporated by reference.

APPROVAL OF "A BRIDGE TO RECOVERY" TREATMENT FACILITY TO BE ADDED TO BOARD'S APPROVED FACILITIES LIST

Dr. Crawford advised that this matter was discussed at the Executive Committee meeting and determined that more information is needed. Also, Dr. Crawford advised that the Board plans to have the facility make a presentation at the July meeting.

FINAL ADOPTION OF REGULATION CONCERNING USE OF LASER DEVICES

Motion was made by Dr. Aycock, seconded by Dr. Mayo, and carried unanimously to adopt in final form the amendment to the Board's Regulation **Concerning Use of Laser Devices**, a copy of which is attached hereto and incorporated by reference. The amended regulation will be filed with the Secretary of State under the Administrative Procedures Act.

FINAL ADOPTION OF THE FOLLOWING LICENSURE REGULATIONS

- I. LICENSURE REGULATIONS GOVERNING THE PRACTICE OF MEDICAL DOCTORS, OSTEOPATHIC PHYSICIANS AND PODIATRISTS
- II. LICENSURE BY EXAMINATION M.D. AND/OR D.O.
- III. LICENSURE BY RECIPROCITY OR ENDORSEMENT M.D. AND/OR D.O.
- IV. LICENSURE EXAMINATION
- V. LIMITED INSTITUTIONAL LICENSURE
- VI. LICENSURE BY EXAMINATION PODIATRIC MEDICINE
- VII. LICENSURE BY RECIPROCITY OR ENDORSEMENT PODIATRIC MEDICINE
- X. TEMPORARY LICENSE
- XI. DUTY TO NOTIFY BOARD OF CHANGE OF ADDRESS
- XII. RELEASE OF MEDICAL RECORDS
- XVII. RULES OF PROCEDURE
- XXI. CME REQUIREMENTS FOR STATE OF MISSISSIPPI PHYSICIANS, OSTEOPATHIC PHYSICIANS AND PODIATRISTS
- XXII. REGULATIONS GOVERNING THE PRACTICE OF PHYSICIAN ASSISTANTS

Motion was made by Dr. Aycock, seconded by Dr. Mayo, and carried unanimously to adopt in final form the amendments to the Board's **Licensure Regulations**. Copies are attached hereto and incorporated by reference. The amended regulations will be filed with the Secretary of State under the Administrative Procedures Act.

OTHER BUSINESS

Dr. Easterling asked for additional clarification on the 30 minutes or 30 mile community definition concerning physician assistants. Marla Moore, President-Elect of the Mississippi Academy of Physician Assistants, requested a meeting with MSBML to define community in the regulation. After a brief discussion, Dr. Crawford referred the matter to the Scope of Practice Committee.

THE BOARD RECESSED AT 10:30 A.M. AND RECONVENED AT 11:10 A.M.

HEARING IN THE CASE OF CHARLES S. KNIGHT, M.D., JACKSON, MISSISSIPPI MEDICAL LICENSE NUMBER 06210

Dr. Knight was not present but was represented by legal counsel, Joel Howell, III. Mr. Ingram introduced Mr. Howell and advised that Mr. Howell was here to request a continuance in Dr. Knight's hearing and also to request a two-day special setting. Mr. Ingram advised that the Board can recommend the hearing before the Executive Committee and have a recorded transcript from a court reporter. Mr. Howell is making this request pursuant to Miss. Code Ann. 73-25-37.

After a brief discussion, Mr. Ingram advised that the Executive Committee has the authority to make a decision and if Dr. Knight disagrees then the hearing would go before the Full Board but only in the form of a transcript of the hearing.

After further discussion, motion was made by Dr. Conerly, seconded by Dr. V. Crawford, and carried unanimously to grant the continuance for a special hearing with the date and time agreed upon by both parties and the Executive Director to designate the three (3) members of the Board to hear the case.

HANDLING OF POSITIVE BACKGROUND CHECK RESULTS

For informational purposes only, Dr. Craig advised that the Executive Committee had discussed handling of positive background checks. The Executive Committee unanimously agreed that the Executive Director should review and handle on a case-by-case basis. Issuing of licenses will be delayed until all results are received.

For informational purposes only, Dr. Craig advised that the Executive Committee had discussed falsification of information or omission of substance information on applications. The Executive Committee unanimously agreed that the Executive Director review on a case-by-case basis and determine to handle with the individual or bring before the Executive Committee in a show cause hearing.



DUPLICATE WALLET CARD FEE

For informational purposes only, Dr. Craig advised that the Executive Committee had unanimously approved an increase for duplicate wallet cards. We have a new wallet card that includes a bar code on the back containing pertinent information on the physician to be used during emergency situations. The cost of the duplicate wallet card is currently \$10.00 and the Executive Committee agreed to increase the fee to \$20.00.

ADJOURNMENT

The meeting adjourned at 11:55 A.M. with the next meeting scheduled for Thursday, July 12, 2007.

Dewitt G. Crawford, M.D.

President

Minutes taken and transcribed by Sherry Harris Administrative Assistant May 17, 2007



NOTICE OF PROPOSED RULE ADOPTION



STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Mississippi State Board of Medical Licensure

Specific Legal Authority authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule_Section 73-43-11

c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended
(601) 987-3079 rhonda@msbml.state.ms.us	
Explanation of the Purpose of the Proposed Rule and the This regulation addresses physicians who wish to do a approved training program.	reason(s) for proposing the rule: {Insert here} an elective rotation through a Mississippi ACGME
This rule is proposed as a ☑Final Rule, and/or a ☐ Temporary Rule (Check one or both boxers as applicable.)	
Persons may present their views on the proposed rule by address. Persons making comments should include their if you are an agent or attorney, the name, address and tel	name and address, as well as other contact information, and
Oral Proceeding: Check one box below:	
An oral proceeding is scheduled on this rule on D Place:	Date: Time:
the above address at least day(s) prior to the p	oral proceeding you must make a written request to the agency at proceeding to be placed on the agenda. The request should ell as other contact information; and if you are an agent or f the party or parties you represent.
will be held if a written request for an oral proceedir persons. The written request should be submitted to (20) days after the filing of this notice of proposed re	Where an oral proceeding is not scheduled, an oral proceeding is submitted by a political subdivision, an agency or ten (10) the agency contact person at the above address within twenty ule adoption and should include the name, address and telephone you are an agent or attorney, the name, address and telephone
Economic Impact Statement: Check one box below:	
☑ The agency has determined that an economic imp	act statement is not required for this rule, or
The concise summary of the economic impact statement required is attached.	
The entire text of the Proposed Rule including the text of any	rule being amended or changed is attached.
Date Rule Proposed: May 17, 2007	Proposed Effective Date of Rule: 30 days from final filing.

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079 FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

May 17, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This is a new regulation. It provides physicians who are training in an out-of-state training program and wish to do an elective rotation through a Mississippi residency program an avenue of licensure in Mississippi.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

XXXIII. TEMPORARY TRAINING LICENSE FOR OUT-OF-STATE RESIDENTS

An individual enrolled in an out-of-state postgraduate training program wishing to rotate through an ACGME or AOA approved training program within Mississippi, shall not be required to obtain a restricted temporary license provided the rotation lasts no longer than four (4) weeks. However, the individual must submit the following to the Board:

- 1. a completed information form which has been supplied by the Board;
- 2. a letter from the physician's postgraduate training program stating that he or she is going to be participating in a rotation in Mississippi and the duration;
- 3. a letter from the training program in Mississippi stating the physician will be training with them and the duration;
- 4. verification of a current license (limited or training), permit, or letter from the state in which the individual is enrolled in a training program; and
- 5. a licensure fee in the amount of \$50.

The individual may not participate in the Mississippi training program until a valid training license has been issued. The license will be effective the date the individual is to begin the Mississippi rotation and will become null and void the day the individual completes the rotation.

If during the duration of the training, it is determined that the physician may stay longer than four (4) weeks, the temporary training license may be renewed for an additional four (4) weeks. Under no circumstances will the license be renewed after eight (8) weeks. An individual anticipating on rotating through a Mississippi training program for a period longer than eight (8) weeks shall be required to obtain a Restricted Temporary Medical License.

The Board reserves the right to deny issuance of a temporary training license as provided herein based on any of the statutory grounds as enumerated in Mississippi Code, Sections 73-25-29 and 73-25-83.

BEFORE THE MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

GLYN R. HILBUN, M.D.

ORDER OF CONTINUANCE

THIS MATTER came on regularly for hearing on May 17, 2007, before the Mississippi State Board of Medical Licensure, in response to a request for continuance of the hearing set for this date made by Glyn R. Hilbun, M.D. (hereinafter "Licensee"). After consideration of the matter, the Board finds Licensee's motion to be well taken.

IT IS, THEREFORE, ORDERED, that this matter is continued until July 12, 2007, at 10:00 a.m.

SO ORDERED, this the 17th day of May, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

H. Vann Craig, M.D.

Executive Director, Mississippi State Board of

Medical Licensure

BEFORE THE MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

KEVIN SCOTT COOPER, M.D.

ORDER OF CONTINUANCE

THIS MATTER came on regularly for hearing on May 17, 2007, before the Mississippi State Board of Medical Licensure, in response to a request for continuance of the hearing set for this date made by Kevin Scott Cooper, M.D. (hereinafter "Licensee"). After consideration of the matter, the Board finds Licensee's motion to be well taken.

IT IS, THEREFORE, ORDERED, that this matter is continued until July 12, 2007, at 10:00 a.m.

SO ORDERED, this the 17th day of May, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

H. Vann Craig, M.D.

Executive Director, Mississippi State Board of

Medical Licensure

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



MISSISSIPPI SECRETARY OF STATE

Mississippi State Board of Medical Licensure c/o Rhonda Freeman	Specific Legal Authority Authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule_Section 73-43-11			
1867 Crane Ridge Drive, Suite 200-B)			
Jackson, MS 39216 (601) 987-3079 rhonda@msbml.state.ms.us	Reference to Rules repealed, amended or suspended by the Proposed Rule: {Insert citation to specific rule(s) repealed, amended or suspended XIX. Regulation Concerning Use of Laser Devices			
Date Rule Proposed:				
Explanation of the Purpose of the Proposed Rule and				
This regulation amends the Board's regulation concerning	g the use of laser devices to include pulsed light or similar devices.			
The Army Duty Male Decoder the male in held				
	ing any written comments received during the comment period public inspection by contacting the Agency at the above address.			
An oral proceeding was held on this rule:				
Date:				
Time: Place:				
An oral proceeding was not held on this rule				
The Agency has considered the written comments and	d the presentations made in any oral proceedings, and			
This rule as adopted is without variance from	the proposed rule.			
This rule as adopted differs from the propose rather than the substance of the rule.	d rule as there are minor editorial changes which affect the form			
the Notice of Proposed Rule Adoption and the c	Proposed Rule Adoption, the logical outgrowth of the contents of			

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

May 17, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Division Director

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

May 17, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This regulation amends the Board's regulation concerning the use of laser devices to include pulsed light or similar devices.

XIX. REGULATION CONCERNING USE OF LASER DEVICES

The use of laser, pulsed light or similar devices, either for invasive or cosmetic procedures, is considered to be the practice of medicine in the State of Mississippi and therefore such use shall be limited to physicians and those directly supervised by physicians, such that a physician is on the premises and would be directly involved in the treatment if required.

Adopted March 18, 1999. Amended May 19, 2005. Amended January 18, 2007. Amended May 17, 2007.

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216 (601) 987-3079 rhonda@msbml.state.ms.us	Specific Legal Authority Authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule_Section 73-43-11 Reference to Rules repealed, amended or suspended by the Proposed Rule: {Insert citation to specific rule(s) repealed, amended or suspended 1. Licensure Regulations		
Date Rule Proposed: Explanation of the Purpose of the Proposed Rule and	the reason(s) for proposing the rule		
The changes in this regulation reflect an attempt to simplify and			
	}		
	ng any written comments received during the comment period public inspection by contacting the Agency at the above address.		
An oral proceeding was held on this rule:			
Date: Time: Place:			
An oral proceeding was not held on this rule.			
The Agency has considered the written comments and	the presentations made in any oral proceedings, and		
This rule as adopted is without variance from	the proposed rule.		
This rule as adopted differs from the proposed rather than the substance of the rule.	d rule as there are minor editorial changes which affect the form		
the Notice of Proposed Rule Adoption and the co	Proposed Rule Adoption, the logical outgrowth of the contents of		

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

be the rule in question.

May 17, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: May 17, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

The changes to Regulation I. Licensure Regulations, reflect the Board's attempt to simplify current language.

I. LICENSURE REGULATIONS GOVERNING THE PRACTICE OF MEDICAL DOCTORS, OSTEOPATHIC PHYSICIANS AND PODIATRISTS

A. SCOPE

These regulations apply to all applicants for licensure to practice medicine, osteopathic medicine or podiatric medicine in the State of Mississippi whether by examination or by endorsement, and to all individuals practicing medicine, osteopathic medicine or podiatric medicine within the State whether licensed or unlicensed.

B. DEFINITIONS

- 1. For the purpose of Article I only, the following terms have the meanings indicated:
 - a. "Board" means the Mississippi State Board of Medical Licensure.
 - b. "ECFMG" means the Education Commission for Foreign Medical Graduates.
 - c. "FLEX" means the Federation Licensing Examination administered through the Federation of State Medical Boards of the United States, Incorporated
 - d. "USMLE" means United States Medical Licensing Examination administered jointly through the Federation of State Medical Boards of the United States, Incorporated, and the National Board of Medical Examiners.
 - e. "NBME" means National Board of Medical Examiners.
 - f. "NBOME" means the National Board of Osteopathic Medical Examiners.
 - g. "SPEX" means the Special Purpose Examination administered through the Federation of State Medical Boards of the United States, Incorporated.

- h. "Foreign Medical School" means any medical college or college of osteopathic medicine located outside the United States, Canada or Puerto Rico.
- i. "LCME" means the Liaison Committee on Medical Education, the organization recognized by the American Medical Association for accrediting American medical schools.
- j. "LMCC" means Licentiate of the Medical Council of Canada.
- k. "AOA" means American Osteopathic Association.
- "ACGME" means Accreditation Council of Graduate Medical Education.
- m. "Good Moral Character" as applied to an applicant, means that the applicant has not, prior to or during the pendency of an application to the Board, been guilty of any act, omission, condition or circumstance which would provide legal cause under Section 73-25-29 or Section 73-25-83, Mississippi Code (1972), as amended, for the suspension or revocation of medical licensure.
- 2. Masculine terms wheresoever used in this regulation shall also be deemed to include the feminine.
- 3. The word "article" wheresoever used in these regulations shall mean "regulation."

C. DUTY TO OBTAIN LICENSE

- Any physician, osteopathic physician, or podiatrist desiring to practice in this state must first obtain a license to do so by contacting the Mississippi State Board of Medical Licensure at its current address or website address.
- When an inquiry concerning licensure is received, an application eliciting certain pertinent information is sent to the practitioner. The practitioner must complete an application and submit it to the Board in a manner prescribed by the Board. References submitted on the application are queried, as well as the American Medical, Osteopathic, or Podiatry Associations, Federation of State Medical Boards, National Practitioners Data Bank, other states in which the practitioner is or has been licensed, entities where the practitioner is or has been employed, and hospitals where the practitioner has held staff privileges.

- 3. A physician, osteopathic physician, or podiatrist who is participating in or who has participated in an impaired professionals/disabled doctors program as approved by the Board must document a two-year period of abstinence from any abusive use of mood-altering drugs, which shall include, but not be limited to, alcohol and all substances listed in Schedules I through V of the Uniform Controlled Substances Law, Mississippi Code (1972) Annotated, from the date of completion of the program before he is eligible for a permanent license to practice medicine/podiatry in Mississippi.
- 4. Prior to the issuance of, or reinstatement of a license, any physician, osteopathic physician, or podiatrist who has not actively practiced for a three (3) year period shall be required to participate in a Board approved physician assessment program and/or clinical skills assessment program to assure post-licensure competency.

A physician, osteopathic physician or podiatrist shall be deemed to have not "actively" practiced medicine if during said three (3) year period the physician, osteopathic physician or podiatrist has not treated any patients for remuneration, other than friends and family.

This section excludes those physicians, osteopathic physicians, or podiatrists who perform charity work or work in research.

Amended April 15, 1999. Amended May 17, 2007.

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



Mississippi State Board of Medical Licensure c/o Rhonda Freeman	Rule: {Insert citation to state or federal statute, or rule_Section 73-43-11				
1867 Crane Ridge Drive, Suite 200-B)				
Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: (Insert citation to specific rule(s) repealed,				
(601) 987-3079	amended or suspendedft. Licensure by Examination - M.D. and/or D.O.				
rhonda@msbml.state.ms.us	}				
Date Rule Proposed:					
Explanation of the Purpose of the Proposed Rule and	the reason(s) for proposing the rule:				
The changes in this regulation reflect an attempt to simplify and	update current language.				
· · ·					
	}				
and the record of any oral proceeding is available for An oral proceeding was held on this rule: Date: Time: Place:	public inspection by contacting the Agency at the above address.				
An oral proceeding was not held on this rule	•				
The Agency has considered the written comments and	I the presentations made in any oral proceedings, and				
This rule as adopted is without variance from	the proposed rule.				
This rule as adopted differs from the proposed rather than the substance of the rule.	d rule as there are minor editorial changes which affect the form				
the Notice of Proposed Rule Adoption and the co	Proposed Rule Adoption, the logical outgrowth of the contents of				

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

May 17, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

May 17, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

The changes to Regulation II, Licensure by Examination - M.D. and/or D.O., reflect the Board's attempt to simplify current language.

II. LICENSURE BY EXAMINATION - M.D. AND/OR D.O.

- A. To qualify for admission by examination, an individual shall meet the following requirements, provided that the Board may admit any individual to the examination while reserving its right to deny licensure if that individual fails to meet all requirements for licensure subsequent to success or completion of the examination:
 - 1. Applicant must satisfy the Board that he is at least twenty-one (21) years of age and of good moral character.
 - 2. Present a diploma from a reputable medical college or college of osteopathic medicine, subject to the following conditions:
 - a. If the degree is from a medical college or a college of osteopathic medicine in the United States or Puerto Rico, the medical college must be accredited by the Liaison Committee on Medical Education (LCME), a Joint Committee of the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA), or if a college of osteopathic medicine, must be accredited by the Professional Education Committee of the American Osteopathic Association (AOA).
 - b. If the degree is from a Canadian medical school, the school must be accredited by the Liaison Committee on Medical Education (LCME) and by the Committee on Accreditation for Canadian Medical Schools, as sponsored by the Canadian Medical Association and Association of Canadian Medical Colleges.
 - c. If the degree is from a foreign medical school, applicant must either (i) possess a valid certificate from the ECFMG or (ii) document successful completion of a Fifth Pathway program, as described in Article II, B below.
 - d. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - 3. Applicants for licensure by examination must present documentation of having completed at least one (1) year of postgraduate training in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or by the AOA; or training in Canada

accredited by the Royal College of Physicians and Surgeons.

- 4. Present certified copy of birth certificate or valid passport.
- 5. Subject to the provisions of Article IV below, an applicant must successfully complete and pass all parts/steps of the FLEX or USMLE.
- 6. Must complete an application for medical license and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph.
- 7. Submit fee prescribed by the Board; however, any fees related to permanent licensure may be deferred for applicants indicating a desire to practice medicine under a Temporary License or Limited License within the confines of an ACGME or AOA approved postgraduate training program pursuant to Section X.A.1. or Section V. of these regulations.
- 8. Must appear for a personal interview in the office of the Mississippi State
 Board of Medical Licensure and successfully pass the Jurisprudence
 Examination as administered by the Board.
- B. A Fifth Pathway Program, as a prerequisite for licensure by examination pursuant to Article II, A2d above, will be considered on an individual basis. Students who have completed the academic curriculum in a foreign medical school and who have fulfilled the conditions set forth, may be offered the opportunity to substitute for an internship required by the foreign medical school, an academic year of supervised clinical training prior to entrance into the first year of ACGME- or AOA-approved postgraduate medical education. The supervised clinical training (Fifth Pathway) must be under the direction of a medical school accredited by the LCME. Fifth Pathway will be available to students who have fulfilled the following conditions:
 - Completed, in an accredited American college or university, undergraduate pre-medical work of the quality acceptable for matriculation in an accredited U.S. medical school,
 - Studied medicine at a medical school located outside the United States, Puerto Rico and Canada but which is recognized by the World Health Organization, and

3. Completed all of the formal requirements of the foreign medical school except internship and/or social service.

Amended May 17, 2007.

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



Mississippi State Board of Medical Licensure c/o Rhonda Freeman	Rule: (Insert citation to state or federal statute, or rule_Section 73-43-11				
1867 Crane Ridge Drive, Suite 200-B	}				
Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: (Insert citation to specific rule(s) repealed, amended or suspended III. Licensure by Reciprocity or Endorsement M.D.				
(601) 987-3079					
rhonda@msbml.state.ms.us	and/or D.O.				
Date Rule Proposed:					
Explanation of the Purpose of the Proposed Rule and	the reason(s) for proposing the rule:				
-The changes in this regulation reflect an attempt to simplify and	update current language.				
	}				
	ing any written comments received during the comment period public inspection by contacting the Agency at the above address.				
An oral proceeding was not held on this rule					
The Agency has considered the written comments and	I the presentations made in any oral proceedings, and				
This rule as adopted is without variance from	the proposed rule.				
This rule as adopted differs from the propose rather than the substance of the rule.	d rule as there are minor editorial changes which affect the form				
the Notice of Proposed Rule Adoption and the c	Proposed Rule Adoption, the logical outgrowth of the contents of				

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

May 17, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Division Director

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: May 17, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

The changes to Regulation III, Licensure by Reciprocity or Endoresement M.D. and/or D.O., reflect the Board's attempt to simplify current language.

III. LICENSURE BY RECIPROCITY OR ENDORSEMENT - M.D. AND/OR D.O.

- A. The Board endorses, for the purpose of reciprocity, licenses to practice medicine obtained in most states by written examination prior to March 8, 1973. Subject to the provisions of Article IV below, all applicants for medical licensure by reciprocity who took the FLEX between March 8, 1973, and January 24, 1985, must have passed the FLEX taken in one three-day sitting with a weighted average of 75 or higher in order to obtain licensure in Mississippi. The Board will not accept scores of more than one administration of the FLEX which have been combined (factored) to provide a FLEX weighted average of 75 or higher. From and after January 24, 1985, an applicant for medical licensure by reciprocity must have passed both Components I and II of the FLEX with a score of 75 to be considered the passing grade for each component. From and after June, 1994, the Board shall endorse, for the purpose of reciprocity, licenses to practice medicine from applicants who have successfully taken Steps 1, 2 and 3 of the USMLE.
- B. Those doctors of osteopathic medicine who graduated prior to June 1, 1973, and who make application for licensure by reciprocity with another state will be considered only if they took and passed the same written licensure examination given in that state at that time to graduates of medical schools. A statement to this effect will be obtained by this Board from that licensing board.
- C. The Board may affiliate with and recognize for the purpose of waiving examination and may grant licenses to Diplomats of the NBME; on or after February 13, 1973, to Diplomats of the NBOME and licentiates of the Medical Council of Canada. If a Diplomat of the NBME or NBOME, the applicant must have a Certification of Endorsement from that Board submitted directly to the Board. If seeking endorsement with the Medical Council of Canada, the applicant must have a Certificate of Standing submitted directly to the Board.
- D. The applicant must have the state board where the original license was obtained by examination submit a certified copy of the examination to the Board.
- E. The Board may grant a license by reciprocity to a graduate of a foreign medical school who was licensed in another state by written examination prior to March 8, 1973, if he is certified by an American Board of Medical Specialties. A statement verifying that the applicant is currently certified must be submitted directly to the Board by the American Board of Medical Specialties Board. The applicant must comply with all other licensure requirements for foreign medical graduates.
- F. In addition to the above requirements for licensure by reciprocity and/or endorsement, an individual shall meet the following requirements:

- 1. Applicant must be twenty-one (21) years of age, of good moral character.
- 2. Present a diploma from a reputable medical college or college of osteopathic medicine, subject to the following conditions:
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. If the degree is from a medical college or a college of osteopathic medicine in the United States or Puerto Rico, the medical college must be accredited by the Liaison Committee on Medical Education (LCME), a Joint Committee of the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA) or the College of Osteopathic Medicine must be accredited by the American Osteopathic Association (AOA).
 - c. If the degree is from a Canadian medical school, the school must be accredited by the Liaison Committee on Medical Education (LCME) and by the Committee on Accreditation for Canadian Medical Schools, as sponsored by the Canadian Medical Association and Association of Canadian Medical Colleges.
 - d. If the degree is from a foreign medical school, applicant must either (i) possess a valid certificate from the ECFMG or (ii) document successful completion of a Fifth Pathway program, as described in Article II, B above, and be currently Board Certified by a Specialty Board recognized by the American Board of Medical Specialties or the American Osteopathic Association.

- 3. If a graduate from a medical college or college of osteopathic medicine in the United States, Canada or Puerto Rico, applicant must present documentation of having completed at least one (1) year of postgraduate training in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or by the AOA; or training in Canada accredited by the Royal College of Physicians and Surgeons.
- 4. If a graduate from a foreign medical school, applicant must present documentation of having completed either (i) three (3) or more years of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of Physicians and Surgeons or (ii) at least one year of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of Physicians and Surgeons, be currently Board certified by a Specialty Board recognized by the American Board of Medical Specialties or the American Osteopathic Association and will be based upon approval by the Mississippi State Board of Medical Licensure.
- 1. An applicant who otherwise possesses all of the qualifications for licensure by reciprocity/ endorsement, but has not taken a medical proficiency examination or licensure examination within ten (10) years prior to filing his or her application, must pass the Special Purpose Examination (SPEX)* as administered by and under auspices of the Board, unless the applicant:
 - a. Submits satisfactory proof of current certification by an American Board of Medical Specialties or American Osteopathic Association approved specialty board; or
 - b. Submits proof that the applicant's sole purpose for seeking licensure is to serve as the Dean, Chairman of the Department or Faculty of the University of Mississippi School of Medicine. In such case, a license shall remain in effect so long as Licensee is a member of the faculty of the University School of Medicine.
- 2. Present certified copy of birth certificate or valid passport.

SPEX (SPECIAL PURPOSE EXAMINATION) is a cognitive examination assisting licensing jurisdictions in their assessment of current competence requisite for general, undifferentiated medical practice by physicians who hold or have held a valid license in a U.S. jurisdiction. SPEX is made available through the Federation of State Medical Boards of the United States, Incorporated.

- 3. Must complete an application for medical license and submit it to the Board in a manner prescribed by the Board with a recent passport type photograph.
- 4. Submit fee prescribed by the Board.
- 5. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- G. Graduates of foreign medical schools seeking licensure by reciprocity or endorsement via Fifth Pathway Programs will be considered on an individual basis subject to those requirements set forth in Section II, B above.

Amended May 17, 2007.

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B	Specific Legal Authority Authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule_Section 73-43-11			
Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the Proposed Rule: (Insert citation to specific rule(s) repealed,			
(601) 987-3079	amended or suspended IV. Licensure Examinations			
rhonda@msbml.state.ms.us				
Date Rule Proposed:				
Explanation of the Purpose of the Proposed Rule and				
The changes in this regulation reflect an attempt to simplify and	update current language.			

The Agency Rule Making Record for this rule including any written comments received during the comment period and the record of any oral proceeding is available for public inspection by contacting the Agency at the above address.

	An oral	proceeding	was	held	on	this	rule
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Date:

Time:

Place:

An oral proceeding was not held on this rule.

The Agency has considered the written comments and the presentations made in any oral proceedings, and

<u> </u>	Jinis	rule	as	adopted	18	without	variance	from	tne	proposea	ruie.

This rule as adopted differs from the proposed rule as there are minor editorial changes which affect the form rather than the substance of the rule.

The rule as adopted differs from the proposed rule. The differences however are:

Within the scope of the matters in the Notice of Proposed Rule Adoption, the logical outgrowth of the contents of the Notice of Proposed Rule Adoption and the comments submitted in response thereto, and

The Notice of Proposed Rule Adoption provided fair warning that the outcome of the proposed rule adoption could be the rule in question.

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

May 17, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Division Director

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

May 17, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

The changes to Regulation IV, Licensure Examinations, reflect the Board's attempt to simplify current language.

IV. LICENSURE EXAMINATIONS

For the purpose of licensing by examination and reciprocity, the Board recognizes three (3) separate and distinct examinations, to-wit: The examinations administered by the NBME, FLEX and USMLE. The Board adopted the FLEX as a method of licensure by examination on March 8, 1973. Prior to this date, the Board administered a written examination and endorsed, for the purposes of reciprocity, licenses to practice medicine or osteopathic medicine obtained in most states by written examination. A separate discussion of each examination and this Board's requirements for the purpose of licensure is as follows:

A. FLEX

- 1. The Board adopted the Federation Licensing Examination (FLEX) as the method of licensure by examination on March 8, 1973. The last regular administration of the FLEX was December, 1993. The Board will recognize FLEX as a valid medical licensing examination subject to all requirements heretofore and hereinafter set forth.
- 2. Prior to January 24, 1985, the FLEX examination was divided into three components:

Day I - Basic Science Day II - Clinical Science Day III - Clinical Competence

In order to pass this examination, each applicant must have obtained a FLEX weighted average of 75 with Day I given a value of 1/6 of the entire examination, Day II given a value of 2/6, and Day III given a value of 3/6. The Board may make an exemption to the weighted average of 75 if the applicant has completed an approved residency program and is currently board certified by a specialty board recognized by the American Board of Medical Specialties or the American Osteopathic Association.

After January 24, 1985, the Board has approved administration of a new FLEX examination with a different design from that administered since 1973. This examination is a three-day examination, and is comprised of two components. Component I consists of one and one-half (1½) days and judges the readiness of a physician to practice medicine in a supervised setting. Component II consists of one and one-half (1½) days and judges the readiness of a physician to practice independently. A score of 75 is considered a passing grade for each component. If taken separately, Component I must be passed before taking Component II.

1. An applicant has seven (7) years in which to pass both components of the FLEX. An applicant is required to repeat only that component failed. A candidate who is unsuccessful in passing the FLEX after three (3) attempts will be required to take one additional year of post-graduate training approved by the Accreditation Council for Graduate Medical Education (ACGME) before being eligible to take the FLEX again. Following completion of the year of post- graduate training, applicant may be allowed three (3) additional attempts to pass the FLEX.

B. USMLE

- 1. The Board adopted the United States Medical Licensing Examination (USMLE) as an additional method of licensure by examination on September 16, 1993. The USMLE replaces FLEX and the NBME certification examinations during a phase-in period from 1992 to 1994. Unlike the three-day (two component) FLEX, USMLE is a three-step examination that consists of three two-day examinations, Step 1, Step 2 and Step 3. Each step is complementary to the other; no step can stand alone in the assessment of readiness for medical licensure. Unlike the FLEX, which must be taken upon or after graduation from medical school, most applicants will take Step 1 and 2 of the USMLE during their medical school years. Step 3 will be taken after graduation.
- 2. To be eligible for Step 1 or Step 2 of the USMLE, an applicant must be an officially enrolled medical student or a graduate of a United States, Puerto Rican or Canadian medical school accredited by the LCME or the AOA, or an officially enrolled medical student or a graduate of a foreign medical school and eligible for examination by the ECFMG for a certificate.

- 3. To be eligible to take Step 3 of USMLE, an applicant must, (a) complete an application for a Mississippi medical license and, (b) meet all other requirements for licensure, as provided in Section II above.
- 4. A score of 75 is necessary to successfully pass each step of the USMLE.
- beginning when the examinee passes his first Step. The Board, at its discretion, may waive this requirement based on extraordinary circumstances. The Board encourages all applicants to take Step 3 of the USMLE as soon as possible following receipt of the M.D. or D.O. degree. An applicant has seven (7) years in which to pass all steps of the USMLE. A candidate who is unsuccessful in passing Step 3 after 3 (three) attempts will be required to take one (1) additional year of ACGME-approved postgraduate training before being eligible to take Step 3 again. Following completion of the year of postgraduate training, the applicant may be allowed three (3) additional attempts to pass Step 3 of the USMLE.

C. NBME or NBOME

The Board recognizes for the purpose of reciprocity and waiving examination, diplomats of the NBME and on or after February 13, 1973, diplomats of the NBOME. Both examinations are administered in three (3) parts, Parts I, II and III. Applicants must have the NBME or NBOME submit a certificate evidencing successful completion of the exam directly to the Board.

D. EXAM COMBINATIONS

Now that the FLEX and examinations administered by the NBME have been phased out, the Board will accept passing scores for the following combinations of the FLEX, NBME and USMLE examinations:

EXAMINATION SEQUENCE	ACCEPTABLE COMBINATIONS
NBME Part I plus NBME Part II plus NBME Part III	NBME Part I or USMLE Step 1 plus NBME Part II or USMLE Step 2 plus NBME Part III or USMLE Step 3
FLEX Component I plus FLEX Component II	FLEX Component I plus USMLE Step 3 or NBME Part I or USMLE Step 1 plus NBME Part II or USMLE Step 2 plus FLEX Component II
USMLE Step 1 plus USMLE Step 2 plus USMLE Step 3	

Amended September 13, 1997. Amended January 18, 2001. Amended February 18, 2003. Amended May 17, 2007.

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



MISSISSIPPI SECRETARY OF STATE

Specific Legal Authority Authorizing the promulgation of Mississippi State Board of Medical Licensure Rule: (Insert citation to state or federal statute, or c/o Rhonda Freeman rule Section 73-43-11 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216 Reference to Rules repealed, amended or suspended by the Proposed Rule: (Insert citation to specific rule(s) repealed. amended or suspended V. Limited Institutional Licensure (601) 987-3079 rhonda@msbml.state.ms.us Date Rule Proposed: Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: The changes in this regulation reflect an attempt to simplify and update current language. The Agency Rule Making Record for this rule including any written comments received during the comment period and the record of any oral proceeding is available for public inspection by contacting the Agency at the above address. An oral proceeding was held on this rule: Date: Time: Place: An oral proceeding was not held on this rule. The Agency has considered the written comments and the presentations made in any oral proceedings, and This rule as adopted is without variance from the proposed rule. This rule as adopted differs from the proposed rule as there are minor editorial changes which affect the form rather than the substance of the rule. The rule as adopted differs from the proposed rule. The differences however are: Within the scope of the matters in the Notice of Proposed Rule Adoption, the logical outgrowth of the contents of the Notice of Proposed Rule Adoption and the comments submitted in response thereto, and The Notice of Proposed Rule Adoption provided fair warning that the outcome of the proposed rule adoption could be the rule in question.

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

May 17, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Division Director

TELEPHONE: (601) 987-3079 FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

May 17, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

The changes to Regulation V, Limited Institutional Licensure, reflect the Board's attempt to simplify current language.

V. LIMITED INSTITUTIONAL LICENSURE

Pursuant to Section 73-25-23, Mississippi Code (1972) Annotated, a Limited Institutional License is available only to graduates of foreign medical schools who are employed or are being considered for employment to practice medicine in one or more of the following Mississippi state-supported institutions located in the same county.

It is understood that graduates of foreign medical schools holding a Limited Institutional License, and who are employed by and enrolled in an approved ACGME or AOA postgraduate training program at the University of Mississippi Medical Center, shall be authorized to participate in any postgraduate educational program at the University of Mississippi Medical Center, or any of its affiliated training program sites.

- A. An application for limited institutional licensure may be obtained only upon the written request of the director of one of the above-named institutions which have employed or is considering employing a graduate of a foreign medical school to practice medicine.
- B. A limited institutional license may be issued for a period of one (1) year for practice in a particular institution after a review and favorable recommendations by a majority of the following:
 - 1. President or Secretary, Board of Trustees of Institution
 - 2. Director of Institution
 - 3. President or Secretary, Local Chartered Medical Society in area in which institution is located
 - 4. Member, Board of Trustees, Mississippi State Medical Association in area in which institution is located
 - 5. Member, Mississippi State Board of Medical Licensure from district in which institution is located
 - 6. Executive Officer, Mississippi State Board of Medical Licensure
- C. In addition to the above requirements for a limited institutional license, an applicant shall meet the following requirements:
 - 1. Must be at least twenty-one (21) years of age, of good moral character.

- 2. Must present original diploma from a reputable medical college or reputable college of osteopathic medicine.
- 3. Must submit certified copy of valid certificate from the ECFMG or its successor.
- 4. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
- 5. Must submit an application completed in every detail with recent passport type photograph.
- 6. Must submit fee prescribed by the Board.
- 7. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- D. Pursuant to Section 73-25-23, Mississippi Code (1972) Annotated, a limited institutional license must be renewed annually, after such review as the State Board of Medical Licensure considers necessary. A graduate of a foreign medical school so licensed may hold such limited institutional license no longer than five (5) years; provided, however, that any graduate of a foreign medical school so licensed and employed by any state institution on January 1, 1981, shall not be subject to the five-year limitation created by statute. Based upon the above law:
 - 1. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution on January 1, 1981, shall be renewable annually based upon the favorable recommendation of the director of the institution by which the licensee is employed.

- 2. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution from January 2, 1981, through June 30, 1983, shall be renewable annually for five years, beginning July 1, 1983, based upon the favorable recommendation of the director of the institution by which the licensee is employed.
- 3. The limited institutional licenses of graduates of foreign medical schools so licensed and employed by a state institution on and after July 1, 1983, shall be renewable annually based upon the favorable recommendation of the director of the institution by which the licensee is employed. A graduate of a foreign medical school so licensed may hold such limited institutional license no longer than five (5) years.
- E. Since a limited institutional license is issued to a graduate of a foreign medical school for employment to practice medicine in a particular Mississippi state-supported institution, or institutions located in the same county, such limited institutional license shall become void immediately upon termination of employment of the licensee at the institution, or institutions, at which practice is authorized under the license.
- F. An annual renewal fee shall be prescribed by the Board.

Amended November 19, 1998. Amended May 17, 2007.

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B	Specific Legal Authority Authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule Section 73-43-11					
Jackson, MS 39216	Reference to Rules repealed, amended or suspended by the					
(601) 987-3079	Proposed Rule: {Insert citation to specific rule(s) repealed amended or suspended VI. Licensure by Examination - Podiatric					
rhonda@msbml.state.ms.us	}					
Date Rule Proposed:						
Explanation of the Purpose of the Proposed Rule and	the reason(s) for proposing the rule:					
The changes in this regulation reflect an attempt to simplify and	update current language.					
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Date: Time: Place: An oral proceeding was not held on this rule. The Agency has considered the written comments and the presentations made in any oral proceedings, and This rule as adopted is without variance from the proposed rule. This rule as adopted differs from the proposed rule as there are minor editorial changes which affect the form rather than the substance of the rule. The rule as adopted differs from the proposed rule. The differences however are: Within the scope of the matters in the Notice of Proposed Rule Adoption, the logical outgrowth of the contents of

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Effective Date of Rule:

be the rule in question.

May 17, 2007

Signature and Title of Person Submitting Rule for Filing

An oral proceeding was held on this rule:

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

May 17, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

The changes to Regulation VI, Licensure by Examination - Podiatric Medicine, reflect the Board's attempt to simplify current language.

VI. LICENSURE BY EXAMINATION - PODIATRIC MEDICINE

- A. To qualify for admission by examination, an individual shall meet the following requirements, provided that the Board may admit any individual to the examination while reserving its right to deny licensure if that individual fails to meet all requirements for licensure subsequent to success or completion of the examination:
 - 1. Applicant must satisfy the Board that he is at least twenty-one (21) years of age and of good moral character.
 - 2. Applicant must have had at least four (4) years of high school and be graduate of same; he shall have at least one (1) year pre-podiatry college education.
 - 3. Present a diploma from a college of podiatric medicine recognized by the Board as being in good standing, subject to the following conditions:
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. No college of podiatry or chiropody shall be accredited by the Board as a college of good standing which does not require for graduation a course of study of at least four (4) years (eight and one-half [8½] months each) and be recognized by the Council on Education of the American Podiatry Association.
 - 4. Present certified copy of birth certificate or valid passport.
 - 5. Must successfully take an examination for podiatrists. The applicant shall be examined in the following subjects: anatomy, histology, physiology, chemistry, pharmacy, materia medica, therapeutics, bacteriology, pathology, surgery, dermatology, neurology, physical therapy, diagnosis and roentgenology, orthopedics, chiropody and chiropodial surgery, limited in their scope to the treatment of the human foot and leg, and if found qualified shall receive a license. The minimum of requirements for license shall be a general average of seventy-five percent (75%) of all the subjects involved, provided that a grade of not less than sixty percent (60%) be made on any one (1) subject or branch given in the examination held. However, applicants are encouraged to take the examinations given by the National Board of Podiatry Examiners.

- 6. Must complete an application for podiatry license and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph.
- 7. Submit fee prescribed by the Board.
- 8. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.

Amended May 17, 2007.

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

Specific Legal Authority Authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule Section 73-43-11 Reference to Rules repealed, amended or suspended by the

(601) 987-3079	Proposed Rule: (Insert citation to specific rule(s) repealed, amended or suspended VII. Licensure by Reciprocity or Endorsement
rhonda@msbml.state.ms.us	Podiatric Medicine
Date Rule Proposed:	
Explanation of the Purpose of the Proposed Ru The changes in this regulation reflect an attempt to simp	
	including any written comments received during the comment period ble for public inspection by contacting the Agency at the above address
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Signature and Title of Person Submitting Rule for Filing

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be the rule in question.

Rhonda Freeman Division Director

TELEPHONE: (601) 987-3079 FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

May 17, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

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The changes to Regulation VII, Licensure by Reciprocity or Endorsement - Podiatric Medicine, reflect the Board's attempt to simplify current language.

VII. LICENSURE BY RECIPROCITY OR ENDORSEMENT - PODIATRIC MEDICINE

- A. If the original license of an applicant was obtained by state board examination, the applicant must have the state board where original license was obtained by written examination submit a certified copy of the examination directly to the Board.
- B. The Board may affiliate with and recognize for the purpose of waiving examination and may grant licenses to Diplomats of the National Board of Podiatric Examiners. If a Diplomat of the National Board of Podiatric Examiners, the applicant must have certification of endorsement from that Board submitted directly to the Board.
- C. In addition to the above requirements for licensure by reciprocity and/or endorsement, an individual shall meet the following requirements:
 - 1. Applicant must be twenty-one (21) years of age, and of good moral character.
 - 2. Applicant must have had at least four (4) years high school and be graduate of same; he shall have at least one (1) year pre-podiatry college education.
 - 3. Present a diploma from a college of podiatric medicine recognized by the Board as being in good standing, subject to the following conditions.
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. No college of podiatry or chiropody shall be accredited by the Board as a college of good standing which does not require for graduation a course of study of at least four (4) years (eight and one-half [8½] months each) and be recognized by the Council on Education of the American Podiatry Association.

- 4. Present certified copy of birth certificate or valid passport.
- 5. Must complete an application for medical license and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph.
- 6. Submit fee prescribed by the Board.
- 7. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- 8. Must present proof of completion of (1) one year of APMA-approved postgraduate training in the U.S. or Canada.

Amended May 17, 2007.

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



MISSISSIPPI SECRETARY OF STATE

Specific Legal Authority Authorizing the promulgation of Mississippi State Board of Medical Licensure Rule: (Insert citation to state or federal statute, or c/o Rhonda Freeman rule Section 73-43-11 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216 Reference to Rules repealed, amended or suspended by the Proposed Rule: {Insert citation to specific rule(s) repealed, amended or suspended X. Temporary Licensure (601) 987-3079 rhonda@msbml.state.ms.us Date Rule Proposed: Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: The changes in this regulation reflect an attempt to simplify and update current language. The Agency Rule Making Record for this rule including any written comments received during the comment period and the record of any oral proceeding is available for public inspection by contacting the Agency at the above address. An oral proceeding was held on this rule: Date: Time: Place: An oral proceeding was not held on this rule. The Agency has considered the written comments and the presentations made in any oral proceedings, and This rule as adopted is without variance from the proposed rule. This rule as adopted differs from the proposed rule as there are minor editorial changes which affect the form rather than the substance of the rule. The rule as adopted differs from the proposed rule. The differences however are: Within the scope of the matters in the Notice of Proposed Rule Adoption, the logical outgrowth of the contents of the Notice of Proposed Rule Adoption and the comments submitted in response thereto, and The Notice of Proposed Rule Adoption provided fair warning that the outcome of the proposed rule adoption could

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Effective Date of Rule:

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May 17, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Division Director

SOS FORM APA 002 Effective Date 07/29/2005 TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: May 17, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

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This rule as adopted does not differ from the proposed rule.

The changes to Regulation X, Temporary Licensure, reflect the Board's attempt to simplify current language.

X. TEMPORARY LICENSURE

- A. Mississippi temporary medical licenses may be issued to applicants for licensure in Mississippi only after completion of an application for licensure by (a) examination; (b) reciprocity with another state; or (c) endorsement of the National Board of Medical Examiners, National Board of Examiners for Osteopathic Physicians and Surgeons, or the Medical Council of Canada (LMCC) under the following conditions:
 - 1. A restricted temporary medical license may be issued upon proper completion of an application for medical licensure by examination or by reciprocity/ endorsement to an applicant who otherwise meets all requirements for licensure except completion of the postgraduate training requirements provided in Sections II, A3 and II, A4 above and successful completion of Step 3 of USMLE as provided in Section IV, B3 above. Such restricted temporary license shall entitle the physician to practice medicine only within the confines of an ACGME or AOA approved postgraduate training program in this State and may be renewed annually for the duration of the post graduate training for a period not to exceed five (5) years.
 - 2. An unrestricted temporary medical license may be issued in an exceptional case to an applicant seeking licensure by reciprocity or by endorsement. Such an unrestricted temporary license shall remain valid only for a period of time sufficient for applicant to submit required documents and credentials to complete an application for permanent licensure, but in no instance to exceed 30 days.
- B. The State Board of Medical Licensure may issue a temporary license to practice medicine for a period not to exceed 90 days at a youth camp licensed by the State Department of Health to any nonresident physician who is not licensed to practice medicine in this state or to any resident physician who is retired from the active practice of medicine in this state while serving as a volunteer at such camp.

1. Nonresident Physician

- a. must have favorable references from two physicians with whom the applicant has worked or trained within the last year;
- b. must have written certification from the medical licensing authority in the state in which he holds a currently valid license to practice medicine; and
- c. must submit fee prescribed by the Board.

2. Retired Resident Physician

- a. must be in good standing with the Mississippi State Board of Medical Licensure, and
- b. must submit fee as prescribed by the Board.
- C. The State Board of Medical Licensure may issue a temporary license to practice medicine to physicians who have been admitted for treatment in a drug and/or alcohol treatment program approved by the Board, or who are enrolled in the fellowship of addictionology in the Mississippi State Medical Association Impaired Professionals Program; provided that, a nonresident applicant shall hold a valid (unrestricted) license to practice medicine in another state and the medical licensing authority of that state shall certify to the Board of Medical Licensure in writing that such license is in good standing.
 - 1. A temporary license issued under this subsection shall be valid for a period of ninety (90) days but may be renewed every ninety (90) days for the duration of the fellowship or treatment program. If the applicant discontinues treatment or leaves the fellowship program the temporary license shall automatically become null and void. The Board may rescind or extend this temporary license for cause.
 - 2. A temporary license issued to a physician under this subsection shall be limited to the out-patient phase of the treatment program or the time necessary to complete the fellowship of addictionology. The physician to whom the license is issued may administer treatment and care within the scope of the drug and/or alcohol treatment program or fellowship in an institutional setting and shall not otherwise practice in this state. A physician licensed under this subsection shall not apply to the U.S. Drug Enforcement Administration for a controlled substances registration certificate and must be under the supervision of another physician holding a valid and unrestricted license in this state.
 - 3. A physician who has had his permanent license to practice in this state revoked or suspended by the Board due to habitual personal use of intoxicating liquors or narcotic drugs, or any other drug having addiction-forming or addiction-sustaining liability, may be granted a temporary license pursuant to this subsection provided the temporary license is not in conflict with the prior disciplinary order of the Board rendered against the physician.
 - 4. The applicant applying for a ninety-day temporary license to practice while in treatment in an approved drug and/or alcohol treatment program

- or while enrolled in the fellowship of addictionology shall pay a fee prescribed by the Board (not to exceed \$50.00) to the Board. No additional fee shall be charged for an extension.
- D. Mississippi temporary medical licenses are issued under the condition that the licensee shall not apply to the U.S. Drug Enforcement Administration for a Controlled Substances Registration Certificate.

Amended May 17, 2007.

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



Specific Legal Authority Authorizing the promulgation of

Mississippi State Board of Medical Licensure C/ 1 Ja

c/o Rhonda Freeman	Rule: {Insert citation to state or federal statute, or rule Section 73-43-11 } Reference to Rules repealed, amended or suspended by the Proposed Rule: {Insert citation to specific rule(s) repealed,	
1867 Crane Ridge Drive, Suite 200-B		
Jackson, MS 39216		
(601) 987-3079	amended or suspended XI. Duty to Notify Board of Change of Address	
rhonda@msbml.state.ms.us	}	
Date Rule Proposed:		
Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule:		
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Effective Date of Rule:

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May 17, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman **Division Director**

SOS FORM APA 002 Effective Date 07/29/2005

TELEPHONE: (601) 987-3079 FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

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From:

Mississippi State Board of Medical Licensure

Date:

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The changes to Regulation XI, Duty to Notify Board of Change of Address, reflect the Board's attempt to simplify current language.

XI. DUTY TO NOTIFY BOARD OF CHANGE OF ADDRESS

Any physician, osteopathic physician or podiatrist who is licensed to practice medicine in this state and changes his or her practice location, shall immediately notify the Board in writing of the change of location. Failure to notify within 30 days could result in disciplinary action.

Amended May 17, 2007.

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



MISSISSIPPI SECRETARY OF STATE

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The changes to Regulation XII, Release of Medical Records, reflect the Board's attempt to simplify current language.

XII. RELEASE OF MEDICAL RECORDS

A. DEFINITIONS

For the purpose of Article XII only, the following terms have the meanings indicated:

- 1. "Physician" means any person licensed to practice medicine, osteopathic medicine or podiatric medicine in the State of Mississippi.
- 2. "Medical Records" means all records and/or documents relating to the treatment of a patient, including, but not limited to, family histories, medical histories, report of clinical findings and diagnosis, laboratory test results, X-rays, reports of examination and/or evaluation and any hospital admission/discharge records which the physician may have.
- 3. "Patient" means a natural person who receives or should have received health care from a licensed physician, under a contract, express or implied, whether or not the physician is compensated for services rendered.
- 4. "Legal Representative" means an attorney, guardian, custodian, or in the case of a deceased patient, the executor/administrator of the estate, surviving spouse, heirs and/or devisees.

B. MEDICAL RECORDS - PROPERTY OF PHYSICIAN/CLINIC

Medical records, as defined herein, are and shall remain the property of the physician or physicians, in whose clinic or facility said records are maintained, subject, however, to reasonable access to the information contained in said records as set forth herein below.

C. TRANSFER OF PATIENT RECORDS TO ANOTHER PHYSICIAN

A physician who formerly treated a patient shall not refuse for any reason to make the information contained in his medical records of that patient available upon request by the patient, or legal representative of the patient, to another physician presently treating the patient. The physician has a right to request a written release from the patient or legal representative of the patient, authorizing the transfer prior to transfer of said documents. Upon receipt of the written release and authorization, the physician must tender a copy of said documents to the other physician within a reasonable period of time. Transfer of said documents shall not be withheld because of an unpaid bill for medical services, but the physician is entitled to reasonable compensation paid in advance for any copy expenses as provided at Paragraph F below.

D. RELEASE OF PATIENT RECORDS TO PATIENT

A physician shall, upon request of the patient, patient's legal representative, or other person holding a written release and authorization (hereinafter, "authorized requesting party"), provide a copy of a patient's medical record to the authorized requesting party; provided, however, where release of psychiatric/psychological records directly to a patient would be deemed harmful to the patient's mental health or well-being, the physician shall not be obligated to release the records directly to the patient, but shall, upon request, release the records to the patient's legal representative. The physician has a right to request a written authorization prior to release of the records. Upon receipt of the written release and authorization, the physician must tender a copy of the records to the authorized requesting party within a reasonable period of time. Transfer of the records shall not be withheld because of an unpaid bill for medical services, but the physician is entitled to reasonable compensation paid in advance for any copy expenses as provided at Paragraph F below.

E. NARRATIVE SUMMARY OF MEDICAL RECORD

In some cases, a requesting party may wish to obtain a narrative summary of the medical record, in lieu of, or in addition to a copy of the medical record. Upon such a request, the physician may provide the narrative summary. The physician may charge a reasonable fee for the time devoted to preparation of the medical record narrative summary.

F. DUPLICATION AND ADMINISTRATIVE FEES

Licensees have a right to be reimbursed for duplication and other expenses relating to requests for medical records. The copying charge is set by Mississippi Code Annotated, Section 11-1-52, as follows: Any medical provider or hospital or nursing home or other medical facility shall charge no more than the following amounts to patients or their representatives for photocopying any patient's records: Twenty Dollars (\$20.00) for pages one (1) through twenty (20); One Dollar (\$1.00) per page for the next eighty (80) pages; Fifty Cents (50¢) per page for all pages thereafter. Ten percent (10%) of the total charge may be added for postage and handling. Fifteen Dollars (\$15.00) may be recovered by the medical provider or hospital or nursing home or other medical facility for retrieving medical records in archives at a location off the premises where the facility/office is located. In addition, the actual costs of reproducing x-rays or other special records may be included. The duplication and administrative fees authorized herein are not intended to include or restrict any fees charged in relation to expert testimony.

A licensee shall only charge normal, reasonable and customary charges for a

deposition related to a patient that the physician is treating or has treated.

Any licensee shall charge no more than Twenty-five Dollars (\$25.00) for executing a medical record affidavit, when the affidavit is requested by the patient or the patient's representative.

G. EXCLUSION

Federal or state agencies providing benefit programs are excluded from the above stated fees. Records that are requested by state or federal agencies for said benefit programs shall pay an acceptable rate as established by the requesting federal or state agency.

H. VIOLATION OF REGULATIONS

A refusal by a physician to release patient records as enumerated above shall constitute unprofessional conduct, dishonorable or unethical conduct likely to deceive, defraud or harm the public in violation of Mississippi Code (1972) Annotated, Section 73-25-29(8)(d), as amended.

Amended March 16, 1995. Amended July 18, 2002. Amended September 18, 2003. Amended September 16, 2004. Amended May 17, 2007.

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



Mississippi State Board of Medical Licensure c/o Rhonda Freeman	Specific Legal Authority Authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule Section 73-43-11 Reference to Rules repealed, amended or suspended by the Proposed Rule: {Insert citation to specific rule(s) repealed, amended or suspended XVII. Rules of Procedure	
1867 Crane Ridge Drive, Suite 200-B		
Jackson, MS 39216 (601) 987-3079 rhonda@msbml.state.ms.us		
	Date Rule Proposed:	
Explanation of the Purpose of the Proposed Rule and	the reason(s) for proposing the rule:	
The changes in this regulation reflect an attempt to simplify and		
	ng any written comments received during the comment period public inspection by contacting the Agency at the above address.	
Date:		
Time:		
Place:		
An oral proceeding was not held on this rule.		
The Agency has considered the written comments and	the presentations made in any oral proceedings, and	
This rule as adopted is without variance from	the proposed rule.	
This rule as adopted differs from the proposed rather than the substance of the rule.	d rule as there are minor editorial changes which affect the form	
the Notice of Proposed Rule Adoption and the co	Proposed Rule Adoption, the logical outgrowth of the contents of	

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

May 17, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Division Director

SOS FORM APA 002 Effective Date 07/29/2005 TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

May 17, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

The changes to Regulation XVII, Rules of Procedure, reflect the Board's attempt to simplify current language.

XVII. RULES OF PROCEDURE

AUTHORITY:

CHAPTER 41, TITLE 73, MISSISSIPPI CODE (1972)

ANNOTATED, AS AMENDED

A. SCOPE

The following Rules of Procedure apply to all individuals licensed to practice medicine, osteopathic medicine and podiatric medicine in the State of Mississippi.

B. DEFINITIONS

For the purpose of Article XVII only, the following terms have the meanings indicated:

- 1. "Board" means the Mississippi State Board of Medical Licensure.
- 2. "Mississippi Medical Practice Act" means Sections 73-25-1, et seq., pertaining to licensure and discipline of individuals practicing medicine or osteopathic medicine, and Sections 73-27-1, et seq., pertaining to licensure and discipline of individuals practicing podiatric medicine, or any amendments or additions to said statutes which may hereinafter be made.
- "Licensee" or "Physician" means any individual licensed to practice medicine, osteopathic medicine or podiatric medicine in the State of Mississippi.
- 4. "Respondent" means a physician against whom a disciplinary proceeding has been initiated.
- 5. "Complaint Counsel" means the attorney retained by the Board to prosecute physicians pursuant to the Mississippi Medical Practice Act.
- 6. "Executive Director" means the chief executive officer or other designee employed by the Board to run the day to day operations of the Board.
- 7. Masculine terms, when used in the following Rules of Procedure, shall also be deemed to include the feminine.

C. COMPLAINT/INVESTIGATION

1. An investigation of alleged violation(s) of the Mississippi Medical Practice Act may be initiated by the Investigative Staff of the Board either:

- a. in response to a written complaint or adverse information duly received by the Board, or
- b. based on information independently developed by the Investigative Staff of the Board.
- 2. Upon receipt of information indicating a possible violation of the Mississippi Medical Practice Act, the Investigative Staff with advice and consultation from the Board's Executive Director, shall make an initial determination as to whether the information justifies further investigation. A case may be dismissed without further investigation based on a determination of either:
 - a. lack of jurisdiction, or
 - b. no violation of the Mississippi Medical Practice Act.
- 3. During an investigation, the Investigative Staff may interview and take the statements of witnesses and licensees. During an interview of a licensee, the Investigative Staff shall inform the licensee of the nature and purpose for the investigation and, if requested, provide licensee with a copy of any written complaint, provided, that if anonymity has been requested all identifying data of the complainant shall be removed.

D. INITIATION OF DISCIPLINARY ACTION

- 1. Upon conclusion of an investigation, the results shall be presented to the Board's Executive Director to determine if there is proper jurisdiction and violation of the Mississippi Medical Practice Act. The Board's Executive Director may then authorize the issuance of a summons and affidavit, naming the accused licensee as a respondent in the proceedings.
 - a. The summons, signed by the Board's Executive Director, shall set forth:
 - (1) the style of the action,
 - (2) the name and address of the accused respondent,
 - (3) the address, date, and time at which the respondent is summoned to appear before the Board,
 - (4) the specific sections of the Mississippi Medical Practice Act which the respondent is charged with violating, and

- (5) the actions which the Board has the authority to take, including placing the physician on probation, the terms of which may be set by the Board, suspending his right to practice medicine for a time deemed proper by the Board, revoking his license, or taking any other action in relation to his license as the Board may deem proper under the circumstances.
- b. The affidavit, signed by the investigating officer, shall set forth, in numbered paragraphs, a concise statement of the material facts and allegations to be proven, including:
 - (1) facts giving rise to the Board's jurisdiction,
 - (2) facts constituting legal cause for administrative action against the respondent, and
 - (3) the statutory provisions alleged to have been violated by the respondent.
- 2. The summons and affidavit shall be delivered to the respondent, either through certified mail or by personal service.
- 3. The summons shall name a date for hearing not less than thirty (30) days or more than sixty (60) days from the date of the mailing or service of the summons.
- 4. The summons and affidavit shall bear the name, address, and telephone number of Complaint Counsel.
- 5. All pleadings, motions or other papers permitted or required to be filed with the Board in connection with a pending disciplinary proceeding shall be filed by personal delivery at or by mail to the office of the Board. A copy of all papers filed with the Board shall be delivered by certified mail or personally served on opposing counsel of record.
- 6. All pleadings, motions or other papers shall be submitted on plain white, letter size (8 ½ x 11") bond, with margins of at least one inch on all sides and text double spaced except as to quotations and other matter customarily single spaced; shall bear the style and caption of the case as it appears on the summons and shall include the certificate of the attorney or person making the filing that service of a copy of the same has been effected in the manner prescribed by Subsection 5 above.
- 7. The Board may refuse to accept for filing any pleading, motion or other

paper not in conformity with the requirements of this rule.

- 8. Within fifteen (15) days of service of the summons and affidavit, or such longer time as the Board, on motion of the respondent may permit, the respondent shall answer the summons/affidavit, admitting or denying each of the separate allegations of fact and of law set forth therein. Any matters admitted by the respondent shall be deemed proven and established for purposes of adjudication. Any matters or allegations not specifically denied are admitted for the purposes of the hearing. In the event that respondent does not file a response to the affidavit, all matters asserted therein shall be deemed admitted.
- 9. Any respondent may be represented before the Board by an attorney at law who:
 - a. is admitted to practice in the State of Mississippi, or
 - b. has been given express permission by the Board to appear on behalf of respondent.
- 10. Upon service of a summons and affidavit pursuant to Subsection 2 above, a respondent who is represented by legal counsel with respect to the proceeding shall personally or through such counsel, give written notice to the Board of the name, address and telephone number of such counsel. Following receipt of proper notice of representation, all further notices, affidavits, subpoenas, orders or other process related to the proceeding shall be served on respondent through the designated counsel of record.

E. SUBPOENAS

- 1. For the purpose of disciplinary hearings, the Board acting by and through its Executive Director, may subpoen apersons and papers on its own behalf and on behalf of a respondent.
- 2. Before the Board shall issue on behalf of a respondent any subpoena for persons or papers, the respondent shall:
 - a. File with the Board a written request for the issuance of said subpoenas, identifying with certainty the identity and address of all individuals to be subpoenaed, along with a concise description of the records to be subpoenaed with the identity and address of the custodian of said records.
 - b. All requests for the issuance of subpoenas shall be filed with the Board sufficiently distant in time to allow for the preparation and

mailing of said subpoenas at least fifteen (15) days before the scheduled hearing date. The Board shall not be responsible for the timely receipt of subpoenas issued after the aforementioned deadline.

- 3. All subpoenas issued by the Board either on its own behalf or on behalf of a respondent shall be affected by either personal service of process or certified mail.
- 4. Any subpoena issued by the Board shall be returnable within 10 days to either the Board or other location as specified in the subpoena.
- 5. No subpoena shall be issued for the purpose of discovery, the means and manner of discovery being set forth at Paragraph F below.
- 6. The Board shall charge a respondent a reasonable fee, not to exceed \$25.00 per subpoena, for preparation and mailing of subpoenas.

F. DISCOVERY

- Upon written request by a respondent or his counsel, Complaint Counsel of the Board shall disclose and permit respondent or his counsel to inspect, copy or photograph the following information and material, which is in the possession, custody, or control of the Board, or the existence of which is known to the Complaint Counsel:
 - a. Names and addresses of all witnesses proposed to be called in Complaint Counsel's case in chief, together with a copy of the contents of any statement, written, recorded, or otherwise preserved, of each such witness.
 - b. Copy of any written or recorded statement of respondent and the substance of any oral statement made by the respondent.
 - c. Copy of any criminal record of a respondent, if proposed to be used.
 - d. Any written reports or statements of experts, if proposed to be offered as evidence in connection with the particular case.
 - e. All records, documents, physical evidence or photographs which may be offered as evidence in Complaint Counsel's case in chief.
 - f. Any exculpatory material concerning the respondent. The Board shall charge a respondent a reasonable fee, not to exceed 50¢ per

copy, payable in advance of delivery of copied documents.

- The Board may deny disclosure authorized by Subsection 1 if it finds that there is a substantial risk to any person of physical harm, intimidation, bribery, economic reprisals, or unnecessary embarrassment, resulting from such disclosure, which outweighs any usefulness of the disclosure to respondent or his counsel.
- 3. If respondent requests discovery under this rule, respondent shall, promptly disclose to Complaint Counsel and permit him to inspect, copy or photograph, the following information and material which is in the possession, custody, or control of respondent or his counsel, or the existence of which is known to respondent or his counsel:
 - a. Names and addresses of all witnesses proposed to be called in Respondent's defense, together with a copy of the contents of any statement, written, recorded, or otherwise preserved, of each such witness.
 - b. All records, documents, physical evidence or photographs which may be offered as evidence in Respondent's defense.
 - c. Any written reports or statements of experts, if proposed to be offered as evidence in connection with the particular case.
- 4. No depositions shall be taken in preparation for matters to be heard before the Mississippi State Board of Medical Licensure.

G. AMENDMENT OF PLEADINGS

- 1. The Complaint Counsel of the Board may amend a summons and affidavit after being duly served upon respondent at any time prior to the scheduled hearing date, provided, the amendment is for the purpose of correcting a clerical error or clarifying facts set forth in the affidavit. A summons/affidavit may be amended to add additional charges or counts provided the amended summons and affidavit is served upon respondent not less than thirty (30) days from the scheduled hearing date or by mutual agreement of the parties.
- A respondent may amend his answer as a matter of course at any time before the answer is due. Otherwise, a respondent may amend his answer only by leave of the Board. Leave shall be freely given when justice so requires.

H. PRE-HEARING MOTIONS

- 1. All pre-hearing motions shall be filed not later than fifteen (15) days prior to the scheduled hearing. Said motion shall be accompanied by a memorandum setting forth a succinct explanation of the grounds on which relief is sought. A motion may be accompanied by an affidavit as necessary to establish facts alleged in support of the motion.
- 2. Within ten (10) days of the filing of any motion, opposing counsel may file a memorandum in opposition to the initial motion.

I. CONTINUANCES

- 1. Hearings shall be held before the full Board at the time and place designated in the summons, unless a continuance is granted for just cause by the Board. A motion for a continuance must be filed with the Board at least fifteen (15) days prior to the scheduled hearing, or upon a showing of good cause, at any time prior to the hearing.
- 2. It must be recognized that the Board consists of nine (9) practicing physicians representing various regions of the State. Unlike the judiciary, Board members are not in the business of conducting hearings, therefore hearings will be held only during regularly scheduled meetings or other date established by order of the Board. Attorneys representing physicians should take this fact into consideration. A scheduled hearing may be continued if the respondent shows substantial, legitimate grounds for continuing the hearing, based on the balance of:
 - a. The right of respondent to a reasonable opportunity to prepare and present a defense, and
 - b. The Board's responsibility to protect the public health, safety and welfare.
- 3. Where the counsel for respondent has a scheduling conflict on the initial hearing date, continuances will be liberally granted. However, Respondent's Counsel must submit written proof of the scheduling conflict. Thereafter, no further continuances will be granted based solely on scheduling conflicts.
- 4. So that counsel for the respondent and Complaint Counsel shall be able to adequately prepare for hearing, any motion for a continuance filed within the time limitations specified at Subsection 1 above, will be immediately considered by the Board's President, who shall have the authority to grant

- or deny said motion. If granted, the order will be presented to the Board at the scheduled hearing date at which time the order will be formally entered and the rescheduled hearing date set.
- 5. It is the responsibility of the respondent to make a prompt decision as to whether to appear before the Board pro se (without counsel) or retain counsel for this purpose. Unless due to extraordinary circumstances, the Board will not consider as a valid ground for continuance, the Respondent's last minute decision to retain counsel.

J. INFORMAL SETTLEMENT, PRE-HEARING STIPULATIONS, CONSENT ORDERS

- 1. All disciplinary proceedings initiated by the Board shall be brought to a final resolution through one of three means:
 - a. disciplinary hearings before the full Board,
 - b. acceptance by the Board of a mutually agreeable Consent Order in lieu of hearing, or
 - c. dismissal of the case.
- 2. As to disciplinary proceedings duly noticed and docketed for hearing, counsel for respondent and Complaint Counsel may agree, or the Board's President may require, that an Informal Settlement Conference be held for the purpose of possible resolution, simplifying the issues for hearing or promoting stipulations as to facts and proposed evidentiary offerings which will not be disputed at hearing.
- 3. The Informal Settlement Conference shall be conducted by respondent and/or his counsel and the Complaint Counsel. Other parties who may attend include the investigating officer, the Board's Executive Director, or any other party who may contribute to the conference. Board members shall not participate in the Informal Settlement Conference, other than to approve a Consent Order as hereinafter provided.
- 4. Discovery or exchange of information may be accomplished during the Informal Settlement Conference.
- 5. The Informal Settlement Conference may result in:
 - a. dismissal of the case,
 - b. return of the case for further investigation,

- preparation of a proposed Consent Order as a resolution of the matter, or
- d. proceed with the scheduled hearing.
- 6. Any action which the Board may take following a full disciplinary hearing may be taken in lieu thereof by Consent Order, duly executed by the respondent. Because of the lengthy dockets before the Board, Informal Settlement Conferences must be held in sufficient time to allow consummation of negotiations of a Consent Order at least ten (10) working days prior to the scheduled hearing date. After the terms of a Consent Order have been prepared, the Board's Executive Director, shall have the authority to accept, reject or modify the terms of a Consent Order. When a mutually acceptable Consent Order has been accepted by the Board's Executive Director, it shall be binding on the Board, but not effective until full Board approval. Notwithstanding, it is still the responsibility of the respondent to personally appear before the Board on the scheduled hearing date to answer any questions which the Board may have prior to full Board approval.
- 7. If the parties to the Informal Settlement Conference are unable to reach a mutually agreeable Consent Order and the matter is to proceed to a full Board hearing, the parties shall agree in writing by stipulation, to the following:
 - a. any undisputed claims, facts, testimony, documents or issues,
 - b. evidence to be introduced without objection, and
 - c. an estimate of the time required for the hearing.

K. FORMAL HEARING

- At a disciplinary hearing, opportunity shall be given to Complaint Counsel
 and respondent to present evidence on all issues of fact and argument on
 all issues of law and policy involved, to call, examine, and cross-examine
 witnesses, and to offer and introduce documentary evidence and exhibits
 as may be required for full and true disclosure of the facts and disposition
 of the matter.
- 2. All testimony and other proceedings shall be recorded by a certified stenographer who shall be retained by the Board.
- 3. During the disciplinary hearing, the Board's President, acting as the

presiding officer, or his designee, shall rule on all evidentiary questions, but in his discretion may consult with the entire panel in executive session. At such hearing, the Board may be assisted by the Mississippi Attorney General, or his designee, who shall not have been involved in any way with the case otherwise. The Board's presiding officer may delegate ruling on procedural and evidentiary issues to the Attorney General or his designee.

- 4. In all disciplinary hearings before the Board, the record of the case shall include:
 - a. the summons and affidavit issued,
 - b. the Respondent's answer to the summons and affidavit,
 - c. all pleadings, motions, and rulings issued,
 - d. evidence received or considered at the hearing,
 - e. offers of proof, objections, and rulings thereon,
 - f. the Board's order or other disposition made by the Board.
- 5. Disciplinary hearings before the Board shall be conducted in the following order:
 - a. opening statements,
 - b. Complaint Counsel's case in chief,
 - c. respondent's case in chief,
 - d. Complaint Counsel's rebuttal,
 - e. closing statements.

Questioning of witnesses shall be conducted in the following order:

- a. direct examination,
- b. cross-examination,
- c. redirect examination.
- 6. Upon conclusion of the hearing, the Board shall conduct its deliberations

in Executive Session, outside the presence of the parties. The Board shall then render its determination and order, setting forth Findings of Fact, Conclusions of Law and Order. Although the Board's decision may be announced immediately following deliberations, the Board shall be provided adequate time for preparation of the written determination and order. A copy of such determination and order shall be sent by certified mail, or served personally upon the respondent. The decision of the Board revoking, suspending or otherwise disciplining respondent shall become final thirty (30) days after so mailed or served unless within said period the respondent appeals the decision to the Chancery Court, as provided by law.

L. REINSTATEMENT OF LICENSE

The procedural requirements enumerated above shall also apply to petition duly filed with the Board seeking reinstatement of a license pursuant to Section 73-25-32, Mississippi Code (1972) Annotated.

M. EFFECTIVE DATE OF REGULATIONS

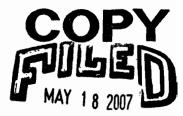
- 1. The above procedural rules and regulations shall become effective June 19, 1995.
- 2. The above Rules of Procedure are adopted by the Board to implement its authority to investigate alleged violations of the Mississippi Medical Practice Act, conduct hearings on disciplinary matters, and consider petitions for termination of probationary and suspended licenses and restoration of revoked licenses, all as enumerated in Section 73-43-11, Mississippi Code (1972) Annotated.
- 3. The above Rules of Procedure shall not be interpreted to alter or amend that which is otherwise provided by Mississippi statutory law.

Amended May 17, 2007.

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



MISSISSIPPI SECRETARY OF STATE

Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

(601) 987-3079 rhonda@msbml.state.ms.us

Specific Legal Authority Authorizing the promulgation of Rule: (Insert citation to state or federal statute, or rule_Section 73-43-11________

Reference to Rules repealed, amended or suspended by the Proposed Rule: {Insert citation to specific rule(s) repealed, amended or suspended XXI. CME Requirements for State of MS Physicians, Osteopathic Physicians and Podiatrists

Date R	ule Proposed:	
Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: The changes in this regulation reflect an attempt to simplify and update current language. The Agency Rule Making Record for this rule including any written comments received during the comment period and the record of any oral proceeding is available for public inspection by contacting the Agency at the above address		
	Date: Time: Place:	
	An oral proceeding was not held on this rule.	
The Ag	ency has considered the written comments and the presentations made in any oral proceedings, and	
	This rule as adopted is without variance from the proposed rule.	
	This rule as adopted differs from the proposed rule as there are minor editorial changes which affect the form rather than the substance of the rule.	
	The rule as adopted differs from the proposed rule. The differences however are: Within the scope of the matters in the Notice of Proposed Rule Adoption, the logical outgrowth of the contents of the Notice of Proposed Rule Adoption and the comments submitted in response thereto, and The Notice of Proposed Rule Adoption provided fair warning that the outcome of the proposed rule adoption could be the rule in question.	

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

May 17, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Division Director

SOS FORM APA 002 Effective Date 07/29/2005 TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: May 17, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

The changes to Regulation XXI, CME Requirements for State of Mississippi Physicians, Osteopathic Physicians and Podiatrists, reflect the Board's attempt to simplify current language.

XXI. CME REQUIREMENTS FOR STATE OF MISSISSIPPI PHYSICIANS, OSTEOPATHIC PHYSICIANS AND PODIATRISTS

A. BASIC REQUIREMENT

Every Mississippi licensee must earn or receive not less than forty (40) hours of Category I continuing medical education in a two-year cycle as a condition precedent to renewing his or her license for the next fiscal year. Excess hours may not be carried over to another two-year cycle. For the purpose of this regulation, the two-year period begins July 1, 2000, and every two years thereafter.

- Category I continuing medical education shall mean those programs of
 continuing medical education designated as Category I which are
 sponsored or conducted by those organizations approved by the
 Mississippi State Medical Association, American Medical Association or
 by the Accreditation Council for Continuing Medical Education
 (ACCME) to sponsor or conduct Category I continuing medical education
 programs.
- Programs of continuing medical education designated as Category I-A
 which are sponsored or conducted by organizations or entities accredited
 by the American Osteopathic Association to sponsor or conduct Category
 I-A continuing medical education for osteopathic physicians.
- 3. Programs of continuing medical education designated as a "prescribed hour" which are sponsored or conducted by organizations or entities accredited by the American Academy of Family Physicians to sponsor or conduct "prescribed hours" of continuing medical education.
- 4. Programs of continuing medical education designated as "cognates" which are sponsored or conducted by organizations or entities which are accredited by the American College of Obstetrics and Gynecology to sponsor or conduct approved cognates on obstetrical and gynecological related subjects.
- 5. Programs of continuing medical education designated as Category I-A which are sponsored or conducted by organizations or entities accredited by the Council on Podiatric Medical Education to sponsor or conduct Category I-A continuing medical education for podiatrists.

B. PERSONS AFFECTED

Every Mississippi licensee is required to comply with the minimum requirement for continuing medical education established by these rules and regulations.

C. EXEMPTION FOR INITIAL LICENSES

Physicians, osteopaths or podiatrists receiving their initial license to practice medicine in Mississippi after June 30, or receiving their board certification after June 30, are exempt from the minimum continuing medical education requirement for the two-year period following their receiving a license or board certification. The forty (40) hour continuing education certification will be due within the next two-year cycle.

July 1, 2000 through June 30, 2002 (1st cycle) July 1, 2002 through June 30, 2004 (2nd cycle) July 1, 2004 through June 30, 2006 (3rd cycle) July 1, 2006 through June 30, 2008 (4th cycle)

For instance, a physician receiving an initial license August 3, 2001, will not have to complete forty (40) hours of CME until July 1, 2002, through June 30, 2004. All CME's must be acquired within the two-year cycle.

D. EFFECTIVE DATE

The first time for reporting continuing medical education activity will be the renewal period for the fiscal year beginning July 1, 2002, when reporting on continuing medical education work earned during the two-year period of July 1, 2000, to June 30, 2002.

E. RECORD KEEPING REQUIREMENT

- 1. Every licensee shall maintain records of attendance or certificates of completion demonstrating compliance with the minimum continuing medical education requirement. Documentation adequate to demonstrate compliance with the minimum continuing medical education requirements of this regulation shall consist of certificates of attendance, completion certificates, proof of registration, or similar documentation issued by the organization or entity sponsoring or conducting the continuing medical education program. These records must be maintained by the physician for a period of three (3) years following the year in which the continuing medical education credits were earned and are subject to examination by representatives of the State Board of Medical Licensure upon request. If a physician is on a hospital medical staff, it is recommended these certificates and hours be recorded with the primary hospital medical staff records.
- 2. With his or her annual renewal application, every licensee must certify the completion of the minimum continuing medical education requirement established under these regulations. Failure to maintain records

documenting that a physician has met the minimum continuing medical education requirement, and/or failure to provide such records upon request to the Mississippi State Board of Medical Licensure, is hereby declared to be unprofessional conduct and may constitute grounds, within the discretion of the Mississippi State Board of Medical Licensure, for the suspension of the physician's license to practice medicine.

F. ANNUAL RENEWAL

As a condition for annual renewal of license, beginning with the fiscal year July 1, 2002, through June 30, 2003, every physician, osteopath or podiatrist will be required to biennially certify on his or her annual renewal form, that he or she has earned the required 40 hours of approved Category 1 continuing medical education requirement. The Board will randomly select physicians to ensure complete compliance with this requirement. If deficiencies are identified, licensee must complete deficiencies within six (6) months of date of notification. Failure to comply may result in the suspension of licensee's license.

Any physician, osteopath or podiatrist practicing during the time of a suspended license shall be considered an illegal practitioner and shall be subject to penalties provided for violation of the Medical Practice Act, and for costs incurred in the enforcement of this regulation.

G. WAIVER

A physician, osteopath or podiatrist who is unable to meet the minimum continuing medical education requirement for legitimate cause may apply to the Mississippi State Board of Medical Licensure for a waiver of the requirement prior to April 1 of the last year of the two-year cycle. Such waiver may be granted or denied within the sole discretion of the Mississippi State Board of Medical Licensure.

H. COMPLIANCE REVIEW

It shall be the responsibility of the Mississippi State Board of Medical Licensure to enforce the provisions of this regulation by review of the records maintained by physicians subject to this rule which demonstrate compliance with the program for continuing medical education. This compliance review may be conducted by the Board by random or designated sample, by mail or in person, or otherwise at the discretion of the Board. Non-compliance may result in the suspension of the physician's license to practice medicine under the Medical Practice Act.

I. EFFECTIVE DATE OF REGULATION

The above rules and regulations pertaining to Continuing Medical Education shall become effective February 16, 2000.

Amended May 17, 2007.

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



Mississippi State Board of Medical Licensure c/o Rhonda Freeman

Specific Legal Authority Authorizing the promulgation of Rule: (Insert citation to state or federal statute, or rule Section 73-43-11		
Proposed Rule :{Insert	pealed, amended or suspended by the totation to specific rule(s) repealed, XXII. Regulation Governing the Practice of Physician	

1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216 (601) 987-3079 rhonda@msbml.state.ms.us Date Rule Proposed: Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: The changes in this regulation reflect an attempt to simplify and update current language. The addition of Section C.A.c. is based on an amendment to Mississippi Code 73-26-3. The Agency Rule Making Record for this rule including any written comments received during the comment period and the record of any oral proceeding is available for public inspection by contacting the Agency at the above address. An oral proceeding was held on this rule: Date: Time: Place: An oral proceeding was not held on this rule. The Agency has considered the written comments and the presentations made in any oral proceedings, and This rule as adopted is without variance from the proposed rule. This rule as adopted differs from the proposed rule as there are minor editorial changes which affect the form rather than the substance of the rule. The rule as adopted differs from the proposed rule. The differences however are: Within the scope of the matters in the Notice of Proposed Rule Adoption, the logical outgrowth of the contents of the Notice of Proposed Rule Adoption and the comments submitted in response thereto, and The Notice of Proposed Rule Adoption provided fair warning that the outcome of the proposed rule adoption could be the rule in question.

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

May 17, 2007.

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Division Director

SOS FORM APA 002 Effective Date 07/29/2005 TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

May 17, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

The changes to Regulation XXII, Regulations Governing the Practice of Physician Assistants, reflect the Board's attempt to simplify current language.

XXII. REGULATIONS GOVERNING THE PRACTICE OF PHYSICIAN ASSISTANTS

A. SCOPE

- 1. The following regulations pertain to Physician Assistants practicing medicine with physician supervision. Physician Assistants may perform those duties and responsibilities, including diagnosing and the ordering, prescribing, dispensing of prepackaged drugs, and administration of drugs and medical devices as delegated by their supervising physician(s).
- 2. Physician Assistants may provide any medical service which is delegated by the supervising physician when the service is within the Physician Assistant's training and skills; forms a component of the physician's scope of practice; and is provided with supervision.
- 3. Physician Assistants shall be considered the agents of their supervising physicians in the performance of all practice-related activities including, but not limited to, the ordering of diagnostic, therapeutic, and other medical services.

B. DEFINITIONS

- 1. For the purpose of Article XXII only, the following terms have the meanings indicated:
 - a. "Board" means the Mississippi State Board of Medical Licensure.
 - b. "Physician Assistant" means a person who meets the Board's criteria for licensure as a Physician Assistant and is licensed as a Physician Assistant by the Board.
 - c. "Supervising Physician" means a doctor of medicine or a doctor of osteopathic medicine who holds an unrestricted license from the Board, who is in the full-time practice of medicine, and who has been approved by the Board to supervise Physician Assistants.
 - d. "Supervise" or "Supervision" means overseeing and accepting responsibility for the medical services rendered by a Physician Assistant.
 - e. "Primary Office" means the usual practice location of a physician and being the same location reported by that physician to the Mississippi State Board of Medical Licensure and the United States Drug Enforcement Administration.

- f. "NCCPA" means the National Commission on Certification of Physician Assistants.
- g. "PANCE" means the Physician Assistant National Certifying Examination.
- h. "CAAHEP" means the Commission on Accreditation of Allied Health Education Programs.
- "Predecessor or Successor Agency" refers to the agency responsible for accreditation of educational programs for Physician Assistants that preceded CAAHEP or the agency responsible for accreditation of educational programs for physician assistants that succeeded CAAHEP.
- 2. Masculine terms wherever used in this regulation shall also be deemed to include the feminine.

C. QUALIFICATIONS FOR LICENSURE

- 1. Pursuant to Section 73-43-11, Mississippi Code (1972) Annotated, all Physician Assistants who are employed as Physician Assistants by a Department of Veterans Affairs health care facility, a branch of the United States military, or the Federal Bureau of Prisons and who are practicing as Physician Assistants in a federal facility in Mississippi on July 1, 2000, and those Physician Assistants who trained in a Mississippi Physician Assistant program and have been continuously practicing as a Physician Assistant in Mississippi since 1976, shall be eligible for licensure if they submit an application for licensure to the Board by December 31, 2000, and meet the following additional requirements:
 - a. Satisfies the Board that he is at least twenty-one (21) years of age and of good moral character.
 - b. Submits an application for license on a form supplied by the Board, completed in every detail with a recent photograph (walletsize/passport type) attached. A Polaroid or informal snapshot will not be accepted.
 - c. Pays the appropriate fee as determined by the Board.
 - d. Presents a certified copy of birth certificate.
 - e. Proof of legal change of name if applicable (notarized or certified copy of marriage or other legal proceeding).

- f. Provides information on registration or licensure in all other states where the applicant is or has been registered or licensed as a Physician Assistant.
- g. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
- h. No basis or grounds exist for the denial of licensure as provided at Article N below.

Physician Assistants licensed under this subsection will be eligible for license renewal so long as they meet standard renewal requirements.

- 2. Before December 31, 2004, applicants for Physician Assistant licensure, except those licensed pursuant to the paragraph above, must be graduates of Physician Assistant educational programs accredited by the Commission on Accreditation of Allied Health Educational Programs or its predecessor or successor agency, have passed the certification examination administered by the National Commission on Certification of Physician Assistants (NCCPA), have current NCCPA certification, and possess a minimum of a baccalaureate degree, and meet the following additional requirements:
 - a. Satisfies the Board that he is at least twenty-one (21) years of age and of good moral character.
 - b. Submits an application for license on a form supplied by the Board, completed in every detail with a recent photograph (walletsize/passport type) attached. A Polaroid or informal snapshot will not be accepted.
 - c. Pays the appropriate fee as determined by the Board.
 - d. Presents a certified copy of birth certificate.
 - e. Proof of legal change of name if applicable (notarized or certified copy of marriage or other legal proceeding).
 - f. Provides information on registration or licensure in all other states where the applicant is or has been registered or licensed as a Physician Assistant.
 - g. Must have favorable references from two (2) physicians licensed in

the United States with whom the applicant has worked or trained.

h. No basis or grounds exist for the denial of licensure as provided at Article N below.

Physician Assistants meeting these licensure requirements will be eligible for license renewal so long as they meet standard renewal requirements.

- 3. On or after December 31, 2004, applicants for Physician Assistant licensure must meet the following requirements:
 - a. Satisfies the Board that he is at least twenty-one (21) years of age and of good moral character.
 - b. Complete an application for license and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph
 - c. Pays the appropriate fee as determined by the Board.
 - d. Presents a certified copy of birth certificate or valid passport.
 - e. Proof of legal change of name if applicable (notarized or certified copy of marriage license or other legal proceeding).
 - f. Possesses a master's degree in a health-related or science field.
 - g. Has successfully completed an educational program for Physician Assistants accredited by CAAHEP or its predecessor or successor agency.
 - Passed the certification examination administered by the NCCPA and have current NCCPA certification.
 - Provides information on registration or licensure in all other states where the applicant is or has been registered or licensed as a Physician Assistant.
 - j. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
 - k. Must appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.

 No basis or grounds exist for the denial of licensure as provided at Article N below.

4. Temporary License

- a. The Board may grant a temporary license to an applicant who meets the qualifications for licensure except that the applicant has not yet taken the national certifying examination administered by the NCCPA or the applicant has taken the national certifying examination and is awaiting the results or the applicant has not obtained a minimum of a master's degree in a health-related or science field.
- b. A temporary license issued upon the basis of the NCCPA not being taken or the applicant awaiting the results is valid:
 - (1) for one hundred eighty (180) days from the date of issuance;
 - (2) until the results of an applicant's examination are available; or
 - (3) until the Board makes a final decision on the applicant's request for licensure, whichever comes first. The Board may extend a temporary license, upon a majority vote of the Board members, for a period not to exceed one hundred eighty (180) days. Under no circumstances may the Board grant more than one extension of a temporary license.
- c. A temporary license may be issued to an applicant who has not obtained a master's degree so long as the applicant can show proof of enrollment in a master's program that will, when completed, meet the master's degree requirement. The temporary license will be valid no longer than one (1) year, and may not be renewed.

D. REQUIREMENT OF PROTOCOL - PRESCRIBING/DISPENSING

1. Physician Assistants shall practice according to a Board-approved protocol which has been mutually agreed upon by the Physician Assistant and the supervising physician. Each protocol shall be prepared taking into

consideration the specialty of the supervising physician, and must outline diagnostic and therapeutic procedures and categories of pharmacologic agents which may be ordered, administered, dispensed and/or prescribed for patients with diagnoses identified by the Physician Assistant. Each protocol shall contain a detailed description of back-up coverage if the supervising physician is away from the primary office. Although licensed, no Physician Assistant shall practice until a duly executed protocol has been approved by the Board.

- 2. Except as hereinafter provided in Paragraph 3 below, Physician Assistants may not write prescriptions for or dispense controlled substances or any other drug having addiction-forming or addiction-sustaining liability. A Physician Assistant may, however, administer such medications pursuant to an order by the supervising physician if in the protocol.
- 3. Prescribing Controlled Substances and Medications by Physician Assistants.
 - a. Scope.

Pursuant to these regulations, authorized Physician Assistants may prescribe controlled substances in Schedules II through V.

- b. Application for Authority to Prescribe Controlled Substances
 - (1) Physician Assistant applicants applying for controlled substance prescriptive authority must complete a Board approved educational program prior to making application.
 - (2) In order to obtain the authority to prescribe controlled substances in any schedule, the Physician Assistant shall submit an application approved by the Board.
- c. Incorporation of Physician Regulations Pertaining to Prescribing, Administering and Dispensing of Medication.

For the purpose of directing the manner in which Physician Assistants may prescribe controlled substances, the Board incorporates Article XXIII of the Board's Regulations *Pertaining*

to

Prescribing, Administering and Dispensing of Medication as applied to Physicians, including but not limited to all Definitions, Maintenance of Records and Inventories, Use of Diet Medication, Use of Controlled Substances for Chronic (Non-Terminal) Pain,

and Prescription Guidelines. All Physician Assistants authorized to prescribe controlled substances shall fully comply with these regulations.

- d. Registration for Controlled Substances Certificate Prescriptive Authority.
 - (1) Every Physician Assistant authorized to practice in Mississippi who prescribes any controlled substance must be registered with the U. S. Drug Enforcement Administration in compliance with title 21 CFR Part 1301 Food and Drugs.
 - (2) Pursuant to authority granted in Miss. Code Ann. §41-29-125, the Board hereby adopts, in lieu of a separate registration with the Board, the registration with the U.S. Drug Enforcement Administration as required in Subparagraph c (1) above, provided, however, where a Physician Assistant already possesses a controlled substances registration certificate for a practice location in another state or jurisdiction, the Physician Assistant may not transfer or otherwise use the same registration until he meets the training requirements set forth in Sub-paragraph 3 (b) (2). In the event, however, a Physician Assistant has had limitations or other restrictions placed upon his license wherein he is prohibited from handling controlled substances in any or all schedules, said Physician Assistant shall be prohibited from registering with the U.S. Drug Enforcement Administration for a Uniform Controlled Substances Registration Certificate without first being expressly authorized to do so by order of the Board.
 - (3) The registration requirement set forth in these regulations does not apply to the distribution and manufacture of controlled substances. Any physician who engages in the manufacture of distribution of controlled substances or legend drugs shall register with the Mississippi State Board of Pharmacy pursuant to Miss. Code Ann. Section73-21-105. For the purposes herein, "distribute" shall mean the delivery of a drug other than by administering, prescribing, or dispensing. The word "manufacture" shall have the same meaning as set forth in Miss. Code Ann. Section73-21-105(q).
- e. Drug Maintenance, Labeling and Distribution Requirements

Persons registered to prescribe controlled substances may order, possess, prescribe, administer, distribute or conduct research with those substances to the extent authorized by their registration and in conformity with the other provisions of these regulations and in conformity with provisions of the Mississippi Uniform Controlled Substances Law, Miss. Code Ann. §41-29-101 et. seq., except Physician Assistants may not receive samples of controlled substances. A Physician Assistant may receive and distribute prepackaged medications or samples of non-controlled substances for which the Physician Assistant has prescriptive authority.

E. SUPERVISION

- 1. Before any physician shall supervise a Physician Assistant, the physician must first (a) present to the Board's Executive Director, a duly executed protocol, (b) appear personally before the Board or its Executive Director, and (c) obtain written approval to act as a supervising physician. The facts and matters to be considered by the Board when approving or disapproving a protocol or supervision arrangement, shall include, but are not limited to, how the supervising physician and Physician Assistant plan to implement the protocol, the method and manner of supervision, consultation, referral and liability.
- 2. Where two or more physicians anticipate executing a protocol to supervise a Physician Assistant, it shall not be necessary that all of the physicians personally appear before the Board or Executive Director as required in Subsection 1 above. In this situation, the physician who will bear the primary responsibility for the supervision of the Physician Assistant shall make the required personal appearance.

F. SUPERVISING PHYSICIAN LIMITED

- 1. No physician shall be authorized to supervise a Physician Assistant unless that physician holds an unrestricted license to practice medicine in the State of Mississippi.
- 2. Supervision means overseeing activities of, and accepting responsibility for, all medical services rendered by the Physician Assistant. Except as described in Subsection 3, supervision must be continuous, but shall not be construed as necessarily requiring the physical presence of the supervising physician.
- 3. New graduate Physician Assistants and all Physician Assistants newly practicing in Mississippi, except those licensed under provision C1,

require the on-site presence of a supervising physician for one hundred twenty (120) days.

- 4. The Physician Assistant's practice shall be confined to the primary office or clinic of the supervising physician or any hospital(s) or clinic or other health care facility within the same community where the primary office is located, wherein the supervising physician holds medical staff privileges. Exceptions to this requirement may be granted on an individual basis, provided the location(s) of practice are set forth in the protocol.
- 5. The supervising physician must provide adequate means for communication with the Physician Assistant. Communication may occur through the use of technology which may include, but is not limited to, radio, telephone, fax, modem, or other telecommunication device.
- 6. The supervising physician shall, on at least a monthly basis, conduct a review of the records/charts of at least ten percent (10%) of the patients treated by the Physician Assistant, said records/charts selected on a random basis. During said review, the supervising physician shall note the medical and family histories taken, results of any and all examinations and tests, all diagnoses, orders given, medications prescribed, and treatments rendered. The review shall be evidenced by the supervising physician placing his signature or initials next to each of the above areas of review, and shall submit proof of said review to the Board upon request.

G. NUMBER OF PHYSICIAN ASSISTANTS SUPERVISED

No physician shall supervise more than two (2) Physician Assistants at any one time. A physician supervising two (2) nurse practitioners may not supervise a Physician Assistant.

H. TERMINATION

The Physician Assistant and supervising physician shall notify the Board in writing immediately upon the Physician Assistant's termination; physician retirement; withdrawal from active practice; or any other change in employment, functions or activities. Failure to notify can result in disciplinary action.

I. DUTY TO NOTIFY BOARD OF CHANGE OF ADDRESS

Any Physician Assistant who is licensed to practice as a Physician Assistant in this state and changes his or her practice location, shall immediately notify the Board in writing of the change of location. Failure to notify within 30 days could result in disciplinary action.

J. CONTINUING EDUCATION

Each licensed Physician Assistant must show proof of completing 50 hours of CME each year, 20 hours of which must be Category I, as defined by the Accreditation Council for Continuing Medical Education (ACCME). Physician Assistants who are certified by the NCCPA may meet this requirement by providing evidence of current NCCPA certification.

All Physician Assistants authorized to prescribe controlled substances must show proof of completing 50 hours of CME each year, 20 hours of which must be Category 1, as defined by the ACCME, and 10 hours of which must be related to the prescribing of medications with an emphasis on controlled substances.

K. IDENTIFICATION

- 1. The supervising physician shall be responsible to ensure that any Physician Assistant under his supervision does not advertise or otherwise hold himself out in any manner which would tend to mislead the general public or patients. Physician Assistants shall at all times when on duty wear a name tag, placard or plate identifying themselves as Physician Assistants.
- 2. Physician Assistants may not advertise in any manner which implies that the Physician Assistant is an independent practitioner.
- 3. A person not licensed as a Physician Assistant by the Board who holds himself out as a Physician Assistant is subject to the penalties applicable to the unlicensed practice of medicine.

L. PHYSICIAN LIABILITY

Prior to the supervision of a Physician Assistant, the physician's and/or Physician Assistant's insurance carrier must forward to the Board a Certificate of Insurance.

M. RENEWAL SCHEDULE

- 1. The license of every person licensed to practice as a Physician Assistant in the State of Mississippi shall be renewed annually.
- 2. On or before May 1 of each year, the State Board of Medical Licensure shall mail an application for renewal of license to every Physician Assistant to whom a license was issued or renewed during the current licensing year. The applicant shall complete the application and return it to the Board before June 30 with documentation of completing each year

50 hours of CME and the renewal fee of an amount established by the Board. The payment of the annual license renewal fee shall be optional with all Physician Assistants over the age of seventy (70) years. Upon receipt of the application and fee, the Board shall verify the accuracy of the application and issue to applicant a certificate of renewal for the ensuing year, beginning July 1 and expiring June 30 of the succeeding calendar year.

- 3. A Physician Assistant practicing in Mississippi who allows his license to lapse by failing to renew the license as provided in Subsection 2 may be reinstated by the Board on satisfactory explanation for such failure to renew, by completion of a reinstatement form, and upon payment of the renewal fee for the current year, and shall be assessed a fine of Twenty-five Dollars (\$25.00) plus an additional fine of Five Dollars (\$5.00) for each month thereafter that the license renewal remains delinquent.
- 4. Any Physician Assistant not practicing in Mississippi who allows his license to lapse by failing to renew the license as provided in Subsection 2 may be reinstated by the Board on satisfactory explanation for such failure to renew, by completion of a reinstatement form, and upon payment of the arrearage for the previous five (5) years and the renewal fee for the current year.
- 5. Any Physician Assistant who allows his license to lapse shall be notified by the Board within thirty (30) days of such lapse.
- 6. Any person practicing as a Physician Assistant during the time his license has lapsed shall be considered an illegal practitioner and shall be subject to the same penalties as provided at Mississippi Code (1972) Annotated, Section 73-25-14.

N. DISCIPLINARY PROCEEDINGS

 GROUNDS FOR DISCIPLINARY ACTION AGAINST PHYSICIAN ASSISTANTS

For the purpose of conducting disciplinary actions against individuals licensed to practice as Physician Assistants, the Board hereby incorporates those grounds for the non-issuance, suspension, revocation, or restriction of a license or the denial of reinstatement or renewal of a license, as set forth in Mississippi Code (1972) Annotated, Sections 73-25-29 and 73-25-83. As a basis for denial, suspension, revocation or other restriction, the Board may initiate disciplinary proceedings based upon any one or more of those grounds as set forth in Sections 73-25-29 and 73-25-83, and may

make provision for the assessment of costs as provided therein.

HEARING PROCEDURE AND APPEALS

No individual shall be denied a license or have his license suspended, revoked or restriction placed thereon, unless the individual licensed as a Physician Assistant has been given notice and opportunity to be heard. For the purpose of notice, disciplinary hearings and appeals, the Board hereby adopts and incorporates by reference all provisions of the "Rules of Procedure" now utilized by the Board for those individuals licensed to practice medicine, osteopathic medicine, and podiatric medicine in the State of Mississippi.

3. REINSTATEMENT OF LICENSE

- a. A person whose license to practice as a Physician Assistant has been revoked, suspended, or otherwise restricted may petition the Mississippi State Board of Medical Licensure to reinstate his license after a period of one (1) year has elapsed from the date of the revocation or suspension. The procedure for the reinstatement of a license that is suspended for being out of compliance with an order for support, as defined in Section 93-11-153, shall be governed by Sections 93-11-157 or 93-11-163, as the case may be.
- b. The petition shall be accompanied by two (2) or more verified recommendations from physicians or osteopaths licensed by the Board of Medical Licensure to which the petition is addressed and by two (2) or more recommendations from citizens each having personal knowledge of the activities of the petitioner since the disciplinary penalty was imposed and such facts as may be required by the Board of Medical Licensure.

The petition may be heard at the next regular meeting of the Board of Medical Licensure but not earlier than thirty (30) days after the petition was filed. No petition shall be considered while the petitioner is under sentence for any criminal offense, including any period during which he is under probation or parole. The hearing may be continued from time to time as the Board of Medical Licensure finds necessary.

c. In determining whether the disciplinary penalty should be set aside and the terms and conditions, if any, which should be imposed if the disciplinary penalty is set aside, the Board of Medical Licensure may investigate and consider all activities of the petitioner since the disciplinary action was taken against him, the

offense for which he was disciplined, his activity during the time his certificate was in good standing, his general reputation for truth, professional ability and good character; and it may require the petitioner to pass an oral examination.

O. IMPAIRED PHYSICIAN ASSISTANTS

- 1. For the purpose of the Mississippi Disabled Physician Law, Mississippi Code (1972) Annotated, Sections 73-25-51 to 73-25-67, any individual licensed to practice as a Physicians Assistant, shall be subject to restriction, suspension, or revocation, in the case of disability by reason of one or more of the following:
 - a. mental illness;
 - b. physical illness, including but not limited to deterioration through the aging process, or loss of motor skills; and/or
 - c. excessive use or abuse of drugs, including alcohol.
- 2. If the Board has reasonable cause to believe that a Physician Assistant is unable to practice with reasonable skill and safety to patients because of one or more of the conditions described above, referral of the Physician Assistant shall be made, and action taken, if any, in the manner as provided in Sections 73-25-55 through 73-25-65, including referral to the Mississippi Recovering Physicians Program, sponsored by the Mississippi State Medical Association.

P. EFFECTIVE DATE OF REGULATIONS

The above rules and regulations pertaining to the Practice of Physician Assistants shall become effective September 1, 2000; as amended September 16, 2004; as amended May 19, 2005, amended May 17, 2007.

SPECIAL EXECUTIVE COMMITTEE

HEARING

REQUESTED BY

PHYSICIAN AND HIS ATTORNEY

June 29 & 30, 2007

MINUTES

SPECIAL EXECUTIVE COMMITTEE HEARING MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE JUNE 29 & 30, 2007

A Special Executive Committee hearing of the Mississippi State Board of Medical Licensure was held on Friday and Saturday, June 29 and 30, 2007, in the Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

MEMBERS PRESENT:

Dewitt G. Crawford, M.D., Louisville, President Philip T. Merideth, M.D., J.D., Jackson, Vice President Don A. Gibson, M.D., Richland, Secretary

ALSO PRESENT:

H. Vann Craig, M.D., Director Stan T. Ingram, Complaint Counsel for the Board Ellen O'Neal, Special Assistant Attorney General Rhonda Freeman, Division Director, Licensure Division Thomas Washington, Division Director, Investigative Division Frances Scott, Special Projects Officer, Investigative Division Sherry Harris, Administrative Assistant

The meeting was called to order at 8:05 a.m. by Dr. Crawford, President. Dr. Crawford welcomed Harvey Rayborn, Court Reporter and extended a welcome to others present at the meeting. Dr. Gibson was not present for the opening remarks but entered the meeting at 8:15 a.m.

Dr. Crawford delegated the responsibility of ruling on procedural and evidentiary issues to Ms. O'Neal, Special Assistant Attorney General, as allowed in the Board's **Rules of Procedure**, **K. Formal Hearing**, **3**.

The Special Executive Committee hearing was held at the request of Charles S. Knight, M.D., requesting reinstatement of licensure. Dr. Knight was present and represented by legal counsel, Joel W. Howell, III, Esq., Jackson, and Jeffrey Knight, Esq., Jackson.

THE EXECUTIVE COMMITTEE RECESSED AT 9:30 A.M. AND RECONVENED AT 9:40 A.M.

SPECIAL EXECUTIVE COMMITTEE HEARING June 29 & 30, 2007 Page 2

THE EXECUTIVE COMMITTEE RECESSED AT 10:45 A.M. AND RECONVENED AT 10:55 A.M.

THE BOARD RECESSED FOR LUNCH AT 12:40 P.M. AND RETURNED AT 1:45 P.M.

Dr. Crawford called the session back in order.

THE BOARD RECESSED AT 2:30 P.M. AND RECONVENED AT 2:45 P.M.

A verbatim account of the proceedings from all witnesses was recorded by Harvey Rayborn, Court Reporter.

THE MEETING ADJOURNED AT 5:25 P.M. TO RECONVENE SATURDAY AT 08:00 A.M.

SATURDAY, JUNE 30, 2007

Dr. Crawford called the meeting to order at 8:10 a.m. and advised that Ella Hardwick would be replacing Harvey Rayborn as the Court Reporter.

THE BOARD RECESSED AT 9:00 A.M. AND RECONVENED AT 9:20 A.M.

THE BOARD RECESSED AT 10:30 A.M. AND RECONVENED AT 10:48 A.M.

At the conclusion of testimony, motion was made by Dr. Merideth, seconded by Dr. Crawford, and carried unanimously that the Executive Committee consider going into Executive Session to discuss their decision. With motion by Dr. Merideth, seconded by Dr. Gibson, the Executive Committee went into Executive Session. At 2:05 p.m., the Executive Committee came out of Executive Session and Dr. Gibson announced their decision concerning Dr. Knight's request:

1) Continuation of his current course of treatment with mental health professionals (psychiatrist, psychologist, and therapist), including prescribed medications, at least once per month visits with the psychologist. The

SPECIAL EXECUTIVE COMMITTEE HEARING June 29 & 30, 2007

Page 3

psychiatrist and psychologist identified during his appearance before the Executive Committee on June 29-30, 2007, are hereby approved by the Board;

- 2) Abstinence from all mood altering substances other than those prescribed in a documented visit with the treating physician(s) approved by the Board and submit to random urine screens conducted by the Board or the Board's agent for all mood altering substances:
- 3) Submission for approval by the Board a specific practice plan;
- 4) Meeting of all statutory requirements for reinstatement of licensure, including but not limited to the clinical skills assessment exam;
- 5) Meeting personally with Vann Craig, M.D., Executive Director, at least once per month during his treatment, to discuss his progress with these terms, which meetings shall be the responsibility of Dr. Knight to schedule; and,
- br. Knight shall arrange for submission to the Board of monthly progress reports by all health care providers by whom Dr. Knight is being treated.

A copy of the Board's Order is attached hereto and incorporated by reference.

ADJOURNMENT

The Special Executive Committee hearing was adjourned at 2:10 p.m.

A verbatim account of this proceeding was recorded by Ella Hardwick, Court Reporter.

President

Minutes taken and transcribed by Sherry Harris Administrative Assistant June 29 & 30, 2007

BEFORE THE MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

CHARLES KNIGHT, M.D.

ORDER

THIS MATTER having come on for hearing on June 29 and 30, 2007, before the Mississippi State Board of Medical Licensure (hereinafter "Board"), pursuant to Title 73, Chapter 25 of Mississippi Code Annotated, in response to the request of Charles Knight, M.D., seeking reinstatement of his license to practice medicine in the State of Mississippi, and the Board, having heard the evidence, renders the following Findings of Fact, Conclusions of Law, and Order:

FINDINGS OF FACT

- 1. An administrative hearing was held at the request of Charles Knight, M.D., on June 29 and 30, 2007 before the Executive Committee of the Mississippi State Board of Medical Licensure ("Board"), sitting for the full Board, at which Dr. Knight presented evidence as to why the Board should reinstate his medical license, which he had voluntarily surrendered in June 2004;
- 2. Dr. Knight has a longstanding history of anxiety, major depression, use and abuse of mood altering drugs, and other diagnoses;
- 3. Following intervention by the Mississippi Professionals Health Program ("MPHP") in January, 2004, multiple evaluations were performed at Board-approved treatment facilities, which all recommended long-term and/or residential treatment, including detoxification from benzodiazepines;

- 4. Despite subsequent admissions to at least four (4) different Board-approved treatment facilities in 2004 and 2005, Dr. Knight failed to complete treatment at any facility;
- 5. On or about August, 2005, Dr. Knight submitted an Application for Reinstatement of License to Practice Medicine;
- 6. In December 2006, at the request of the MPHP and the Board, Dr. Knight submitted to a comprehensive multi-disciplinary evaluation at the Professional Enhancement Program (PEP) at Pine Grove, which recommended that before returning to active practice, Dr. Knight should (i) enter a facility where he can be detoxified off of Librium, (ii) complete an intensive residential treatment process focused on chemical dependency at a facility familiar with treating healthcare professionals and approved by the MPHP, and (iii) complete an intensive treatment program that can focus on Dr. Knight's personality disorder, dysfunctional interpersonal dynamics, and lack of insight;
- 7. The Board, through the Executive Committee, informed Dr. Knight that he would have to comply with the above-referenced requirements before the Executive Committee would consider his reinstatement to practice;
- 8. Notwithstanding the aforementioned recommendation and encouragement to do so by the MPHP, Dr. Knight failed to enter into or complete the recommended treatment at an approved treatment facility;
- 9. Dr. Knight has continued to maintain, both prior to and during the hearing, that the type of residential treatment heretofore recommended by MPHP, the Board and the various treatment facilities to which he has been admitted, is not in his best interest and is not the type of treatment he needs and has undertaken to formulate and implement his own treatment plan consisting of treatment on an out-patient basis by a psychiatrist and regular visits to a therapist.

CONCLUSIONS OF LAW

Based upon the Findings of Fact as enumerated above, Dr. Knight is suffering from mental illness to an extent which affects professional competency, and is unable to practice medicine with reasonable skill and safety on an unrestricted basis, all in violation of Subsections (a) and (c) of Section 73-25-53, Miss. Code Ann. (1972), as amended.

Notwithstanding the above, and after hearing the testimony and evidence at the hearing, the Board is willing to allow Dr. Knight to pursue a treatment plan other than that previously recommended by the Board, i.e., residential treatment. However, at this time, Dr. Knight's treatment has not been of such length and duration as to render him competent to practice medicine

ORDER

IT IS HEREBY ORDERED that based upon the Findings of Fact and Conclusions of Law enumerated above, the Board hereby denies Dr. Knight's request for reinstatement of his medical license;

FURTHER, the Board grants to Dr. Knight leave to file a new application for reinstatement, which application will not be considered by the Board before November 1, 2007,

FURTHER, the Board hereby decrees that it will not consider granting said reinstatement unless Dr. Knight is able to demonstrate compliance with the following terms and conditions, which the Board finds are necessary to establish Dr. Knight's ability and competence to practice, to-wit:

1. Continuation of his current course of treatment with mental health professionals (psychiatrist, psychologist, and therapist), including prescribed medications, at least once per month visits with the psychologist. The

psychiatrist and psychologist identified during his appearance before the Executive Committee on June 29-30, 2007 are hereby approved by the Board.

- 2. Abstinence from all mood altering substances other than those prescribed in a documented visit with the treating physician(s) approved by the Board and submit to random urine screens conducted by the Board or the Board's agent for all mood altering substances;
 - 3. Submission for approval by the Board a specific practice plan;
- 4. Meeting of all statutory requirements for reinstatement of licensure, including but not limited to the clinical skills assessment exam;
- 5. Meeting personally with Vann Craig, M.D., Executive Director, at least once per month during his treatment, to discuss his progress with these terms, which meetings shall be the responsibility of Dr. Knight to schedule; and,
- 6. Dr. Knight shall arrange for submission to the Board of monthly progress reports by all health care providers by whom Dr. Knight is being treated; and,
- 7. Pursuant to Miss. Code Ann., Section 73-25-30, Dr. Knight shall pay all costs associated with the investigation and conduct of the proceedings for licensure herein.

FURTHER, the Board hereby decrees that this order shall constitute a public record of the State of Mississippi under Miss. Code Ann., Section 25-61-1, *et seq*.

SO ORDERED, this the 25th day of July, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH, M.D., J.D.

PRESIDENT

EXECUTIVE SESSION

DATE: June 30, 2007			
AGENDA ITEM: Reinstateme	ent of license of Charles K	night, M.D.	
MOTION:	SEE ATTACHED		
MADE BY: <u>Dr. Merideth</u> SECONDED BY: <u>Dr. Gibson</u>			
VOTE:	FOR AGAINST	<u>ABSTAIN</u>	<u>ABSENT</u>
Dewitt G. Crawford, M.D. Don A. Gibson, M.D. Philip T. Merideth, M.D., J.D.			
MOTION TO GO OUT OF EXECUTED BY: Dr. Meride			
RECORDED BY: Dr. Gibsor	1		

EXECUTIVE SESSION DECISION IN REINSTATEMENT OF CHARLES S. KNIGHT, M.D.

- Continuation of his current course of treatment with mental health professionals (psychiatrist, psychologist, and therapist), including prescribed medications, at least once per month visits with the psychiatrist and twice per month visits with the psychologist. The psychiatrist and psychologist identified during his appearance before the Executive Committee on June 29-30, 2007, are hereby approved by the Board;
- 2) Abstinence from all mood altering substances other than those prescribed in a documented visit with the treating physician(s) approved by the Board and submit to random urine screens conducted by the Board or the Board's agent for all mood altering substances;
- 3) Submission for approval by the Board a specific practice plan;
- 4) Meeting of all statutory requirements for reinstatement of licensure, including but not limited to the clinical skills assessment exam;
- 5) Meeting personally with Vann Craig, M.D., Executive Director, at least once per month during his treatment, to discuss his progress with these terms, which meetings shall be the responsibility of Dr. Knight to schedule; and,
- 6) Dr. Knight shall arrange for submission to the Board of monthly progress reports by all health care providers by whom Dr. Knight is being treated.

EXECUTIVE SESSION DECISION IN REINSTATEMENT OF CHARLES S. KNIGHT, M.D.

- 1) Continuation of his current course of treatment with mental health professionals (psychiatrist, psychologist, and therapist), including prescribed medications, at least once per month visits with the psychiatrist and twice per month visits with the psychologist. The psychiatrist and psychologist identified during his appearance before the Executive Committee on June 29-30, 2007, are hereby approved by the Board;
- 2) Abstinence from all mood altering substances other than those prescribed in a documented visit with the treating physician(s) approved by the Board and submit to random urine screens conducted by the Board or the Board's agent for all mood altering substances:
- 3) Submission for approval by the Board a specific practice plan;
- 4) Meeting of all statutory requirements for reinstatement of licensure, including but not limited to the clinical skills assessment exam;
- 5) Meeting personally with Vann Craig, M.D., Executive Director, at least once per month during his treatment, to discuss his progress with these terms, which meetings shall be the responsibility of Dr. Knight to schedule; and,
- 6) Dr. Knight shall arrange for submission to the Board of monthly progress reports by all health care providers by whom Dr. Knight is being treated.

MINUTES EXECUTIVE COMMITTEE MEETING MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE JULY 11, 2007

MEMBERS PRESENT:

Philip T. Merideth, M.D., J.D., Jackson, President Don A. Gibson, M.D., Richland, Vice President William S. Mayo, D.O., Oxford, Secretary

ALSO PRESENT:

H. Vann Craig, M.D., Director Stan T. Ingram, Complaint Counsel for the Board Ellen O'Neal, Assistant Attorney General Rhonda Freeman, Bureau Director, Licensure Division Thomas Washington, Bureau Director, Investigative Division Frances Scott, Special Projects Officer, Investigative Division Sherry Harris, Staff Officer

The Executive Committee of the Mississippi State Board of Medical Licensure met on Wednesday, July 11, 2007, at 2:00 p.m. in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

PERSONAL APPEARANCE BY BRANDON K. BEAN, M.D., FLOWOOD, MISSISSIPPI MEDICAL LICENSE NUMBER 19272

Dr. Craig advised that Dr. Bean had been requested to appear before the Executive Committee because in completing his original application in December of 2005, he answered question #26, "have you ever been arrested, other than minor traffic citations?" as no, when in fact he had a DUI arrest in September of 2005.

Dr. Bean joined the meeting but was not represented by legal counsel. He executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference.

After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. Mayo, and carried unanimously to issue Dr. Bean a Letter of Concern and allow him to complete a new application for licensure in order to answer the question correctly. Dr. Craig advised that the letter is not a reportable action.

PERSONAL APPEARANCE BY GUSTAVO DANIEL LUZARDO, M.D., JACKSON, MISSISSIPPI MEDICAL LICENSE NUMBER 19202

Dr. Craig advised that Dr. Luzardo had been asked to appear before the Executive Committee because it was discovered that he failed to renew his license in June 2006. Dr. Luzardo's permanent license was issued on January 30, 2006, and he failed to renew in June 2006. The Board received his 2006-2007 and 2007-2008 annual renewals on June 15, 2007. Dr. Luzardo had been practicing at the University of Mississippi Medical Center as chief resident in the Department of Neurological Surgery from July 1, 2006, through June 15, 2007, without a valid license.

Dr. Luzardo joined the meeting but was not represented by legal counsel. He executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference.

After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. Mayo, and carried unanimously to issue Dr. Luzardo a Letter of Concern. Dr. Craig advised Dr. Luzardo that the letter is not a reportable action; however, Dr. Craig advised that his 2006-2007 license would not be retroactive to July 1, 2006, and anyone receiving a verification of license would be advised that during July 1, 2006, through June 15, 2007, he did not have a valid Mississippi medical license.

EHAB RABAA, M.D., MEMPHIS, TN, APPLICANT FOR LICENSURE

Dr. Craig advised the Executive Committee that it took Dr. Rabaa multiple attempts to pass the USMLE; however, he did meet the required seven (7) years. Dr. Craig advised that Dr. Rabaa is a pathology resident and is currently licensed in Tennessee, North Carolina and California.

After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. Mayo, and carried unanimously to issue Dr. Rabaa a Mississippi medical license.

TIMOTHY E. WHITTLE, M.D., WEST POINT, MISSISSIPPI MEDICAL LICENSE NUMBER 11439

Dr. Craig advised that a letter had been received from the Mississippi Professionals Health Program (MPHP) advising that Dr. Whittle had successfully completed his contract.

After a brief discussion, motion was made by Dr. Mayo, seconded by Dr. Gibson, and carried unanimously to issue a Board Order removing all restrictions that were imposed by the Board Order dated March 19, 2003. A copy of the Order removing restrictions on Dr. Whittle's Mississippi medical license is attached hereto and incorporated by reference.

GREGORY B. FOX, D.O., GAUTIER, MISSISSIPPI MEDICAL LICENSE NUMBER 15152

Dr. Craig advised that he had received a letter from the Mississippi Professionals Health Program advising recommendations from the evaluation at the Professional Enhancement Program (PEP). PEP's recommendation was for Dr. Fox to take a year away from the practice of medicine.

After a brief discussion, Mr. Ingram, Complaint Counsel for the Board, advised that the Board could issue an order advising Dr. Fox that the Summons and Affidavit of the Order of Prohibition are dismissed; however, he has signed an agreement with MPHP not to practice medicine for a period of at least one (1) year.

Motion was made by Dr. Mayo, seconded by Dr. Gibson, and carried unanimously to issue an Order of Dismissal which is subject to the terms and conditions of his Recovery Contract Agreement with MPHP. A copy of the Order is attached hereto and incorporated by reference.

JOSEPH MARDIS, M.D., BRANDON, MISSISSIPPI MEDICAL LICENSE NUMBER 15863

For informational purposes only, Dr. Craig advised that Dr. Mardis has relapsed after being involved in a motorcycle accident. Also, Dr. Craig advised that MPHP is advocating for Dr. Mardis while he is in treatment.

MAHMOUD I. ALI, M.D., SAN FRANCISCO, CA, MISSISSIPPI MEDICAL LICENSE NUMBER 19091, CONSENT ORDER

Dr. Craig reviewed the Consent Order executed by Dr. Ali which mirrors the actions of the California Board. Motion was made by Dr. Gibson, seconded by Dr. Mayo, and carried unanimously to accept the Consent Order, a copy of which is attached hereto and incorporated by reference.

SAMUEL NICK SHAW, M.D., BRANDON, MISSISSIPPI MEDICAL LICENSE NUMBER 17096, SURRENDER OF MEDICAL LICENSE

Dr. Craig reviewed the Surrender of Medical License executed by Dr. Shaw, which was a voluntary surrender to avoid an evidentiary hearing before the Mississippi State Board of Medical Licensure. Motion was made by Dr. Mayo, seconded by Dr. Gibson, and carried unanimously to accept the Surrender of Medical License, a copy of which is attached hereto and incorporated by reference.

APPROVAL TO ADD SIERRA TUCSON TO BOARD'S APPROVED LIST OF TREATMENT FACILITIES

For informational purposes only, Dr. Craig advised that a letter had been received from Dr. Carr requesting approval to add Sierra Tucson to the Board's approved list of treatment facilities. After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. Mayo, and carried unanimously to defer to the Full Board on July 12, 2007.

EMERGENCY LICENSE FOR OUT-OF-STATE PHYSICIANS

For informational purposes only, Dr. Craig advised that the Board has received several calls about continuing the emergency license for out-of-state physicians. Dr. Craig advised that the Board is aware of a couple free clinics that are still operating on the Gulf Coast.

After a brief discussion, motion was made by Dr. Mayo, seconded by Dr. Gibson, and carried to request that the Full Board vote to continue issuing emergency licenses for out-of-state physicians as long as the Governor continues extending the state of emergency relative to Hurricane Katrina.

SHORT-TERM TRAINING FOR OUT-OF-STATE PHYSICIANS

For informational purposes only, Ms. Freeman, Bureau Director, Licensure Division, reviewed a copy of the proposed regulation pertaining to short-term training for out-of-state physicians and a modified application. This matter will be addressed at the Full Board meeting on July 12, 2007.

APPROVAL REQUEST FOR CONTINUING EDUCATION CREDITS FROM AMERICAN PODIATRIC MEDICAL ASSOCIATION'S ANNUAL SCIENTIFIC MEETING

After a brief discussion, the Executive Committee unanimously agreed that the Board does not have authority to approve their request and that they be advised to request approval from their Podiatric Association.

OTHER BUSINESS

For informational purposes only, Dr. Craig advised that an order had been served on William Warren Smith, M.D., to appear before the Examining Committee on July 18, 2007, for an evaluation.

For informational purposes only, Dr. Craig advised that a letter had been received from the National Board of Certification Orthopaedic Technologists (NBCOT) requesting sponsorship for licensing. Afer a brief discussion, the Executive Committee unanimously agreed to advise NBCOT that this matter would require legislation.

Ms. Freeman advised that we are currently charging \$550.00 for new license, which includes \$50 for fingerprinting. Plans are to activate our online application later this year and to encourage use of the system there needs to be a monetary adjustment. After a brief discussion, motion was made by Dr. Mayo, seconded by Dr. Gibson, and carried unanimously to request approval from the Full Board to increase paper copies of applications to \$600.00 and offer online applications at \$550.00.

For informational purposes only, Dr. Craig distributed a list of 594 physicians that have not renewed their 2007-2008 medical license. A reminder letter will be mailed out next week to these individuals.

For informational purposes only, Dr. Craig provided an update of the site visit to Dr. Patrick Sewell's office following a complaint. Dr. Craig advised that he found no medical violations, but that the facility should be considered a Level II Office Based Surgical Facility and not an Ambulatory Surgical Facility. Dr. Craig advised that he had a meeting with the office manager and their attorney to discuss concerns of the site visit. Dr. Craig gave them 30 days to come into compliance with the Board's Rules and Regulations concerning a Level II Office Based Surgical Facility.

Dr. Craig advised that the staff was working on the 2009 Budget but due to the Board meeting being held a week early this year, the draft copy is not yet complete. After a brief discussion, motion was made by Dr. Merideth, seconded by Dr. Gibson, and carried unanimously to authorize the Executive Director authority to review and approve the 2009 Budget on behalf of the Board.

REVIEW OF JULY 12, 2007, BOARD AGENDA

Dr. Craig briefly reviewed the agenda for tomorrow's Board meeting.

ADJOURNMENT

There being no further business, the meeting adjourned at 5:35 p.m.

PHILIP T. MERIDETH, M.D., J.D.

President

Minutes taken and transcribed by Sherry Harris Staff Officer July 11, 2007

AGREEMENT TO APPEAR INFORMALLY BEFORE EXECUTIVE COMMITTEE

- I, **BRANDON BEAN, M.D.**, have requested an opportunity to appear informally before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal, no disciplinary action will be taken without my express written consent. In so doing, I have been advised and understand the following:
 - During the meeting, the Executive Committee may or may not be represented by legal counsel. Notwithstanding, I understand that I have a right, if I so choose, to employ legal counsel and have counsel present during the informal meeting.
 - I authorize the Committee Members to review and examine any statements, documentary evidence, or materials concerning the allegations during my informal appearance.
 - 3. Because the purpose of my appearance is to avoid a hearing before the Board, I agree that presentation to and consideration by the Committee of any facts, matters, and documents pertaining to my case shall not unfairly or illegally prejudice the Committee members from further participation or consideration in the event a formal disciplinary hearing is later conducted. Stated differently, in the event the pending matter is not resolved following my appearance before the Committee, I will not object to any of the Committee members from further participating in subsequent meetings or hearings that may be conducted in relation to this matter.
 - 4. By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:

with legal counsel present (name of counsel:)
x without legal counsel present
EXECUTED, this the 11 day of July , 2007.
Witness: Sherry Jan's

AGREEMENT TO APPEAR INFORMALLY BEFORE EXECUTIVE COMMITTEE

I, GUSTAVO DANIEL LUZARDO, M.D., have requested an opportunity to appear informally before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal, no disciplinary action will be taken without my express written consent. In so doing, I have been advised and understand the following:

- 1. During the meeting, the Executive Committee may or may not be represented by legal counsel. Notwithstanding, I understand that I have a right, if I so choose, to employ legal counsel and have counsel present during the informal meeting.
- I authorize the Committee Members to review and examine any statements, documentary evidence, or materials concerning the allegations during my informal appearance.
- 3. Because the purpose of my appearance is to avoid a hearing before the Board, I agree that presentation to and consideration by the Committee of any facts, matters, and documents pertaining to my case shall not unfairly or illegally prejudice the Committee members from further participation or consideration in the event a formal disciplinary hearing is later conducted. Stated differently, in the event the pending matter is not resolved following my appearance before the Committee, I will not object to any of the Committee members from further participating in subsequent meetings or hearings that may be conducted in relation to this matter.
- 4. By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:

with legal counsel present (name of counsel:

without legal counsel present	
EXECUTED, this the 11 day of July, 200 7.	,
Q. Luado	
Witness: Merry Maris	

IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

TIMOTHY E. WHITTLE, M.D.

ORDER REMOVING ALL RESTRICTIONS

THIS MATTER came on regularly for consideration on July 11, 2007, before the Executive Committee of the Mississippi State Board of Medical Licensure, in response to the request of Timothy E. Whittle M.D. (hereinafter "Licensee"), seeking removal of all restrictions on his license to the practice medicine in the State of Mississippi. By virtue of that certain Order dated March 19, 2003, Licensee was authorized to return to practice of medicine, subject to certain enumerated terms and conditions, i.e. adherence to all provisions of a "Re-Entry Practice Plan" as approved by the Board and Mississippi Impaired Physicians Committee (now Mississippi Professionals Health Committee). On June11, 2007, Licensee appeared before the Mississippi Professionals Health Committee, wherein it was determined that Licensee had fulfilled all aspects of the aforementioned Re-Entry Practice Plan and was discharged from the same. Licensee now seeks removal of all restrictions on his medical license. The Executive Committee of the Board, after hearing said request, finds the same to be well-taken.

IT IS HEREBY ORDERED, that Licensee's request for removal of all restrictions on his license to practice medicine is hereby granted. Licensee now holds an unrestricted license to practice medicine in the State of Mississippi.

IT IS FURTHER ORDERED, that pursuant to Miss. Code Ann. Sections 73-25-27 and 73-25-32 (1972), a copy of this Order shall be sent by registered mail or personally served upon Timothy E. Whittle M.D.

ORDERED, this the 11th day of July, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP V. MERIDETH, M.D., J.D.

PRESIDENT

IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

GREGORY FOX, D.O.

ORDER OF DISMISSAL

WHEREAS, on January 12, 2007, GREGORY FOX, D.O., hereinafter "Licensee," was summoned to appear before the Mississippi State Board of Medical Licensure and charged with failure to submit to an independent mental or physical examination as ordered by the Examining Committee designated pursuant to the Mississippi Impaired Physicians Law;

WHEREAS, simultaneous with the issuance of the aforementioned summons, the Board issued an Order of Prohibition, thereby prohibiting Licensee from practicing medicine in the State of Mississippi pending Licensee's compliance with the order of the Examining Committee;

WHEREAS, following issuance of the aforementioned summons and order, Licensee presented himself for the required comprehensive evaluation, and thereafter completed the evaluation and recommended treatment at the Professional Enhancement Program (PEP), Hattiesburg, Mississippi. On May 14, 2007, Licensee entered into a Recovery Contract Agreement with the Board and Mississippi Professionals Health Program (MPHP), wherein Licensee agreed to certain terms and conditions deemed necessary to maintain himself in a sound recovery program, including but not limited to, total abstinence from use of any mood-altering substances,

submission to urine and/or serum screens, periodic re-evaluation, and compliance with the MPHP recommendation that Licensee not return to active practice of medicine for a

period of one(1) year beginning from the date Licensee concluded his treatment at PEP;

WHEREAS, the Executive Committee has been requested by its complaint

counsel to dismiss the pending summons and affidavit, and remove same from the

active docket of the Board, subject to Licensee complying with all terms and conditions

of the referenced May 14, 2007, Recovery Contract Agreement.

NOW THEREFORE, the Summons and Affidavit now pending against Gregory

Fox, D.O. before the Mississippi State Board of Medical Licensure, is hereby dismissed,

subject to Dr. Fox's compliance with all terms and conditions set forth in the referenced

Recovery Contract Agreement entered into on May 14, 2007, by and between Dr. Fox,

this Board, and the Mississippi Professionals Health Program.

IT IS FURTHER ORDERED, that pursuant to Miss. Code Ann. Sections 73-25-27

and 73-25-32 (1972), a copy of this Order shall be sent by registered mail or personally

served upon Gregory Fox, D.O.

DATED, this the 11th day of July, 2007 at Jackson, Mississippi.

MISSISSIPPI STATE BOARD OF MEDICAL

LICENSURE

BY:

PHILIP T. MERIDETH, M.D., J.D.,

PRESIDENT

2

IN THE MATTER OF PHYSICIAN'S LICENSE

OF

MAHMOUD I. ALI, M.D.

CONSENT ORDER

WHEREAS, MAHMOUD I. ALI, M.D., hereinafter referred to as "Licensee" is the current holder of License No. 19091, issued September 27, 2005, for the practice of medicine in the State of Mississippi;

WHEREAS, on September 8, 2006, Licensee's California medical license number A81127, was suspended based on evidence that Licensee violated the drug statutes, excessive use of drugs or alcohol, and illegal possession of controlled substances. It was determined that Licensee is a danger to the public health, safety and welfare, and was suspended pending a final determination by the Medical Board of California;

WHEREAS, on January 29, 2007, the Medical Board of California ordered the Interim Suspension Order dated September 8, 2006, terminated and Licensee's California medical license revoked with the revocation stayed and placed on probation for five (5) years subject to terms and conditions. The California Medical Board's Decision and Order are attached hereto as composite "Exhibit A," and incorporated herein by reference;

WHEREAS, pursuant to Subsections (8)(d) and (9) of Section 73-25-29, Mississippi Code (1972), Annotated, the aforementioned actions by the Medical Board of California constitutes restrictions placed on his license in another jurisdiction, grounds for which the Mississippi State Board of Medical Licensure may revoke the Mississippi medical license of Licensee, suspend his right to practice for a time deemed proper by the Board, place

his license on probation, the terms of which may be set by the Board or take any other action in relation to his license as the Board may deem proper under the circumstances;

NOW, THEREFORE, the Mississippi State Board of Medical Licensure with consent of Licensee as signified by his joinder herein, does hereby indefinitely revoke Licensee's Certificate No. 19091, with the revocation stayed and placed on probation for five (5) years to practice medicine in the State of Mississippi.

Licensee shall maintain advocacy with the Medical Board of California's Diversion Program. At such time as Licensee seeks removal of conditions on his Mississippi Medical License, the Board reserves the right, at it's sole and absolute discretion, to utilize any information or reports from the appropriate physician's health program, or any other source to impose any other restrictions it deems necessary to protect the public. In so doing, Licensee hereby authorizes the Board to request and obtain any and all private health information which it deems necessary, and Licensee shall execute such waiver or releases necessary to accomplish release of such private health information.

Licensee shall have the right, but not the obligation, to petition the Board for return of his Mississippi medical license at such time as he has successfully completed all terms and conditions as required by the Medical Board of California.

Licensee shall report in writing to the Mississippi State Board of Medical Licensure within fifteen (15) days should his medical license in any state or federal jurisdiction be subject to investigation or disciplinary action. Licensee shall notify the Mississippi State Board of Medical Licensure no less than sixty (60) days prior to relocating his practice to the State of Mississippi.

Pursuant to Miss. Code Ann., Section 73-25-30, Licensee shall pay all investigative costs associated with the disciplinary action taken herein. Licensee shall be advised of the total assessment by separate written notification, and shall have a certified check or money

order made payable to the Mississippi State Board of Medical Licensure on or before forty (40) days from the day of acceptance and approval of this Consent Order by the Board.

This Consent Order shall be subject to approval by the Board. If the Board fails to approve this Consent Order, in whole or in part, it shall have no force or effect on the parties. It is further understood and agreed that the purpose of this Consent Order is to avoid a hearing before the Board. In this regard, Licensee authorizes the Board to review and examine any documentary evidence or material concerning the Licensee prior to or in conjunction with its consideration of this Consent Order. Should this Consent Order not be accepted by the Board, it is agreed that presentation to and consideration of this Consent Order and other documents and matters pertaining thereto by the Board shall not unfairly or illegally prejudice th Board or any of its members from participation in any further proceedings.

Licensee understands and expressly acknowledges that this Consent Order, if approved and executed by the Mississippi State Board of Medical Licensure, shall constitute a public record of the State of Mississippi. Licensee further acknowledges that the Board shall provide a copy of this Order to, among others, the U.S. Drug Enforcement Administration, and the Board makes no representation as to action, if any, which the U.S. Drug Enforcement Administration may take in response to this Order.

Pursuant to Mississippi Code Annotated, Section 73-25-63(5), this Consent Order shall not be used against Licensee in any other legal proceedings nor does execution of this Consent Order constitutes any acknowledgment of wrongful misconduct or malpractice by Licensee.

Recognizing his right to notice of charges specified against him, to have such charges adjudicated pursuant to Miss. Code Ann. Section 73-25-27 (1972), to be represented therein by legal counsel of his choice, and to a final decision rendered upon

written findings of act and conclusions of law, MAHMOUD I. ALI, M.D., nonetheless, hereby waives his right to notice and a formal adjudication of charges and authorizes the Board to enter an order accepting this Consent Order, thereby indefinitely suspending his license to practice medicine in the State of Mississippi, subject to those terms and conditions listed above.

Executed, this the 20th, day of 7une, 2007.

ACCEPTED AND APPROVED, this the _______, day of _________,

2007, by the Mississippi State Board of Medical Licensure.



BEFORE THE MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE MS Board of Medical Licensure IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

SAMUEL NICK SHAW, M.D.

SURRENDER OF MEDICAL LICENSE

WHEREAS, SAMUEL NICK SHAW, M.D., hereinafter referred to as "Licensee," is the current holder of Medical License Number 17096 issued February 12, 2001, to practice medicine in the State of Mississippi;

WHEREAS, on or about December 14, 2002, Licensee was involved in a two vehicle accident in Ridgeland, Madison County, Mississippi, wherein the driver of the second vehicle subsequently died of injuries inflicted in the offset, head on collision. Licensee was subsequently arrested, charged with a crime defined by Section 97-3-35 of the Mississippi Code, Manslaughter-Culpable Negligence. Licensee was later indicted by the Grand Jury for DUI Causing Death.

WHEREAS, on April 2, 2007, in Madison County Circuit Court, Licensee entered a plea of Guilty to DUI Death, with plea accepted by the Circuit Court, and sentence pronounced of ten years with eight years suspended, and five years of supervised probation;

WHEREAS, such conduct, if established in a due process hearing before the Board, would constitute conviction of a felony or misdemeanor involving moral turpitude, a certified copy of the conviction order or judgement rendered by the trail court being prima facia evidence thereof; and unprofessional, dishonorable or unethical conduct

likely to harm the public; all in violation of Miss. Code Ann. §73-25-29(6) and §73-25-29(8)(d), being grounds for which the Mississippi State Board of Medical Licensure may place Licensee's medical license on probation, the terms of which may be set by the Board, suspend his right to practice for a time deemed proper by the Board, revoke said license, or take any other action in relation to said license as the Board may deem proper under the circumstances;

WHEREAS, Licensee wishes to avoid an evidentiary hearing before the Board by voluntarily relinquishing his right to practice medicine in the State of Mississippi;

NOW, THEREFORE, Licensee hereby voluntarily surrenders his medical license (Number 17096) to practice medicine in the State of Mississippi. Licensee understands that this is an unconditional surrender, is reportable as disciplinary action to the National Practitioner Data Bank, and is a public record of the State of Mississippi. In the event Licensee later decides to practice medicine in the State of Mississippi, it will be necessary for him to submit a new application with the Board. At such time, the Board reserves the right to utilize all evidence, including all facts developed during the current investigation, as part of the consideration of any application.

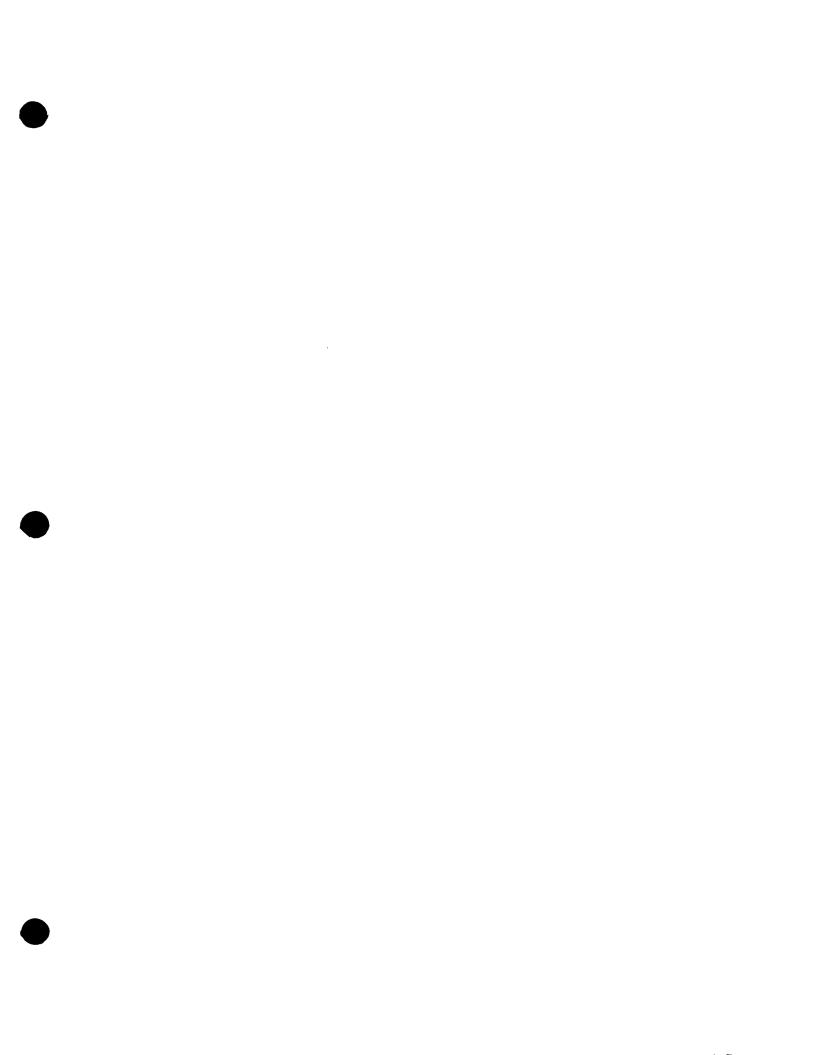
EXECUTED this the <u>12</u> day of June, 2007.

Samuel Nick Shaw, M.D.

ACCEPTED AND APPROVED this the day of June, 2007, by the Mississippi State Board of Medical Licensure.

DeWitt G. Crawford, M.D., President Mississippi State Board of Medical Licensure

Approved as to form:
Attorney for Mississippi State Board of Medical Licensure Robinson, Biggs, Ingram, Solop & Farris, PLLC
Ву:
Stan T. Ingram (MSB # 3025)
Approved as to form:
Attorney for Samuel Nick Shaw, M.D. Kirksey & Associates
, Ву:
William B. Kirksey (MSB #)



BOARD MINUTES MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE JULY 12, 2007

The regularly scheduled meeting of the Mississippi State Board of Medical Licensure was held on Thursday, July 12, 2007, in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

The following members were present:

Philip T. Merideth, M.D., J.D., Jackson, President Don A. Gibson, M.D., Richland, Vice President William S. Mayo, D.O., Oxford, Secretary Larry B. Aycock, M.D., McComb Dewitt G. Crawford, M.D., Louisville Virginia M. Crawford, M.D., Hattiesburg S. Randall Easterling, M.D., Vicksburg William B. Harper, D.O., Greenwood

Also present:

H. Vann Craig, M.D., Director
Stan T. Ingram, Complaint Counsel for the Board
Ellen O'Neal, Special Assistant Attorney General
Rhonda Freeman, Bureau Director, Licensure Division
Thomas Washington, Bureau Director, Investigative Division
Frances Scott, Special Projects Officer, Investigative Division
Sherry Harris, Staff Officer
Cecil R. Burnham, Jackson, Consumer Health Committee

Not present:

A. Wallace Conerly, M.D., Jackson Wesley Breland, Hattiesburg, Consumer Health Committee Martha Thompson, Oxford, Consumer Health Committee

The meeting was called to order at 9:10 a.m. by Dr. Merideth, President. The invocation was given by Dr. D. Crawford and the pledge was led by Dr. V. Crawford. Dr. Merideth extended a welcome to Sheree Zbylot and Jane Tallant, representing the Board of Nursing, Marla Moore and Clare Hester, representing the Mississippi Academy of Physician Assistants, Raymond Keith, representing the Pharmacy Board, and all other visitors present.

APPROVAL OF CERTIFICATION OF MISSISSIPPI LICENSES TO OTHER ENTITIES FOR THE PERIOD MAY 01, 2007, THROUGH JUNE 30, 2007

One hundred forty-six (146) licenses were certified to other entities for the period May 01, 2007, through June 30, 2007. Motion was made by Dr. D. Crawford, seconded by Dr. Mayo, and carried unanimously to approve these certifications.

APPROVAL OF LICENSES ISSUED FOR THE PERIOD MAY 01, 2007, THROUGH JUNE 30, 2007

Ninety-one (91) licenses were issued for the period May 01, 2007, through June 30, 2007. Motion was made by Dr. Mayo, seconded by Dr. D. Crawford, and carried unanimously to approve these licenses.

Copies of a list of physicians who have not renewed their 2007-2008 medical licenses were distributed for their review. Motion was made by Dr. Mayo, seconded by Dr. Gibson, and carried unanimously to report the list to the Attorney General's office and other entities. A copy of the list is attached hereto and incorporated by reference. Dr. Craig advised that the physicians on the list would be receiving a reminder notice within the next week.

REVIEW OF MINUTES OF THE EXECUTIVE COMMITTEE MEETING DATED MAY 16, 2007, MINUTES OF THE RECESSED EXECUTIVE COMMITTEE MEETING DATED MAY 17, 2007, AND MINUTES OF THE BOARD MEETING DATED MAY 17, 2007

Minutes of the Executive Committee Meeting dated May 16, 2007, Minutes of the Recessed Executive Committee Meeting dated May 17, 2007, and Minutes of the Board Meeting dated May 17, 2007, were reviewed. Dr. Mayo moved for approval of the minutes as submitted. Dr. Gibson seconded the motion, and it carried unanimously.

REPORT OF JULY 11, 2007, EXECUTIVE COMMITTEE MEETING

Dr. Craig briefly reported on the July 11, 2007, Executive Committee meeting. Dr. Craig advised that the Executive Committee had deferred several issues to the Full Board for discussion and/or approval.

The Committee recommends that the Board approve the definition of community as 30 minutes or no more than 30 miles from the supervising physician and exceptions to the definition are to be presented and approved by the Executive Director on a case-by-case basis.

Dr. Merideth advised that the issue of Schedule II controlled substance drug use by Nurse Practitioners was deferred for further discussion at the upcoming meeting of the Joint Practice Committee scheduled for July 27, 2007.

Motion was made by Dr. Easterling, seconded by Dr. Mayo, and carried unanimously to approve the recommendations of the Scope of Practice Committee relative to the use of Botox off-label and the definition of community.

Professional Health Program - Dr. Gibson (Chair), Dr. Mayo, Dr. Merideth

Dr. Gibson advised there was no new information to report.

Rules, Regulation & Legislative - Dr. Easterling (Chair), Dr. D. Crawford, Dr. Harper

Dr. Easterling advised there was no new information to report.

Ethics - Dr. Merideth (Chair), Dr. V. Crawford, Dr. Conerly

Dr. Merideth distributed a copy of a draft proposal concerning the sale of health related goods from physicians' offices that was submitted by Dr. Easterling. Dr. Easterling briefly discussed the draft proposal and the matter was referred back to the Ethics Committee.

Electronic Medical Records - Dr. D. Crawford (Chair), Dr. V. Crawford, Dr. Mayo

Dr. D. Crawford advised that there would be a presentation later in the meeting concerning this matter.

PRESENTATION BY SCOTT GILBERT, PRESIDENT, A BRIDGE TO RECOVERY

Dr. Craig advised that the presentation had been cancelled and a request was made to present at a later date.

Dr. Craig advised that the Executive Committee had discussed continuing emergency licenses for out-of-state physicians since the Governor continues to extend the state of emergency. After a brief discussion, motion was made by Dr. D. Crawford, seconded by Dr. Mayo, and carried unanimously to continue issuing emergency licenses to out-of-state physicians working in the free clinics and also to request notice from the Governor's office as to future plans relative to this matter.

Dr. Craig advised that the Executive Committee was requesting Board approval to increase initial licensure fees. Dr. Craig advised that currently the Board is charging \$550.00 for new license, which includes \$50 for fingerprinting. Plans are to activate our online application later this year and to encourage the use of the online system there needs to be a monetary adjustment. Dr. Craig advised that the Executive Committee was proposing to increase paper copies of initial license applications to \$600.00 and offer online applications for \$550.00. Motion was made by Dr. D. Crawford, seconded by Dr. Mayo, and carried unanimously to accept the Executive Committee's proposal.

Dr. Craig presented other informational items, which are reflected in the Executive Committee Minutes. Motion was made by Dr. D. Crawford, seconded by Dr. Harper, and carried unanimously to approve the actions of the Executive Committee.

REPORTS FROM COMMITTEES

Consumer Health - Mr. Breland (Chair), Ms. Thompson, Mr. Burnham

Mr. Burnham advised there was no new information to report.

Education & Workforce - Dr. Conerly (Chair), Dr. Aycock, Dr. Mayo

Dr. Aycock advised there was no new information to report.

Scope of Practice - Dr. Merideth (Chair), Dr. Easterling, Dr. Aycock

Dr. Merideth advised that the Scope of Practice Committee met this morning with Marla Moore and Clare Hester, representatives of the Mississippi Academy of Physician Assistants, to discuss the use of Botox off-label, and the definition of community as 30 minutes or no more than 30 miles from the supervising physician.

Dr. Merideth advised the Committee recommends that the Board allow the use of Botox off-label after the supervising physician has examined the patient, documented the patient's chart approving the use, and the physician is on the premises.

APPROVAL OF "SIERRA TUCSON" TREATMENT FACILITY TO BE ADDED TO BOARD'S APPROVED FACILITIES LIST

Dr. Craig advised that a letter had been received from Gary D. Carr, M.D., Medical Director, Mississippi Health Professionals Program, requesting that Sierra Tucson be added to the Board's approved facilities list. After a brief discussion, motion was made by Dr. D. Crawford, seconded by Dr. V. Crawford, and carried unanimously to add Sierra Tucson to the Board's approved treatment facilities.

PRESENTATION BY MICHAEL BURGER WITH SAGE SOFTWARE HEALTHCARE AND F. NICHOLAS WILLARD, PRESIDENT, THE WILLARD CONSULTANCY

Mr. Willard addressed the Board and advised that he and Mr. Burger were here to discuss issues concerning electronic prescribing and electronic signatures. Mr. Burger discussed how the software used at Sage Health works and how the information travels over secure data lines. Mr. Burger advised that the program is not currently used for control substances.

After a lengthy discussion of questions and answers, Dr. Aycock and Dr. V. Crawford encouraged the Board to revisit the current regulations. After several proposed motions with amendments, Dr. Aycock made the final motion that the Board offer a waiver to Board Regulation XXIII, "Regulations Pertaining to Prescribing, Administering and Dispensing of Medication", subsection "Prescription Guidelines - All Medications", to address the electronic prescribing of legend drugs, and to refer the matter to the Electronic Medical Records Committee for review and revision. The motion was seconded by Dr. D. Crawford, and carried unanimously.

A second motion was made by Dr. Merideth, seconded by Dr. Easterling, and carried unanimously to authorize the Executive Director to draft language for the Board's website to notify concerned stakeholders of the waiver. A copy of the memorandum posted on the Board's website is attached hereto and incorporated by reference.

Dr. Merideth appointed Dr. Aycock as Chair of the Electronic Medical Records Committee replacing Dr. D. Crawford. Dr. D. Crawford will replace Dr. Aycock on Education & Workforce Committee.

THE BOARD RECESSED AT 10:40 A.M. AND RECONVENED AT 11:00 A.M.

HEARING IN THE CASE OF GLYN R. HILBUN, M.D., MADISON, MISSISSIPPI MEDICAL LICENSE NUMBER 04679

HEARING IN THE CASE OF KEVIN S. COOPER, M.D., PASCAGOULA, MISSISSIPPI MEDICAL LICENSE NUMBER 13038

Neither Dr. Hilbun nor Dr. Cooper were present or represented by legal counsel. Mr. Ingram advised that Dr. Cooper's attorney, Earl Denham, had requested a continuance until the September Board meeting. Mr. Ingram requested a continuance for Dr. Hilbun in order for the Board to hear the pending silicosis cases at one time.

Motion was made by Dr. Mayo, seconded by Dr. D. Crawford, and carried unanimously to grant a continuance to Dr. Hilbun and Dr. Cooper until the September 20, 2007, Board meeting.

Mr. Ingram did advise the Board of the possibility that the September meeting could be a two-day hearing.

FINAL ADOPTION OF REGULATION CONCERNING TEMPORARY TRAINING LICENSE FOR OUT-OF STATE RESIDENTS

Motion was made by Dr. Gibson, seconded by Dr. Mayo, and carried unanimously to adopt in final form the Board's regulation concerning temporary training license for out-of-state residents, a copy of which is attached hereto and incorporated by reference. The regulation will be filed with the Secretary of State under the Administrative Procedures Act.

PROPOSED ADOPTION OF REGULATION CONCERNING SHORT-TERM TRAINING FOR OUT-OF-STATE PHYSICIANS

Dr. Craig discussed the need for the proposed regulation concerning short-term training for out-of-state physicians as well as approval for a modified application for the physicians involved.

After a brief discussion, motion was made by Dr. D. Crawford, seconded by Dr. Mayo, and carried unanimously of the Board's intent to adopt the proposed regulation concerning short-term training for out-of-state physicians and the modified application. A copy of the proposed regulation and the modified application are attached hereto and incorporated by reference. The proposed regulation will be filed with the Secretary of State under the Administrative Procedures Act.

OTHER BUSINESS

There were several questions directed to Mr. Keith, representative of the Pharmacy Board, about post dating prescriptions and the number of control substances allowed on each prescription. Mr. Keith advised that the current regulations require the date on a prescription to be the date that the patient was seen by the physician. Dr. D. Crawford advised that no more than one (1) controlled substance is allowed on a prescription. After a brief discussion, motion was made by Dr. Merideth, seconded by Dr. D. Crawford, and carried unanimously for the Executive Director to work with the Pharmacy Board concerning these issues.

ADJOURNMENT

The meeting adjourned at 11:25 a.m. with the next meeting scheduled for Thursday, September 20, 2007.

PHIĽIP T. MERIDETH, M.D., J.D.

President

Minutes taken and transcribed by Sherry Harris Staff Officer July 12, 2007

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE MISSISSIPPI PHYSICIANS - LICENSE EXPIRATION 06/30/2007 CURRENT MISSISSIPPI PHYSICIANS PRINTED: 7/00/2007

Disciplinary Name City State Zip 2147 WIMA RUDPOLPH BLVD

UMMC DEPARTMENT OF ANESTHESIOLOGY 2500 NORTH STATE ST
14001 A ST. GERMAIN DRIVE
WEST JACKSON FAMILY WEDICINE 1815 HOSPITAL DRIVE
201 MULBERRY ST
ST. LUKE'S EPISCOPAL HOSPITAL 6720 BERTNER ST
15012 LEMOYNE BLVD

UTMG PEDIATRIC NEUROLOGY 777 WASHINGTON #250

UNITED HEALTH CARE OF LOUISIANA 3838 CAUSEY BLVD, STE 2600

HATTIESBURG CLIIC 415 SOUTH 28TH AVE
SPECIAL CARE NURSERY 1441 BECKLEY DRIVE
THE AROOSTOOK MEDICAL CENTER 140 ACADEMY STREET
11400 POPLAR ST
NO 40 THE HIGHLANDS
VANDERBILT MEDICAL CENTER DEPT OB-GYN, B-1100 MCN
U OF MISS MEDICAL CENTER 2500 NORTH STATE STREET
CENTRAL MS HEALTH SERVICES,INC 500 WEST COUNTY LINE
2121 TRIMBLE WAY 37040 39216 20121-2338 39204 39361 77030 39532 16845 07/10/2000 CLARKSVILLE CLARKSVILLE
JACKSON
CENTREVILLE
JACKSON
SHUQUALAK
HOUSTON
BILOXI
MEMPHIS
METAIRIE
HATTIESBURG
DALLAS 06/06/2005 13378 11/30/1992 08/28/1981 17420 10/22/2001 11/22/1999 11/22/1999 06/12/2000 05/20/2005 05/17/1999 04/06/1998 07/21/1997 10/11/2004 08/04/1980 02/14/2005 09/18/2000 07/28/2003 08/01/1994 16801 39532 38105 70002 18943 16324 15796 15423 18701 14815 09068 18824 16942 18175 14050 18142 39401 75003 04769 92354 DALLAS
PRESQUE ISLE
LOMA LINDA
TUSCALOOSA
NASHVILLE
JACKSON
JACKSON 35404 37232-2519 39216 U OF MISS MEDICAL CENTER 2500 NORTH STATE STRET
CENTRAL MS HEALTH SERVICES, INC 500 WEST COUNTY LINE
2121 TRIMBLE WAY
8410 VICKSBURG AVE
NO PRIMARY PRACTICE ADDRESS ON FILE.
BATON ROUGE RADIOLOGY GROUP, INC. 5422 DIJON DRIVE
3693 WITTENBURG CT
5995 OPUS PARKWAY SUITE 200
6005 PARK AVE \$428B
UN OF THACAMPBELL CLINIC 1211 UNION AVENUE, SUITE 510
PEABODY INTERNAL MEDICINE 9081 HWY 51 N
COUNSELING SERVICES OF EASTERN ARK 905 NORTH 7TH STREET
NO PRIMARY PRACTICE ADDRESS ON FILE.
CAMPBELL CLINIC 1211 UNION AVE-SUITE 510
9 RARTIN COURT
DEPARTMENT OF PATHOLOGY MEHARRY MEDICAL COLLEGE 1005 D.B. TODD
800LIEVARD
808 HWY 61 N
P. O. BOX 27861
1421 N. STATE 51. STE. 403
6401 POPLAR AVENUE SUITE 100
WREN & BARROW 0B-GYN PLLC PA 628 HOSPITAL DR \$2A
WEST VIRGINIA MEDICAL CENTER
EPIC 370 E SOUTH TEMPLE SUITE 260
9 NORTH ALABAMA CHILDREN'S SPECIALI 502 GOVERNOR'S DR
1095 HIGHWY 15 SOUTH
CHILDRENS HOSPITAL OF LOS ANGELES 5000 SUNSET BLVD 4TH FLOOR
CAMPBELL CLINIC, INC. 1211 UNION AVE. SUITE 510
BLDG 11 STE 4 8768 QUIARTERS LAKE RD
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1215 21ST A 39204 SACRAMENTO 07/07/2003 LUBBOCK 79424 17502 17851 01/28/2002 BATON ROUGE 70808 30034 55343 38119 11/18/2002 80124 18582 07/24/1995 DECATUR MINNETONKA 07/12/2004 16846 07/10/2000 MEMPHIS MEMPHIS 18359 12/29/2003 MILLINGTON WEST MEMPHIS 16222 02/22/1999 19032 08/01/2005 07/24/2006 MEMPHIS EASTON NASHVILLE 38104 21601 37208 18674 09/20/2004 TN MD TN BALLARD, BILLY RAY, MD

BANKSTON, CECIL NOEL, JR, MD

BANSAL, ARCHANA, MD

BARNES, ROY MAXWELL, MD

BARNET, ROSS WAYNE, MD

BARRAZA, MARK AUBREY, MD

BARRAZA, MARK AUBREY, MD

BARROW, JOHN HARLEY, JR, MD

BARNICK, EDWARD, JAMES, MD

BASS, CLAYTON ALLEN, MD

BASS, CLAYTON ALLEN, MD

BESIN, ELIZABETH MARTINA, MD

BEGBE, DLANE SCOTT, MD

BEHARRY, MEERA S, MD

BELONGIE, DUANE MARC, MD

BERGERON, WILLIAM NOAH, II, MD

DERRY, JAMES MICHAEL, MD

BETHEA, HENRY LAWRENCE, MD

BETHEA, HENRY LAWRENCE, MD

BETHEA, JOHN WALKER, JR, MD 08/15/1984 06/27/2005 06/27/2005 06/20/1951 12/14/1992 07/28/1998 07/21/2003 07/01/1992 07/01/1992 07/01/1992 07/01/1993 01/24/2000 03/13/2006 BATON POUGE BAY ST LOUIS PORT GIBSON PANAMA CITY BEACH JACKSON MEMPHIS MOUNTAIN HOME MORGANTOWN SALT LAKE CITY NASHVILLE HUNTSVILLE HUTCHINSON 70817 39520 39150 32411 10528 18964 03037 19598 09072 13385 15967 18174 13154 12816 11331 LAMS FLASH THE AWY OF ALMS CAN LAMS TO HE 39202 38119 72653 26505 84111 37211 35801 55350 16652 19252 HUTCHINSON LOS ANGELES 90027 38104 MEMPHIS BATON ROUGE NASHVILLE 19203 07477 11/19/1975 70809 37232 10/09/2000 06/23/2003 08/08/1974 07/01/1994 16964 18109 JACKSON 39216-4505 77379 SPRING LANCASTER 43130

License	Issued	Disciplin	ary Name	Address	City	State	Zip
	11/14/1994	NO	BHANDERI, KESHAVJI NATHALAL, MD	VA MEDICAL CENTER 1500.NORTH WESTWOOD BLVD	POPLAR BLUFF	МО	63901
09478	10/27/1981	NO	BHATE, BHARATI DHARMASHI, MD	IL REG CANCER CTR 10 HEALTH SERVICES DR	DEKALB	IL	60115
09482	10/30/1981	NO	BHATE, DHARMASHI VISHANJI, MD	1718 HILLCREST COURT	MENDOTA	IL.	61342
15735	02/23/1998	NO	BIERMAN, PAUL STEWART, MD	930 MADISON AVE #870	MEMPHIS	TN	38103
18215	08/25/2003	NO	BISWAS, DEBASHIS, MD	MID SOUTH PHYSICIANS GROUP 7645 WOLF RIVER CIRCLE	GERMANTOWN	TN	38138
17235	06/11/2001	NO	BLAKLEY, OLGA PAVLOVNA, MD	12223 OLD OAKS DR	HOUSTON	TX	77024
	06/11/1971	NO	BLAYLOCK, RUSSELL LANE DODD, MD	315 ROLLING MEADOWS RD	RIDGELAND	MS	39157-9490
	06/16/1965	NO	BLOUNT, JUNE GALLASPY, MD	5845 KINGS PLACE	JACKSON	MS	39211
14987	08/05/1996	NO	BLUE, KARL MICHAEL, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
17 24 6	06/18/2001	NO	BLYTHE, JAMES GRANVILLE, MD	UNIV OF MS MEDICAL CENTER DEPT, OF OB/GYN 2500 NORTH STATE ST.	JACKSON	MS	39216-4505
	06/27/2005	NO	BOLTON, WILLIAM DAVID, MO	UMC DEPT OF CARDIOTHORACIC SURGERY 2500 N STATE STREET	JACKSON	MS	39216
	06/21/1954	NO	BOOTH, JAMES EDWARD, MD	BOOTH CLINIC 108 MEADOW LANE	EUPORA	MS	39744
	07/14/2003	NO	BOULANGER, SCOTT CHARLES, MD	DEPT OF SURGERY UNIVERSITY OF MS MEDICAL CENTER 2500 N. STATE STREET	JACKSON	MS	39216-4505
	07/01/1985	NO	BOURLAND, MICHAEL DOW, MD	1745 PHOENIX BLVD, SUITE 100	ATLANTA	GA	30349
	07/14/1997	NO	BOWDEN, PHILLIP RODNEY, MD	1417 MONROE AVE	MEMPHIS	TN	38104
05912	12/04/1969	NO	BRASFIELD, DANIEL LYNTON, MD	830 S GLOSTER ST	TUPELO	MS	38801
	06/17/1964	NO	BRASWELL, GUY RAY, MD	990 AVENT DR	GRENADA	MS	38901
18703	10/11/2004	NO	BRAWLEY, JOHN GRAY, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
04320	06/22/1960	YES	BRELAND, LOREN DEWEY, JR, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
19302	05/08/2006	NO	BREWER, AMY ELIZABETH, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
18295	10/27/2003	NO	BREWER, WILLIAM WESLEY, MD	SOUTHERN RADIOLOGY 1224 TROTWOOD AVENUE	COLUMBIA	TN	38401
18864	04/11/2005	NO	BROWN, TAYLOR DEWITT, MD	MS SPORTS MEDICINE 1325 E. FORTIFICATION ST	JACKSON	MS	39202
05587	06/21/1968	NO	BRUCE, JOSEPH VIRGIL, MD	VAN BUREN MEDICAL CLINIC 1009 HWY BUS 60	VAN BUREN	MO	63965
	08/08/1978	NO	BRUMFIELD, CYNTHIA GALE, MD	DEPT OF OB-GYN, OHB 4TH FL 618 20TH ST. SOUTH OHB 452	BIRMINGHAM	AL	35233-7333
	06/07/1967	NO	BRUMFIELD, JAMES DOUGLAS, MD	155 BRIDGEWATER CROSSSING	RIDGELAND	MS	39157
	07/29/1998	NO	BRUNSON, CHARLIE ED, JR, MD	DREXEL UNIVERSITY COLLEGE OF MED 245 N 15TH MS 470	PHILADELPHIA	PA	19102
	05/06/2002	NO	BRYAN, WESLEY WELDON, MD	NEW ORLEANS UROLOGY SPECIALISTS, AP 1111 MEDICAL CENTER BLVD SUITE N	MARRERO	ĹÂ	70072
				311			
18560	06/28/2004	NO	BUADI, FRANCIS K.A., MD	BOSTON CANCER GROUP/UTCI 1331 UNION AVENUE, STE. 800	MEMPHIS	TN	38104
18361	12/29/2003	NO	BUDD, SCOTT CHARLES, MD	PEDIATRIC MEDICAL ASSOCIATES 425 UNIVERSITY AVE. SUITE 200	SACRAMENTO	CA	95825
17532	02/25/2002	NO	BUNCH, LAURA CHRISTOPHER, MD	SOUTHWEST REGIONAL CANCER CENTER 901 W. 38TH STREET	AUSTIN	TX	7B705
	05/18/1998	NO	BUNCH, ROSS EDWARD, MD	PLASTIC SURGERY INC 701 UNIVERSITY BLVD E SUITE 902	TUSCALOOSA	AL	35401
19653	02/12/2007	NO	BURCHETT, BARRY LAYNE, MD	TRI STATE OCCUPATIONAL MED. 612 6TH AVE.	HUNTINGTON	w	25701
	07/19/1983	ND	BUTERA, PHILIP JOSEPH, MD	NEPH ASSOC OF MOBILE 4682 AIRPORT BLVD.	MOBILE	AL	36608-3124
06390	06/07/1972	NO	BYNUM, GUS AMES, MD	1154 A LEXINGTON RD	GEORGETOWN	KY	40324
15357	06/23/1997	ND	CALLAHAN, KAREN ELAINE, MD	GRAYSON AND ASSOC 2200 LAKESHORE DR STE 150	BIRMINGHAM	AL	35209
19430	07/31/2006	NO	CALZADA, JDRGE I, MD	CHARLES RETINA INSTITUTE 6401 POPLAR AVE. SUITE 190	MEMPHIS	TN	38119
14804	05/20/1996	NO	CAMPBELL, AXEL FRANK, MD	4644 W GANDY BLVD SUITE 4-415	TAMPA	FL	33611-3300
19262	03/20/2006	ND	CARBAJAL, SCOTT ANDREW, MD	747 PLAZA BLVD.	COPPELL	TX	75019
06990	08/08/1974	NO	CARR, THOMAS MARTIN, JR, MD	587 S BELVEDERE BLVD	MEMPHIS	TN	38104
14382	06/13/1995	NO	CARY, GEORGE RIVES, MD	3434 PRYTANIA ST #450	NEW ORLEANS	LA	70115
10546	09/19/1984	NO	CELENTANO, RICHARD DENNIS, MD	110 LAKEVIEW LANE SUITE 200	COVINGTON	LA	70433
15569	09/08/1997	NO	CESAR, LUIS GERALDO GIOCONDO, MD	6111 W. AMARILLO BLVD.	AMARILLO	TX	79106
17626	06/03/2002	NO	CHANG, DAVIO, MD	COLUMBUS NEUROSURGERY 255 BAPTIST BLVD STE 401	COLUMBUS	MS	39705
05968	06/12/1970	NO	CHANG, LUNG HSIUNG, MD	1528 SOUTH GARFIELD AVE	ALHAMBRA	CA	91801
14143	10/03/1994	NO	CHEN, CHANG WEN, MD	CONCORD FAMILY PRACTICE 10430 LOVELL CENTER DR	KNOXVILLE	TN	37922
07205	03/06/1975	NO	CHIDESTER, LINDA FAY, MD	285 IVIE LN	MANTACHIE	MS	38855
09602	07/01/1982	NO	CHIN, DEWEY WEY, MD	4803 WARD ROAD	WHEATRIDGE	CO	80033
05595	06/21/1968	NO	CHITTOM, PARK THETFORD, MD	SELMA DOCTORS CLINIC 509 PARKMAN AVE	SELMA	AL	36701
17026	12/18/2000	NO	CHRISTENSEN, TODD WESLEY, MD	1930 VILLAGE CNTR CIR #3-385	LAS VEGAS	NV	89134
15005	08/19/1996	NO	CITRIN, BENJAMIN SOUTHER, MD	6701 AIRPORT BLVD STE C-139	MOBILE		36608
08713	08/07/1979	NO NO	CLASEN, MARK EDWARD, MD			AL	
15611	09/22/1997	NO NO		INDIAN RIPPLE FAMILY HEALTH CENTER 4428 INDIAN RIPPLE RD.	BEAVERCREEK	OH	45440
12099	07/01/1989	NO NO	CLAUSSEN, HERMANN PETER VALENTINE, III,	METHODIST MED CNTR OAK RIDGE DEPT RADIOLOGY 990 OAK RIDGE TURNPIKE	OAK RIDGE	TN	37830
16905			CLEMENT, JAMES ANDREW, JR . MD	MARSHALL MEDICAL CENTER SOUTH 2505 HWY 431 N	BOAZ	AL	35957
0900	08/14/2000	NO	CLEMENT, KEVIN BRYAN, MD	ST. VINCENT'S HOSPITAL ER 810 ST. VINCENT'S DRIVE	BIRMINGHAM	AL	35205

License	Issued	Disciplinary	/ Name	Address	City	State	Zip
15190	01/27/1997	NO	COHEN, GERALD, MD	3525 PRYTANIA ST STE 320	NEW ORLEANS	LA	70115
06393	06/07/1972	NO	COHEN, THOMAS LEONARD, MD	ST MARYS MEDICAL CENTER OF CAMPBELL RADIOLOGY DEPT EAST CENTRAL AVENUE	LAFOLLETTE	TN	37766
18936	06/13/2005	NO	COHN, ROSS ALLEN, MD	UNIVERSITY OF MS MEDICAL CENTER 2500 N STATE ST DIVISION OF UROLOGY	JACKSON	MS	39216
14638	11/14/1995	NO	COLE, JOSEPH CHARLES, III, MD	7855 HOWELL BLVD	BATON ROUGE	LA	70807
12767	04/01/1991	NO	COLEMAN, CHARLES CALVIN, MD	NEW ORLEANS ADOLESCENT HOSPITAL 210 STATE STREET	NEW ORLEANS	LA	70118
07893	05/20/1977	NO	COLEMAN, WILLIAM PATRICK, III, MD	4425 CONLIN ST	METAIRIE	LA	70006
17004	11/27/2000	NO	COLIER, HOWARD J, MD	2277 PEACHTREE RD N E UNIT 607	ATLANTA	GA	30309-1165
14239	01/23/1995	NO	COLLIER, ROBERT CRAIG, MD	EYE CARE CENTER 1100 N JACKSON ST	TULLAHOMA	TN	37388
18970	06/27/2005	NO	COLLINS, BETH ANN, MD	UMC DEPT, OF PLASTIC SURGERY 2500 N. STATE STREET	JACKSON	MS	39216
05252	06/15/1966	NO	COLLINS, WILLIAM LYNN, MD	743 FINN HALL RD	PORT ANGELES	WA	98362
07292	08/04/1975	NO	CONNORS, JOHN JOSEPH, III, MD	BAPTIST HOSPITAL OF MIAMI 8900 N KENDALL AVE	MIAMI	FL	33176
10873	08/26/1985	NO	COOK, WILLIAM K. MD	175 CENTRAL CALDWOOD DR	BEAUMONT	TX	77707-1915
16420	07/19/1999	NO	CORKERN, MARY SCHLICHER, MD	HATTIESBURG CLINIC 415 S 28TH AVE	HATTIESBURG	MS	39401
06177	06/11/1971	NO	CORLEY, FRED GOODWIN, JR, MD	DEPT OF ORTHOPEDICS 7703 FLOYD CURL DR	SAN ANTONIO	TX	78229
05775	06/11/1969	NO	COTHREN, JACKSON DANIEL, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.	CALL PATE ON IO	.,,	70223
11179	08/20/1986	NO	COX. DIETHRA DIANE, MD	METRO HEALTH CLEMENT CTR 2500 E 79TH ST	CLEVELAND	DH	44104
08718	08/07/1979	NO	COX, HARRELL EDWARD, MD	VALLEY RADIOLOGY PA 512 HARLEY ST	SCOTTSBORO	AL	35768
18217	08/25/2003	NO	COX, RALPH FREDERICK, JR., MD	7200 NORTH STATE HIGHWAY 161 #300	IRVING	Τ̈́X	75039
19601	12/18/2006	NO	CRENSHAW, WILLIAM DAVID, MD	UNIVERSITY OF TN DEPT, OF ORTHOPAEDICS	MEMPHIS	TN	38104
05776	06/11/1969	NO	CRITZ, FRANCES ANN, MD	EMORY CRAWFORD LONG HOSPITAL 550 PEACHTREE ST, NE - 3RD FLR	ATLANTA	GA	30308
80119	05/01/1994	NO	CROFT, DARRELL G., DPM	2161 S LAMAR	OXFORD	MS	38655
13143	06/16/1992	NO	CROOK, ROBERT ALAN, DO	2339 MCCALLIE AVE PLAZA II STE 407	CHATTANOOGA	TN	37404
11023	07/01/1986	NO NO					
11350	07/01/1987	NO NO	CROSBY, ROBERT LEE, III, MD	15770 PAUL VEGA M.D. DRIVE #206	HAMMOND	LA MD	70403
19412			CROUCH, GARY DON, MD	USUHS 4301 JONES BRIDGE RD,	BETHESDA		20814
18763	07/24/2006 12/13/2004	NO	CUCCIA, DAVID JOSEPH. MD	SINGING RIVER HOSPITAL 2809 DENNY AVE.	PASCAGOULA	MS	39581
		NO	CUMMINGS, JUDD EDWARD, MD	1211 UNION AVE. SUITE 510	MEMPHIS	TN	38104
07293	08/04/1975	NO	CURRIE, RANDALL BYRON, MD	521 PARK HILL DRIVE	FREDERICKSBURG	VA	22401
05256	06/15/1966	NO	DABNEY, JAMES CONWAY, MD	3512 S LAMAR	OXFORD	MS	38655
07785	10/25/1976	NO	DAESCHNER, CHARLES WILLIAM, III, MD	PITT COUNTY MEMORIAL HOSPITAL 288 WEST	GREENVILLE	NC	27858
10602	01/03/1985	NO	DAHL, ERIC PAUL, DO	NORTH MS REGIONAL CENTER 967 REGIONAL CENTER DR	OXFORD	MS	38655
11102	07/01/1986	NO	DAUGHERTY, DAVID LEE, MD	COASTAL ORTHOPAEDICS & SPORTS MEDICAL GROUP 3998 VISTA WAY, SUITE B	OCEANSIDE	CA	92056
18418	02/09/2004	NO	DAVIS, DERECK BERNARD, MD	451 RUIN CREEK RD. SUITE 101	HENDERSON	NC	27536
19171	01/09/2006	NO	DAVIS, MICHAEL TURONE, MD	CAMPBELL CLINIC 1211 UNION AVE. SUITE 510	MEMPHIS	TN	38104
06714	08/09/1973	NO	DAVIS. RICHARD JOHN, MD	4913 TYNE VALLEY BLVD	NASHVILLE	TN	37220
15023	08/26/1996	NO	DAVIS, SHANNON PEYTON, MD	ENT-HEAD & NECK SURGERY OF HUNTSVILLE P.C. 201 WHITESPORT DRIVE	HUNTSVILLE	AL	35801
11027	07/01/1986	NO	DEAL, ROY W, MD	421 DELMAS AVE.	PASCAGOULA	MS	39567
09958	07/01/1983	NO	DEAN, PHILIP COLEMAN, MD	4951 GRANDE DRIVE	PENSACOLA	FL	32504
11120	07/01/1986	NO	DES CHAMPS, GEORGE T, JR, MD	GEORGETOWN MEMORIAL HOSP 606 BLACK RIVER RD	GEORGETOWN	SC	29440
17802	09/30/2002	NO	DIAMOND, ANGELA, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
18691	10/04/2004	NO	DIAZ, JOSEPH JAMES, MD	WILLIAMS MEDICAL CLINIC 538 J M ASH DR	HOLLY SPRINGS	MS	38635
12735	02/04/1991	NO	DIGAETANO, DOLORES MARIA, MD	8110 CORDOVA RD SUITE 127	CORDOVA	TN	38016
10586	11/30/1984	NO	DOCKERY, MELISSA HARVEY, MD	#1 MEDICAL PARK DR EMERGENCY DEPT	BENTON	AR	72015
12263	07/31/1989	NO	DODSON, MARK KANE, MD	1950 CIRCLE OF HOPE, SUITE 6700	SALT LAKE CITY	UT	84112
18643	08/16/2004	NO	DOGGETT, STEPHEN WILLIAM, MD	STEPHEN W. DOGGETT, MD UNIVERSITY MISSISSIPPI DEPARTMENT OF RADIATION ONCOLOGY	JACKSON	MS	39216
18971	06/27/2005	NO	DOLD, ANDREW BENJAMIN. DO	UMC 2500 N STATE STREET DIVISION OF INFECTIOUS DISEASES	JACKSON	MS	39216
19243	03/06/2006	NO	DOLD, SYLVIA TORRES, DO	UNIVERSITY OF MS MEDICAL CENTER 2500 NORTH STATE STREET DEPT OF MED/DIV OF RHEUMATOLOGY	JACKSON	MS	39216
80180	06/07/2004	NO	DONOHUE, CARY TRENT, DPM	831 DUBLIN ST.	NEW ORLEANS	LA	70118
12674	10/01/1990	NO	DORMAN, NANCY J. MD	1040 ROVER OAKS BLVD, SUITE 102	JACKSON	MS	39232
12942	08/05/1991	NO	DORSEY, LESLIE Y, MD	6649 LAKE DR	MORROW	GA	30260
11713	07/01/1988	NO	DRAUGHN, DAVID GARDNER, MD	2555 COURT DRIVE GASTON PROF. CENTER SUITE 440	GASTONIA	NC	28054
11543	08/11/1987	NO	DROFFNER, MARK CHARLES, DO	260 MILUS AVE	PUNTA GORDA	FL	33950
18947	06/20/2005	NO	DUCHESNE, JUAN C. MD	UMC DEPARTMENT OF SURGERY 2500 NORTH STATE ST	JACKSON	MS	39216
07647	08/09/1976	NO	DUMONT, ARTHUR, III, MD	273 AZALEA RD STE 2-102	MOBILE	AL	36609
3.4.7			, / WITTON ; III, IIID		OHLL	~~	30003

License	Issued	Disciplin	ary Name	Address	City	State	Zip
03727	06/27/1956	NO	DUNN, RALPH EDWIN, MD	184 SPOTTED ACRES LANE	MADISON	MS	39110
13069	02/10/1992	NO	DUNSFORD, HAROLD ATKINSON, MD	154 ARGYLE GATE LOOP RD	DUNDEE	FL	33838
10269	07/01/1984	NO	EAKES, DAVID LAMAR, MD	PEDIATRIC CONSULTANTS INC 100 TECH CENTER DR	KNOXVILLE	TN	37912
04925	12/02/1963	NO	EATON, JAMES SAMUEL, JR. MD	4214 50TH ST NW	WASHINGTON	DC	20016
16686	02/28/2000	NO	EDELENBOS, ERIC JOHN, DO	NORTH FLORIDA OB/GYN ASSOCIATES 1680 EAGLE HARBOR PARKWAY, SUITE A	ORANGE PARK	FL	32003
13090	03/16/1992	NO	EOWARDS, EUSTACE LOUIS, MD	WILLIS KNIGHTON PIERREMONT 8001 YOUREE DR	SHREVEPORT	LA	71115
80112	10/01/1992	NO	EDWARDS, VERSHEEN DPM	FOOT AND SURGERY CLINIC 5903 RIDGEWOOD RD STE 200	JACKSON	MS	39206
15297	05/12/1997	NO	EHNOW, COLETTE K, MD	NAVAL MEDICAL CENTER SANDIEGO DEPT OF OPHTHALMOLOGY 34800 BOB WILSON DR	SAN DIEGO	CA	92138
12911	07/02/1991	NO	EIFERT, BRIAN EDWARD, MD	CENTRAL WASHINGTON HOSPITAL 1201 SOUTH MILLER STREET	WENATCHEE	WA	98807
14985	08/05/1996	NO	EKWEANI, OBIORA MADUKA, MD	3550 PARKWOOD BOULEVARD SUITE A-205	FRISCO	TX	75034
19270	03/27/2006	NO	ELKHALILI, ABDELNASER, MD	1693 SOUTH COLORADO STREET	GREENVILLE	MS	38703
05430	06/07/1967	NO	ELLIOTT, MARY C, MD	17050 MEDICAL CENTER DR STE 400	BATON ROUGE	LA	70815
04504	06/21/1961	NO	ELLIOTT, ROBERT LANGE, JR., MD	17050 MEDICAL CENTER DR FOURTH FLOOR	BATON ROUGE	LA	70816
07877	05/01/1977	NO	ELLIOTT, RODNEY GORMAN, MD	995 S. YATES STE. 1	MEMPHIS	TN	38119
13466	06/08/1993	NO	ENTMAN, HOWARD MD	6037 SHADY GROVE RD 6037 SHADY GROVE RD	MEMPHIS	TN	38120
13630	08/03/1993	NO	EPPEL, STEPHEN MARK, MD	995 S YATES STE. 1	MEMPHIS	TN	38119
80120	05/01/1994	NO	ERALI. RICHARD PEARL, DPM	2161 S LAMAR	OXFORD	MS	38655
12634	07/31/1990	NO	ESCALONA, DANIEL MAYPA, MD	102 COULEE SHORE DR	LAFAYETTE	LA	70503
09353	05/14/1981	YES	ETTINGER, MARVIN MORRIS, MD	NONE-RETIRED 2724 LAURA LANE	LAKE CHARLES	Ã	70605
09105	08/04/1980	NO	EYRICH, GEORGE ALLAN, MD	1700 SPRINGHILL AVE	MOBILE	ĀĹ	36604
16560	09/20/1999	NO	FALER, LANCE CHRISTOPHER, MD	HATTIESBURG RADIOLOGY GROUP, PLLC 5000 WEST 4TH ST	HATTIESBURG	MS	39402
07492	12/22/1975	NO	FALVEY, WILLIAM DAVIS, MD	624 S WILLETT ST	MEMPHIS	TN	38104
16378	06/21/1999	NO	FERGUSON, THOMAS CHARLES, MD	RALEIGH/CORDOVA MEDICAL GROUP 3809 COVINGTON PIKE	MEMPHIS	TN	38135
19201	01/30/2006	NO	FERNANDEZ, MARTHA ELIZABETH, MD	810 NEW BALLWIN RD.	BALLWIN	MO	63021
14608	10/02/1995	NO	FERRUGIA, TIMOTHY ALAN, MD	CENTRAL SURGICAL ASSOCIATES 1189 N STATE ST STE 502	JACKSON	MS	39202
14780	04/22/1996	NO	FIELD, MARK HOLLOWAY, MD	8080 BLUEBONNET BLVD. SUITE 1000	BATON ROUGE	LA	70810
17091	02/12/2001	NO	FIELDS, KENNETH I., MD	GASTROINTESTINAL SPECIALISTS 930 MADISON #870	MEMPHIS	TN	38103
08483	09/19/1978	NO	FINN, MICHAEL CHARLES, MD	302 MARIGNY	MANDEVILLE	iA	70448
10985	05/13/1986	NO	FLANAGAN, KAREN ANN, DO	BREWTON MEDICAL CENTER 1121 BELLEVILLE AVE	BREWTON	AL.	36426
18745	11/22/2004	NO NO	FLETCHER, DANIEL TRUMAN, MD	CAMPBELL CLINIC, INC. 1211 UNION SUITE 510	MEMPHIS	TN	38104
16538	08/30/1999	NO	FLETCHER, LESLIE REID, JR., MD	PHYSICIANS ANESTHESIA GROUP PA 971 LAKELAND DR STE, 202	JACKSON	MS	39216
10767	07/01/1985	NO	FLOWERS, SETHELLE LUCAS, MD	299 HWY 51 STEF1	RIDGELAND	MS MS	39157
14154	10/10/1994	NO	FLYNN, TIMOTHY CORCORAN, MD	200 WELLESLEY TRADE LANE	CARY	NC NC	27519
10201	03/30/1984	NO	FOUNTAIN, FRANCIS FREMONT, MD	FF FOUNTAIN JR 5360 SYCAMORE GROVE LANE	MEMPHIS	TN	38120
12924	07/15/1991	ND	FOX, ROY CECIL, MD	5050 POPLAR AVE., SUITE 800	MEMPHIS	TN	38157
08732	08/07/1979	NO	FRAZIER, STEPHEN DALE, MD	CEDAR VALLEY MEDICAL SPECIALISTS 999 HOME PLAZA	WATERLOO	IA	50701
02513	06/19/1946	NO	FREDERIC, GERARD JOSEPH, MD		WATERLOO	IA	30/01
07393	08/25/1975			NO PRIMARY PRACTICE ADDRESS ON FILE.	51.005.405		0.500.0
18576	06/30/2004	NO ND	FREEMAN, GERALD RICHARD, MD	208 ANA DR	FLORENCE	AL	35630
19274	04/03/2006	NO NO	FREEMYER, VINCENT CHADWICK, DO	UNIVERSITY OF MS MEDICAL CENTER DEPARTMENT OF EM 2500 N STATE ST	JACKSON	MS	39216
09113	08/04/1980		FRITTS, TERESA LENETTE, MD	FAMILY MEDICAL CLINIC 3451 GOODMAN RD., SUITE 115	SOUTHAVEN	MS	38672
17120		NO NO	FURR, PHILIP MARVIN, MD	920 MADISON STE 605	MEMPHIS	TN	38103
	03/12/2001	NO	GALVAN, PETER RANDALL, MD	PETER GALVAN, M.D. 550 BROWNSWITCH RD.	SLIDELL	LA	70458
16031	08/17/1998	NO	GANARAJ, SWATHI POSAVANIKE, MD	DALLAS KIDNEY SPECIALISTS 5939 HARRY HINES BLVD	DALLAS	TX	75235
13015	11/04/1991	NO	GARAMI, GEORGE THDMAS, MD	NO PRIMARY PRACTICE ADDRESS ON FILE,			
11252	12/08/1986	ND	GASKIN, CHARLES DEMETRIS, MD	815 S WASHINGTON AVE STE #203	MARSHALL	TX	75670
05708	06/21/1968	NO	GATES, WILLIAM CAREY, JR, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
14900	07/08/1996	NO	GEATER, BARBARA ELLA, MD	2245 SOUTH LAUDERDALE	MEMPHIS	TN	38106
16883	07/31/2000	NO	GHELMEZ, FLORIN, MD	MOBILE MENTAL HEALTH CENTER 5750-A SOUTHLAND DRIVE	MOBILE	AL	36693
03468	06/21/1954	NO	GILL, PATRICK HENRY, JR, MD	527 MUNICIPAL AIRPORT RD.	MACON	MS	39341-007
14153	10/10/1994	NO	GITTER, KURT A, MD	3525 PRYTANIA ST #320	NEW ORLEANS	LA	70115
10085	07/13/1963	NO	GLEASON, CATHERINE ELIZABETH, MD	3131 PRINCETON PIKE BLDG. 6, STE. 106	LAWRENCEVILLE	NJ	08648
80091	10/01/1988	NO	GODFRYD, THOMAS S, DPM	2012 8TH COURT SOUTH	BIRMINGHAM	AL	35205
13111	04/28/1992	NO	GOTTNER, MICHAEL JOHN, MD	1508 2ND ST, N.E.	AUBURN	WA	98002

License	Issued	Disciplin	ary Name	Address	City	State	Zip
17180	05/07/2001	NO	GOULDEN, DUDLEY DECATUR, III, MD	DUDLEY D. GOULDEN III, M. D. UNIVERSTIY OF TEXAS HEALTH CENTER 11937 HWY 271	TYLER	TX	75708
05988	06/12/1970	NO	GRAHAM, JOHN ARTHUR, MD	120 SW 75TH TERRACE	GAINESVILLE	FL	32607-1557
17542	02/25/2002	NO	GRAVERSEN, JENS FRANCIS, MD	NORTH OAKS UROLOGY 15770 PAUL VEGA MD DR SUITE 200	HAMMOND	LA	70403
05271	06/15/1966	NO	GREER, THOMAS HASTINGS, JR, MD	2113 11TH ST - 2ND FLOOR	MERIDIAN	MŞ	39301
19156	12/12/2005	NO	GRENZ, SUSAN KATHRYN, MD	1964-B BAYSHORE BLVD.	DUNEDIN	FL	34698
08348	08/08/1978	NO	GRIFFIN, MARY PAMELA, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
17361	08/27/2001	NO	GROGLIO, GREGORY LOUIS, MD	1051 GAUSE BLVD STE 370	SLIDELL	LA	70458
15887	06/22/1998	NO	GROSS, LAWRENCE BAKER, MD	METHODIST HOSPITAL NORTH EMERGENCY DEPT 3960 COVINGTON PL	MEMPHIS	TN	38128
18043	05/05/2003	NO	GROVER, WILLIAM HOWELL, MD	MEMORIAL HOSPITAL OF GULFPORT 4500 13TH STREET	GULFPORT	MS	39501
08349	08/08/1978	NO	GRUICH, CHARLES JOSEPH, MD	2356 PASS RD STE 100	BILOXI	MS	39531
02391	09/04/1945	NO	GRUICH, FRANK GEORGE, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
03199	06/25/1952	NO	GUNN, CLYDE HUBERT, JR, MD	4225 ROBINSON AVE	MOSS POINT	MS	39563
19443	08/07/2006	NO	GUYER, AARON JOHN, MD	CAMPBELL CLINIC 1211 UNION AVE. SUITE 510	MEMPHIS	TN	38104
18553	06/21/2004	NO	HACKEL, JOSEPH GILMAN, MD	AMERIPATH 5.01 (A) CORPORATION 895 SW 30TH AVE. SUITE 101	POMPANO BEACH	FL	33069
19444	08/07/2006	NO	HAERIAN-ARDAKANI, HALEH MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
07757	09/07/1976	NO	HAGOOD, CLYDE OTIS, JR, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
18206	08/18/2003	NO	HAI, HAMID ABDUL, MD	1417 9TH ST. \$ SUITE 203	GREAT FALLS	MT	59405
12754	03/04/1991	NO	HALL, GREGORY SHAUN, MD	UNIV OF AR DEPT OF EMERGERCY MED 4301 W MARKHAM MAIL SLOT 584	LITTLE ROCK	AR	72205-7199
14146	10/03/1994	NO	HAMMOND, ISAAC WILLIAM, MD	1250 SOUTH COLLEGEVILLE ROAD	COLLEGEVILLE	PA	19426
17993	03/10/2003	NO	HANNEGAN, JASON AARON, MD	INPATIENT PHYSICIAN SERVICES SINGING RIVER HOSPITAL 2809 DENNY AVENUE	PASCAGOULA	MS	39581
17562	04/01/2002	NO	HAQUE, RIAZ UL, MD	4041 WILLIAMS BLVD. SUITE 4A	KENNER	LA	70065
11362	07/01/1987	NO	HARRIS, GEORGE CURTIS, JR., MD	VA OUTPATIENT CLINIC 200 MADISON AVE STE 2 E	ELMIRA	NY	14901
05219	12/16/1965	NO	HARRIS, JOHN JOEL, MD	6263 POPLAR AVE STE 535	MEMPHIS	TN	38119
13528	07/01/1993	NO	HARVEY, RICHARD LYNN, MD	MACON CARIDOVASCULAR INSTITUTE 575 FIRST STREET	MACON	GA	31201
16033	08/24/1998	NO	HATTEN, HOMER PAUL, JR, MD	INDIAN RIVER RADIOLOGY 1485 37TH ST STE 107	VERO BEACH	FL	32960
13806	05/09/1994	NO	HAYDEN, CHARLES ROSS, MD	ASBURY CHILD AND FAMILY COUNSELING 138 GILLESPIE ROAD	MADISON	AL	35758
10282	07/01/1984	NO	HAYMAN, KENNETH H, JR, MD	PARKRIDGE EAST 941 SPRING CREEK RD	CHATTNAOOGA	TN	37343
14189	11/22/1994	NO	HAYNES-LAING, ARLEEN GRACE, MD	PENNSYLVANIA HOSPITAL CHOP NEWBORN CARE AT PENNSYLVANIA H 800 SPRUCE ST.	PHILADELPHIA	PA	19107
18111	06/23/2003	NO	HERLEVI. RICHARD CLEAD, DO	UTAH VALLEY REGIONAL MEDICAL CENTER 1034 NORTH 500 WEST	PROVO	UT	84604
11162	08/06/1986	NO	HINTON, ARBIE BURTON, MD	CLAIBORNE COUNTY HOSPITAL 123 MCCOMB AVE	PORT GIBSON	MS	39150
15787	03/30/1998	NO	HOEHNER, PAUL JAMES, MD	120 FONTANA COURT	CHARLOTTESVILLE	VA	22911
04521	06/21/1961	NO	HOPKINS, LLOYD GERALD, MD	2200 S LAMAR ST STE B	OXFORD	MS	38655
16806	06/12/2000	NO	HORNSBY-ODOI, SUZETTE ANNE, MD	MEDWEST FAMILY PRACTICE 104 FREY STREET SUITE 100	ASHLAND CITY	TN	37015
19065	09/12/2005	NO	HU. ERIC CHAOKO, MD	UMC 2500 N. STATE STREET	JACKSON	MS	39216
13257	07/01/1992	NO	HUGHES, STEPHEN LEE, MD	DEPT OF ANESTHESIA FLOWERS HOSPITAL HIGHWAY 84 W	DOTHAN	AL	36301
04992	06/17/1964	NO	HULL, CLARENCE GALLOWAY, III, MD	1952 NOTTINGHAM PLACE	TUSCALOOSA	AL	35406
13834	05/24/1994	NO	HULL, JOHN EVERETT, MD	ARTHRITIS AND DIABETES CLINIC 3402 MAGNOLIA COVE	MONROE	LA	71203
13709	11/15/1993	NO	HUNTER, DARRYL COVINGTON, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.	MONTOL		, , , ,
11116	06/30/1986	NO	HUTCHENS, WAYNE GOODE, MD	2151 FOUNTAIN DR. SUITE 101	SNELLVILLE	GA	30078
14197	12/05/1994	NO	HUTCHENS, ZACHARY MCVEY, MD	150 EAST SWAN STREET	CENTERVILLE	TN	37033
18244	09/15/2003	NO	INAMDAR. SYEDA RUBINA, MD	U M C 768 LAKELAND DR	JACKSON	MS	39216
16230	03/01/1999	NO	ISAZA-ROJAS. JORGE E. MD	8080 BLUEBONNET BLVD SUITE 1000	BATON ROUGE	LA	70810
18221	08/25/2003	NO NO	ISLAM, SALEEM, MD	UNIVERSITY OF MS MED CTR 2500 NORTH STATE STREET DEPT OF SURGERY	JACKSON	MS	39216
18234	09/08/2003	NO	ISLAM, SHEHLA PESHIMAM, MD	DIVISION OF INFECTIOUS DISEASE U MC 2500 N STATE ST	JACKSON	MS	39216
15758	03/09/1998	NO NO	JALFON, ISAAC MITRANI, MD	930 MADISON AVE #870	MEMPHIS	TN	38103
06423	06/07/1972	NO NO	JERNBERG, WILLIAM CURTIS, MD	BAYLOR MEDICAL CENTER @ GARLAND 2300 MARIE CURIE	GARLAND	TX	75042
09887	04/14/1983	NO NO	JETT, PAMELA LOUISE, MD	MISSISSIPPI BLOOD SERVICES 1995 LAKELAND DR	JACKSON	MS	39216-5095
18467	03/22/2004	NO NO	JOHNSON, ALISA BARR, MD	UMMC 2500 NORTH STATE STREET	JACKSON	MS	39216
11990	01/17/1989	NO NO	JOHNSON, ALISA BARR, MD JOHNSON, BRIAN ALAN, MD	613 E TERRACE DR	WINAMAC	IN	46996-0277
09907	05/20/1983	NO NO	JOHNSON, BRIAN AZAN, MD JOHNSON, CHARLES PATRICK, DO	1751 GUNBARREL RD STE 101	CHATTANOOGA	TN	37421
08570	02/01/1979	NO NO	JOHNSON, CHARLES PATRICK, DO JOHNSON, MICHAEL REESE, MD	1134 WINTER STREET	JACKSON	MS	39204
17735	07/29/2002	NO NO	JOHNSON, MICHAEL REESE, MD JOHNSON, SHAWN RENEE', MD	OLIVE BRANCH FAMILY MEDICAL CENTER 9075 SANDRIDGE CENTER CV	OLIVE BRANCH	MS MS	38654
80074	03/01/1985	NO NO	JOHNSON, SHAWN RENEE, MD JOINTER, GLOSSIE M. DPM	NO PRIMARY PRACTICE ADDRESS ON FILE.	OLIVE BROWNER	IVIO	30004
00074	03/01/13/03	NO	JUNIER, OLOGGIEM, DPM	NO FRIMARI FINOLICE ADDRESS ON FILE.			

icense	Issued	Disciplinary	Name	Address	City	State	Zip
9304	05/08/2006	NO	JOSHI, RAVI VIVEKANAND, MD	145 TECHNOLOGY PKWY, N.W.	NORCROSS	GA	30090
4110	09/12/1994	NO	JOUDEH, MAAN, MD	401 GETWELL DRIVE	SENATOBIA	MS	38668
6476	08/09/1999	NO	KARABIN, JERRY MYRON, MD	BAY OBSTETRICS & GYNECOLOGY, L L C 835 THAMES AVE	BAY ST LOUIS	MS	39520
6129	11/09/1998	NO	KASARLA, AMARENDAR REDDY, MD	ANESTHESIOLOGY & PAIN CONSULTANTS LOUISIANA PAIN MGT 4212 W CONGRESS ST. STE 3200	LAFAYETTE	LA	70506
8550	01/19/1979	NO	KEDDY, DAVID BISSETT, MD	ATMORE COMMUNITY HOSPITAL 401 MEDICAL PARK DRIVE	ATMORE	AL	36502-300
6649	06/15/1973	NO	KELLETT, BOYD ALEXANDER, MD	417 SW 134 TERRACE	NEWBERRY	FL	32669
1739	07/01/1988	NO	KELLUM, JOSEPH LESLIE, JR, MD	1 IMPERIAL WOODS DRIVE	HARAHAN	iĀ	70123
7159	04/16/2001	NO	KELLY, KATHLEEN ANN, MD	BAPTIST CENTER FOR CANCER CARE 50 HUMPHREYS CTR STE 100	MEMPHIS	TN	38120
7399	10/08/2001	NO	KERRIGAN, BRIAN RICHARD, DO	FAMILY MEDICAL ASSOC 701 S HOLLY AVE	COLLINS	MS	39428
0053	07/01/1983	NO	KERUT, EDMUND KENNETH, MD	HEART CLINIC OF LOUISIANA 1111 MEDICAL CENTER BLVD, STE N613	MARRERO	LA	70072
2265	08/01/1989	NO	KEZIRIAN, GUY MICHAEL, MD	28071 NORTH 90TH WAY	SCOTTSDALE	AZ	85262
5728	02/09/1998	NO	KHAN, MASOOD HAMID, MD	6725 CEDAR RIDGE DR SUITE#1	ZEPHYRHILLS	FL	33542
9638	01/29/2007	NO	KHAN, NAJMA, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.	LET THI WHEEG		33342
5304	05/19/1997	NO	KHAN, SHAHZAD AHMED, MD	KAISER PERMAMENTE OTAY MESA 4660 PALM AVENUE	SAN DIEGO	CA	92154
8800	07/14/1983	NO	KHANDERKAR, SOFIA HAQUE, MD	GRACELAND INTERNAL MEDICINE GROUP SUITE 405 1264 WESLEY DR.	MEMPHIS	TN	38116
8722	10/25/2004	NO	KHAWARI, ABBAS ALI, MD	DELTA HEALTH CENTER INC. 702 MARTIN LUTHER KING RD.	MOUND BAYOU	MS	38762
2590	07/05/1990	NO	KILLORIN, EDWARD WYLLY, JR, MD	755 MT VERNON HWY STE 200	ATLANTA	GA	30328
8800	01/24/2005	NO	KIM, EUGENE JOHN, MD	12 ORCHARD ROAD	HAVERTOWN	PA	19083
3482	06/07/1993	NO	KING, LOUIS DOUGLASS, MD	WESTERN MENTAL HEALTH INSTITUTE 11100 OLD HIGHWAY 64	BOLIVAR	TN	38008
7652	06/10/2002	NO	KLAUSER, CHAD KENDALL, MD	DEPT OF OB-GYN UMMC 2500 N STATE ST	JACKSON	MS	39216
6001	08/03/1998	NO	KOELLIKER, DIANA ESPOSITO, MD	S J R M C 801 W. MAPLE ST	FARMINGTON	NM	87401
5440	07/28/1997	NO	KOELLIKER, PAUL DAVID, MD	SJRMC 801 W MAPLE ST	FARMINGTON	NM	87401
5564	09/08/1997	NO	KORRI, KARL KAUNO, MD	BAPTIST MEDICAL CENTER EMERGENCY DEPT 1225 N STATE ST	JACKSON	MS	39202-200
5483	08/11/1997	NO	KREMP, RICHARD EDWARD, MD	ARKANSAS RADIOLOGY AFFILIATES 106 SADDLEBROOK CT	HOT SPRINGS	AR	71901
6116	11/02/1998	NO	KRENTEL, ROD GEOFFREY, MD	SPRINGHILL CANCER CENTER 3719 DAUPHIN ST STE 100	MOBILE	AL	36608
6929	06/20/1974	NO	KRIEGER, CHARLES WILLIAM, JR. MD	1850 GAUSE BLVD E STE 302	SLIDELL	ĹĂ	70461
5402	07/14/1997	NO	KUGLER, JOSHUA NEIL, MD	SOUTH NASSAU HOSPITAL 1 HEALTHY WAY	OCEANSIDE	NŶ	11572
7783	10/15/1976	NO	KULIK, FRANK A. MD	12022 N 104TH WAY	SCOTTSDALE	AZ	85259-293
7923	01/06/2003	NO	LAGARDE, DOUGLAS CHARLES, MD	11 VANDERBILT PLACE DRIVE	ASHEVILLE	NC	28803
0547	09/19/1984	NO	LAGARDE, MARIE CELESTE, MD	110 LAKEVIEW LANE SUITE 200	COVINGTON	LA	70433
8951	06/20/2005	NO	LAGOS, JAIME ANDRES, MD	UMC DEPT OF ALLERGY AND IMMUNOLOGY 2500 N STATE ST	JACKSON	MS	39216
1567	09/14/1987	NO	LANDY, STEPHEN HALL, MD	WESLEY NEUROLOGY CLINIC 8000 CENTERVIEW PARKWAY SUITE 101	MEMPHIS	TN	38018
8967	03/11/1980	NO	LANGSTON, JAMES WRIGHT, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.	MEMPHIS	LIN	30010
6243	03/08/1999	NO	LASALLE, CHRISTOPHER WILLIAM, MD	5050 N. CLINTON ST.	FT. WAYNE	iN	46825
3814	05/16/1994	NO	LASALLE, MIGUEL ANGEL, MD	CPR PROFESSIONAL BLDG 55E DE DIEGO ST, STE 105 MAYAGUEZ, PUERTO RICO 00680	MAYAGUEZ	PA	00680
5286	06/15/1966	NO	LAWRENCE, DAVID RAYMOND, MD	105 B MCMILLAN RD	WEST MONROE	LA	71291
0592	12/17/1984	NO	LE, CUONG VAN, MD	8450 LA HIGHWAY 1 , SUITE B	INNIS	LÁ	70747
3458	05/25/1993	NO	LEBLANC, CHERRYLL ANN, MD	ST MARYS HOSPITAL 3600 GRATES BLVD	PORT ARTHUR	TX	77642
3608	06/27/1955	NO	LEE, CHARLES DAVID, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.	, SKI AKTION	10	. 1042
7478	01/07/2002	NO	LEE, JOHN H. MD	FAIRFAX RADIOLOGICAL CONSULTANTS 2722 MERRILLEE DRIVE SUITE 230	FAIRFAX	VA	22031
8065	05/19/2003	NO	LEE, PING NGA ALLAN, MD	106 WALKER STREET	HOULKA	MS	38850
6347	12/02/1971	NO	LEE, ROBERT CARNELL, MD	MORRISTOWN IMAGING CONSULTANTS PC 908 WEST FOURTH NORTH STREET	MORRISTOWN	TN	37814
4723	02/26/1996	NO	LEFF, RICHARD A. MD	106 NOVARRA COURT	EL DORADO HILLS	CA	95762
8811	01/31/2005	NO	LEVINE, JASON WILLIAM, MD	MS SPORTS MEDICINE & ORTHOPAEDIC CN 1325 E. FORTIFICATION ST	JACKSON	MS	39202
5619	09/29/1997	NO	LEVITCH, MELVYN ABRAHAM, MD	3960 KNIGHT ARNOLD RD STE 301	MEMPHIS	MS TN	38118
2220	07/01/1989	NO	LEWIS, LARRY GLEN, MD	CHILDRENS CENTER FOR DIGESTIVE HEALTH CARE 993-D JOHNSON FERRY RD NE STE 440	ATLANTA	GA	30342
4476	07/17/1995	NO	LEWIS, RONALD M, JR, MD	LAKE CHARLES MED & SURGICAL CLIN 501 S RYAN ST	LAKE CHARLES	LA	70601
1989	01/17/1989	NO	LEWIS, TERRY ALAN, MD	ZIA OB/GYN LTD 2451 S AVE A STE 8	YUMA	AZ	85364
2614	07/23/1990	NO	LILJEBERG, ROBERT L, MD	2165 MEDICAL PARK DR.	HICKORY	NC NC	28602
4295	03/27/1995	NO	LINDSEY, KEVIN KENNETH, MD	LOYOLA UNIVERSITY STUDENT HEALTH SERVICES 6363 ST CHARLES AVE	NEW ORLEANS	LA	70118
8693	10/04/2004	NO	LINDSEY, LINDA MD	515WILLOWBROOK RD STE 1	COLUMBUS	MS	39705
1646	04/11/1988	NO	LINDSEY, REGINA SUZANNE, MD	4772 NAVY RD	MILLINGTON	MS TN	38053
					MILLING TON	114	30033

License	Issued	Disciplinary	Name	Address	City	State	Zip
18226		NO.	LIPE, ELIZABETH COLE, MD	740 HWY 49 N SUITEV	FLORA	MS	39071
14242			LITTLEJOHN, WILLIAM FLOYD, MD	2002A FLINT RD	DECATUR	AL	35601
19012			LOWE. MICHAEL PATRICK, MD	THE WEST CLINIC 100 N HUMPHREYS BLVD	MEMPHIS	TN	38120
10539			LUONG, HING B, MD	3240 E OLIVE AVE	FRESNO	CA	93702
17837			MAASSEN, MARTIN JAY, MD	60 PROFESSIONAL COURT	LAFAYETTE	IN	47905
18192			MACBETH, MICHELLE DENISE, DO	111 SAWBILL PALM DR	PONTE VEDRA	FL	32082
17280			MADJAR, SHAHAR, MD	100 MALTON RD STE 8 1421 N STATE ST STE 403	NEGAUNEE	MI	49866
15242		NO	MAHER, JOSEPH FRANCIS, MD	VETERANS AFFAIRS MEDICAL CENTER RESEARCH SERVICE (151) 1500 E. WOODROW WILSON BLVD	JACKSON	MS	39216
15213		NO	MAHER, LISA VERNINO, MD	MEDICAL SVC. (111) VA MEDICAL CENTER 15 E WOODROW WILSON BLVD	JACKSON	MS	39216
14883			MALONE-GILBERT, YOLANDA ANNETTE, MD	155 EAGLES LANDING STE F	STOCKBRIDGE	GA	30281
10714		NO	MANNING, JAMES SLOAN, MD	PRIMECARE - HICKORY BRANCH 501 HICKORY BRANCH RD	GREENSBORO	NC	27409
17479		NO	MANNTING, FINN, MD	THE LAKE REGIONAL MEDICAL CENTER 5000 HENNESSY BLVD	BATON ROUGE	LA	70808
18367		NO	MANSOUR, KATHLEEN MARIE, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
15868		NO	MANSOUR, NAWAR ELIAS, MD	176 S. BELLEVUE STE SUITE 502	MEMPHIS	TN	38104
19699		NO	MASON, CHAWLA LATOYA, MD	BAYLOR COLLEGE OF MEDICINE DEPT OF OB/ANSTHESIOLOGY 1709 DRYDE PLACE SUITE 1700	HOUSTON	TX	77030
18813		NO	MASSEY, MICHAEL DONAHUE, DO	ALASKA OPEN IMAGING CENTER 1751 EAST GARDNER WAY	WASILLA	AK	99654
18544			MATHEWS, CHACKO PALAMOOTILE, MD	400 W WOODWARD AVE	EUSTIS	FL	32726
10109		NO	MATHIS, ROBERT DAVID, MD	4 OCEANS WEST BLVD, UNIT 701-C	DAYTONA BEACH SHORES	FL	32118
12523	07/01/1990	NO	MATTHEWS, LESLIE RAY, MD	208 18TH ST, S,W, APT # 2	ROCHESTER	MN	55902
17480	01/07/2002	NO	MATTHEWS, SENIORA, MD	HOPE HEALING BEHAVORIAL HEALTHCARE 187 STATELINE DR. STE #1206	SOUTHAVEN	MS	38671
16612	11/15/1999	NO	MAXWELL, DONALD POWER, JR., MD	RETINAL ASSOCIATES OF OKLAHOMA 12318 ST. ANDREWS DR.	OKLAHOMA CITY	OK	73120
02883	12/12/1949	NO	MAYER, WILLIAM THOMAS, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
18766	12/13/2004	NO	MAYFIELD, MATTHEW EUGENE, MD	1211 UNION STE#500	MEMPHIS	TN	38104
16177	12/28/1998	NO	MCARTHUR, WILLIAM FRANK, III, MD	825 SOUTH 1ST STREET	JESUP	GA	31545
12761	03/25/1991	NO	MCCLURE, JAMES THOMAS, MD	5002 CROSSING CIRCLE	MT JULIET	TN	37122
16875		NO	MCCOY, DAVID MARK, MD	WESTERN ARK HEART LUNG & VASCULAR SURGICAL ASSOC P A 2713 SOUTH 74TH STREET STE 194	FORT SMITH	AR	72903
13464	06/07/1993	NO	MCDANIEL, FRANCES ELLEN, MD	DEPT OF RADIOLOGY ST. BERNARDS REGIONAL MEDICAL CTR	JONESBORO	AR	72403
15563	09/08/1997	NO	MCDONALD, MILES HARRY, MD	NEXUS MEDICAL GROUP 840 PINE ST STE 770	MACON	GA	31201
11937	11/15/1988	NO	MCGEHEE, BRUCE EDWARD, MD	6051 HIGHWAY 49	HATTIESBURG	MS	39402
14172	10/24/1994	NO	MCGILL, LORA JANNETTE, MD	6401 POPLAR AVENUE SUITE 420	MEMPHIS	TN	38119
11747		NO	MCINTYRE, THOMAS MICHAEL, MD	TUSCALOOSA MED CENTER SOUTH PC 5005 OSCAR BAXTER DR	TUSCALOOSA	AL	35405
18774	12/20/2004	NO	MCKINLEY, AARON BRENT, MD	UNIVERSITY OF MISSISSIPPI MEDICAL R OPHTHLAMOLOGY DEPT 2500 NORTH STATE STREET	JACKSON	MS	39216-4505
19027	07/25/2005	NO	MCKINLEY, JOANNA ANDREWS, MD	JACKSON PEDIATRICS ASSOCIATES 1600 NORTH STATE STREET SUITE 301	JACKSON	MS	39202
05645	06/21/1968	NO	MCNEEL, HARRY BRANTLEY, JR , MD	400 6TH STREET SOUTH	ST, PETERSBURG	FL	33701
07579	06/18/1976	NO	MCREYNOLDS, ROBERT CECIL, JR, MD	7703 PICARDY AVE	BATON ROUGE	ĹĀ	70808
06303	06/11/1971	NO	MEEK, TOM JOFFRE, JR . MD	5247 DIDESSE DR	BATON ROUGE	LA	70808
11137		NO	MELVIN, FRANK MICHAEL, MD	1065 HENDERSONVILLE RD	ASHEVILLE	NC	28803
09991		NO	MERIDETH, DAVID LAVELLE, MD	407-B WEST PARKWAY PLACE	RIDGELAND	MS	39157
15816		NO	MESSER, CATHY A DO	MEMORIAL HOSPITAL OF GULFPORT 4500 13TH ST	GULFPORT	MS	39502
11673			METZGER, WILLIAM EDGAR, JR , MD	7685 WINCHESTER RD	MEMPHIS	TN	38125
14610		NO	MEURER, DENNIS RAYMOND, MD	VA MEDICAL CENTER 1540 SPRING VALLEY DR.	HUNTINGTON	w	25704
17184		NO	MILLER, MICHAEL EMANUEL, MD	THE ORTHOPAEDIC CENTER 927 FRANKLIN ST	HUNTSVILLE	AL	35801
04543		NO	MILLS, NOEL LANG, JR , MD	38 TIERRALAGO DR	CARRIERE	MS	39426
17082		NO	MIRZA, MASHHUD M, MD	MID-SOUTH RENAL CLINIC 2921 HWY 77 #8	MARION	AR	72364
18404		NO	MISHRA, ASHUTOSH KUMAR, MD	INTERNAL MEDICINE PHYSICIANS OF MEM 401 SOUTHCREST CIRCLE STE 104	SOUTHAVEN	MS	38671
05817		NO	MITCHELL, ERNEST HAROLD, JR., MD	NO PRIMARY PRACTICE ADDRESS ON FILE.	COSTINUEN	MIG	20071
10090		NO.	MITCHELL, JESSE ROBERT, JR, MD	705 DIXIE ST	CARROLI TON	GA	30117
15557		NO	MITCHELL, THOMAS CHADRICK, MD	SOUTHERN ORTHOPEDIC SPECIALLISTS PA 1827 HARRISON AVENUE	PANAMA CITY	FL	32405
17083		NO	MITTAL, SANJEEV KUMAR, MD	MITTAL KIDNEY DIALYSIS PLLC 6027 WALNUT GROVE STE 402	MEMPHIS	TN	38120
11390		NO	MOAK, ANNE MCDONALD, MD	1200 SUNSET LANE SUITE 2111	CULPEPER	VA	22701
18471		NO	MONROE, LANNY LEE, JR , MD	866 MEDICAL PLAZA	JACKSON	MS	39204
.0.,,			moretoe, critici ccc, att, MD	ON MILDIONE FENER	JACKSON	MO	39204

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icense	Issued	Disciplinary	Name	Address	City	State	Zip
6723		NO	MONTALVO, RUTH DATMARE, MD	OAK RIDGE GASTROENTEROLOGY ASSOC. 988 OAK RODGE TURNPIKE, SUITE 200 PHYSICIANS PLAZA	OAK RIDGE	TN	37830
5795	04/06/1998	NO	MONTES, MIGUEL ANGEL, MD	MERLE WEST MEDICAL CENTER 2865 DAGGETT AVE	KLAMATH FALLS	OR	97601
5290	05/05/1997	NO	MOORE, BUFFORD DON, MD	BAYTOWN PLASTIC SURGERY 4301 GARTH RD STE 101	BAYTOWN	TX	77521-31
393	07/01/1987	NO	MOORE, MERWIN BLANCHARD, III, MD	223 PHYSICIANS PARK DRIVE	POPLAR BLUFF	MO	63901
924	06/26/1957	NO	MOORE, STEVEN LAVELLE, MD	924 LUCKNEY ROAD	BRANDON	MS	39047-87
261		NO	MOORE, TODD ANTHONY, MD	ONCOLOGY & INFUSION SERVICES 3 MOBILE INFRMARY CIRCLE, SUITE 301	MOBILE	AL	36607
528		NO	MORGAN, WILLIAM LAMAR, MD	CHILDREN'S HOSPITAL DEPT. OF PEDIATRIC EMERGENCY MED 1600 7TH AVE S.	BIRMINGHAM	AL	35233
786		NO	MORIN, MICHAEL JOSEPH, MD	RADIOLOGY - INDEPENDANT CONTRACTOR 804 RIDGELAKE DR	NEW ORLEANS	ĹÁ	70001
038		NO.	MORRIS, GLENN FARRELL, MD		FLOWOOD	MS	
409		NO	MOSELEY, JAMES B. MD	FAMILY MEDICAL CLINIC OF JACKS 4290 LAKELAND DR SUITE A		MS TN	39232
634				4646 POPLAR AVE SUITE 307	MEMPHIS		38117
791		NO	MOSKOWITZ, EDWARD JAMES, MD	121 FOOTHILL BOULEVARD	POCATELLO	ID	83204
		NO	MOULTON, MICHAEL JAMES, MD	SO, ARIZONA VA HOSPITAL 3601 S, 6TH AVE.	TUCSON	AZ	85723
060		NO	MURCHISON, LAURA A, MID	NO PRIMARY PRACTICE ADDRESS ON FILE.			
541		NO	MURPHY, PATRICK LEON, MD	1700 SPRINGHILL AVE	MOBILE	AL	36604
272		NQ	MUSHAYANDEBVU, TAONEI I, MD	2777 KENNEDY BLVD.	JERSEY CITY	NJ	07306
049		NO	NANCE, JUDITH BYNUM, MD	1135 EXPRESSWAY DR. SUITE 200A	PINEVILLE	LA	71360
038		NO	NARAYANASWAMY, TRICHINOPOLY, MD	DEPT NEUROLDGY 96TH MDOS/SGOMI 307 BOATNER RD STE 114	EGLIN AFB	FL	32542-1
394	01/26/2004	NO	NEEDLE, SCOTT MICHAEL, MD	HANCOCK MEDICAL CENTER 202-A DRINKWATER BLVD.	BAY ST LOUIS	MS	39520
854	09/14/1979	NO	NEILL, JAMES ELMER, MD	3555 KNICKERBOCKER RD	SAN ANGELO	TX	76904
688	12/08/1997	NO	NELSON, HUNTER BEN, JR., MD	5 MOBILE INFIRMARY CIRCLE	MOBILE	AL	36607
809		NO	NEWLANDS, SHAWN DAVID, MD	UNIVERSITY OF TEXAS MEDICAL BRANCH - DEPT OF OTOLARYNGOLOGY 301 UNIVERSITY BLVD - RT 0521	GALVESTON	TX	77555-0
881	05/01/1977	NO	NEWMAN, LARRY BERNARD, MD	995 S YATES STE. 1	MEMPHIS	TN	38119
279	10/13/2003	NO	NGUYEN, KHOA DANG, MD	SAVANNAH RADIOLOGIST 1 JOHNSTON STREET STE 12	SAVANNAH	GA	31405
929	07/22/1996	NO	NGUYEN, PHILLIP TIEN, MD	EMERGENCY MEDICINE ASSOCIATES OF JACKSON 1225 N STATE ST	JACKSON	MS	39216
496		NO	NICHOLS, CARL GRADY, JR., MD	30L NE DEER CREEK DRIVE	LELAND	MS	38756
725		NO	NIGRO, ANTHONY FELIX, MD	36 WOBURN ST.	READING	MA	01867
670		NO	NOEL, PAUL EDWARD, MD	201 N MALONE ST	ATHENS	AL	35611
724		NO	NOGUCHI, BARBARA ANN, MD	3900 VETERAN'S BLVD SUITE 203	METARIE	LA	70002
106		NO NO	NOLAND, ROBERT ELDRIDGE, JR. MD			MS	39213
186		NO NO		VOICE OF CALVERY FAMILY HEALTH CTR 2217 MARTIN LUTHER KING DR	JACKSON		
186 9 94			NORMAN, BRUCE E, MD	1001 LAKESIDE AVE.SUITE 1200	CLEVELAND	OH	44114-1
		NO	NORSWORTHY, THOMAS PHILIP, MD	708 W FOREST AVE	JACKSON	TN	38301
762		NO	NORTON, BENNETTE EDWARD, III, MD	HOLSTON MEDICAL GROUP 4848 FT HENRY DR	KINGSPORT	TN	37663
927		NO	NORVEL, ROBERT R., JR., MD	1670 CLAIRMONT RD.	DECATUR	GA	30033
491		NO	NMZU, CHIDI AZUBIKE, MD	MAGNOLIA MEDICAL CLINIC 1413 STRONG AVE	GREENWOOD	MS	38930
040		YES	O'BRIEN, EDWARD J., SR., MD	MEADOWCREST HOSPITAL 2500 BELLE CHASSE HWY	GRETNA	LA	70053
403		NO	O'DONNELL, JAMES ANDERSON, II, MD	50 NORTH DUNLAP	MEMPHIS	TN	38103
459		NO	O'DOWD, JOHN MICHAEL, MD	1700 SPRINGHILL AVE	MOBILE	AL	36604
816		NO	ODETOYINBO, ADEDAPO OLAMIDE, MD	EMORY EASTSIDE MEDICAL CENTER 1700 MEDICAL WAY	SNELLVILLE	GA	30078
092		NO	OGNIBENE, FRANK A, DPM	OGNIBENE CLIN GERMANTOWN 2120 EXETER RD #220	GERMANTOWN	TN	38138
544	10/30/2006	NO	OH, YOUNGHYUN, MD	UNIVERSITY MEDICAL CENTER DEPT, OF OPTHALMOLOGY 2500 N, STATE STREET	JACKSON	MS	39216
005	06/17/1964	NO	OLIVER, ROBERT IRWIN, MD	2018 BROOKWOOD MEDICAL CENTER DR STE 215	BIRMINGHAM	AL	35209
753	03/25/1996	NO	ONYEJEKWE, CHIKE O. MD	13019 WELLHOUSE COURT	GERMANTOWN	MD	20874
529	10/13/1997	NO	OSBORNE, PAMELA THOMPSON, MD	DEPT OF PATHOLOGY 930 MADISON AVE	MEMPHIS	TN	38163
743	08/05/2002	NO	PALUMBO, CARL FRANK, II. MD	BIENVILLE ORTHOPAEDIC SPECIALISTS 1720A MEDICAL PARK DR #220	BILOXI	MS	39532
98		NO	PASCHEN, JOHN JOSEPH, MD	MCFARLAND CLINIC 1215 DUFF AVE	AMES	łA.	50010
323		NO	PASSYN, KATHERINE LIPSCOMB, MD	CHESTER RIVER MEDICAL CENTER 100 BROWN STREET	CHESTERTOWN	MD	21620
376		NO	PATEL. MANISH ARUN, MD	MS SPORTS MEDICINE & ORTHOPAEDIC 1325 E. FORTIFICATION ST	JACKSON	MS	39202
270		NO	PATEL, MANISH ARON, MD PATEL, TEJASKUMAR BABULAL, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.	MONDON	MIQ	39202
701		NO NO	PATTERSON, GLENDA MARIE, MD		FAVETTENNIS	AD	70700
701 866		NO NO	PATTERSON, GLENDA MARIE, MU	FAYETTEVILLE V A MEDICAL CENTER 1100 N COLLEGE AVE	FAYETTEVILLE	AR	72703
			PEAN, JULES, MD	22 LINOEN AVE	WEST ORANGE	NJ	07052
867		NO	PEDEN, JOHN PATRICK, JR, MD	VERO ORTHOPAEDICS 1155 35TH LANE SUITE 100	VERO BEACH	FL	32960
399		NO	PELLETIER, ALLEN L, MD	UNIV. OF TENNESSEE FAMILY PRACTICE 1301 PRIMACY PARKWAY	MEMPHIS	TN	38119
074	09/12/2005	NO	PERRY, RUSSELL KEITH, MD	UMC DEPT. OF MEDICINE 2500 N. STATE STREET	JACKSON	MS	39216

License	Issued	Disciplinary	Name	Address	City	State	Zip
08033	08/08/1977	NO	PETERS, RICHARD ALLEN, MD	3300 PROVIDENCE DR SUITE 04	ANCHORAGE	AK	99508
13021	11/18/1991	NO	PETRY, CARY GLENN, MD	AMERICAN FAMILY CARE 2147 RIVERCHASE OFFICE ROAD	BIRMINGHAM	AL	35244-1836
10731	07/01/1985	NO	PHILLIPS, MICHAEL STEPHEN, MD	SOUTHERN EYE ASSOCIATES PA 104 SIMPSON ST	GREENVILLE	SC	29605
30129	05/13/1996	NO	PIANO, THEODORE JOSEPH, DPM	4142 HANGING MOSS CT.	JACKSONVILLE	FL	32257
8447	03/08/2004	NO	PIERCE, MARK ALAN, MD	UT-CAMPBELL CLINIC 1211 UNION AVENUE, SUITE 510	MEMPHIS	TN	38104
17020	12/04/2000	NO	PIROS, GEORGE PETER, MD	SAVANNAH RADIOLOGISTS 1 JOHNSON ST STE 12	SAVANNAH	GA	31405
04938	12/02/1963	NO	PITTMAN, JAMES ALTUS, MD	ELLISVILLE STATE SCHOOL 1101 HWY 11 SOUTH	ELLISVILLE	MS	39437
11451	05/26/1987	NO	PLAUCHE, WADE EDOUARD, MD	108 SUMMIT GROVE PALISADES	BRANDON	MS	39047
19075	09/13/2005	NO	PLUMMER, CATHERINE SAPP, MD	2500 N STATE ST ALUMNI HOUSE 303	JACKSON	MS	39216
11964	12/12/1988	NO	POBER, KENNETH ALEX, MD	9361 RT 422 HWY WEST P.O. BOX 258	SHELCOTA	PA	15774
18652	08/23/2004	NO	POLITZ, DOUGLAS EDWIN, MD	NORMAN ENDOCRINE SURGERY CLINIC 3238 COVE BEND DRIVE	TAMPA	FL	33613
07351	08/04/1975	NO	POMEROY, MARY CAROLYN, MD	600 HOSPITAL DR	MONROE	NC	28112
17413	10/15/2001	NO	POTTER, CHAD JEREMY, MD	1375 JONESTOWN RD	WINSTON SALEM	NC	27103
09594	06/30/1982	NO	POWELL, WILLIAM EDWIN, MD	WAYNESBORO FAMILY MED & OB 920 MATTHEW DR STE A	WAYNESBORO	MS	39367
08408	08/08/1978	NO	POWELL, WILLIAM STEWART, MD	141 TRYON RD STE B	RUTHERFORDTON	NC	28139
10656	05/14/1985	NO	PREAU, WILLIAM JOSEPH, III, MD	#9 CLAUDIA DR	COVINGTON	LA	70433
11474	07/01/1987	NO	PRIDE, MARIETTA PACE, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
16311	05/10/1999	NO	PRIOR, MICHAEL IAN, MD	HEART RHYTHM CONSULTANTS OF STOCKTO 6499 BROOK HOLLOW CIRCLE	STOCKTON	CA	95219-2436
12532	07/01/1990	NO	QUIGLEY, TIMOTHY GLENARVON, MD	BAPTIST MEDICAL CENTER - BEACHES 1350 13TH AVE S	JACKSONVILLE BEACH	FL	32250
09251	10/02/1980	NO	RAGHAVAIAH, NIMMAGADDA VEERA, MD	6005 PARK AVE STE 826 B	MEMPHIS	TN	38119
15217	03/03/1997	NO	RAMEY, DANIEL RANDOLPH, III, MD	BAPTIST MEMORIAL HOSPITAL - MEMPHIS 6019 WALNUT GROVE ROAD	MEMPHIS	TN	38120
0548B	06/07/1967	NO	RANDLE, THOMAS ALBERT, JR., MD	551 AZALEA DR	OXFORD	MS	38655
16085	10/05/1998	NO	RAO, ASHOK, MD	58 TIMBER CREEK DRIVE	MEMPHIS	TN	38018
13502	06/29/1993	NO	RAVEL, RICHARD, MD	1300 ENISWOOD PARKWAY	PALM HARBOR	FL	34683
17348	08/13/2001	NO	RAVOORI, SUDHA RANI, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
10008	07/01/1983	NO	REBAND, PAMELA BRENKERT, MD	HAVASU REGIONAL MEDICAL CENTER 101 CIVIC CENTER DR	LAKE HAVASU CITY	AZ	86404
17900	12/09/2002	NO	REDDY, UMAPATHI PEACHU, MD	3138 POWERS AVE	CLOVIS	CA	93619-9594
14240	01/24/1995	NO	REMKUS, JAMES EDWARD, MD	5 SANCTUARY DR	SAN ANTONIO	TX	78248
06767	08/09/1973	NO	RICKS, PHILLIP MORGAN, MD	PHYSICIANS PLAZA STE 200 988 OAK RIDGE TURNPIKE SUITE 200 PHYSICIANS PLAZA	OAK RIDGE	TN	37830
14265	02/27/1995	NO	RIVERA, PEDRO NESTOR, MD	HEALTH NET FEDERAL SERVICES 2107 WILSON BLVD.	ARLINGTON	VA	22201
14584	09/18/1995	NO	RIZVI. AKBAR. MD	RENA TARBET CANCER CENTER 4201 MEDICAL CENTER DRIVE SUITE 180	MCKINNEY	TX	7 501 5
16096	10/12/1998	NO	ROBB. JAMES ARTHUR, MD	MEDICAL DIRECTOR, IRL 5361 NW 33RD AVE	FT LAUDERDALE	FL	33309-6313
18538	06/07/2004	NO	ROBERTS, KENNETH CHARLES, DO	VETERANS ADMINISTRATION 400 VETERANS	BILOXI	MS	39531
05839	06/11/1969	NO	RODRIGUEZ, GASTON REYNALDO, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
05014	06/17/1964	NO	ROGERS, EARL MCNICHOL, MD	1303 14TH AVE SE	DECATUR	AL	35601
09483	10/30/1981	NO	ROGERS, SUSAN BELLE, MD	399 W CAMPBELL RD STE 101	RICHARDSON	TX	75080
14783	04/22/1996	NO	ROTH, TRACY Y, MD	4507 HOSPITAL ST	PASCAGOULA	MS	39581-5336
05840	06/11/1969	NO	ROUSSEAU, WYATT EASTERLING, MD	8220 WALNUT HILL LANE STE 408	DALLAS	TX	75231
08909	11/29/1979	NO	ROUTH, ANUPAM, MD	UNIVERSITY OF MS MEDICAL CENTER STE 1600 RADIOLOGY ONCOLOGY 350 W WOODROW WILSON	JACKSON	MS	39213
09452	09/17/1981	NO	ROWDEN, PHILLIP CHARLES, MD	210 LINTON AVE	NATCHEZ	MS	39120
18793	01/10/2005	NO	ROZANS, MARTA KLIGERMAN, MD	ST. CHRISTOPHER'S HOSP FOR CHILDREN DEPARTMENT OF ONCOLOGY FRONT AND ERIE STREET	PHILADELPHIA	PA	19041
16971	10/09/2000	NO	RUSSELL, LORI DANIELLE, MD	11116 WILLOW MEADOW LANE APT 824	CHARLOTTE	NC	28277
06770	08/09/1973	NO	RUSSWURM, HARVEY DALE, MD	SHANNON CLINIC 120 BEAUGARD	SAN ANGELO	TX	76904
19533	10/23/2006	NO	SABA, HANNA MEKHAYEL, MD	ASHLEY COUNTY MEDICAL CENTER 1019 UNITY RD.	CROSSETT	AR	71635
15147	12/09/1996	NO	SACKS, MATTHEW JAY, MD	PO BOX 1477 401 WEST POPLAR STREET	WALLA WALLA	WA	99362
17754	08/12/2002	NO	SAENZ, JAY MICHAEL, MD	TABOR ORTHOPEDICS, P.C. ATTN: ELIZABETH TROUTMAN 6005 PARK AVENUE, SUITE 608	MEMPHIS	TN	38119
17662	06/17/2002	NO	SALAMEH, JIHAD RIAD, MD	GV MONTGOMERY VAMC 1500 E WOODROW WILSON DR	JACKSON	MS	39216
13785	03/31/1994	NO	SALEM, MAHMOUD MOKHLES, MD	DEPT OF NEPHROLOGY UMC 2500 N STATE ST	JACKSON	MS	39216
11416	07/01/1987	NO	SALTER, JAMES EDWARD, JR. MD	MEMORIAL HERMANN MEMORIAL CITY 921 GESSNER RD	HOUSTON	TX	77024-2501
16925	08/21/2000	NO	SANDERS, BILLY JEFFREY, MD	MEDICAL ANESTHESIA GROUP 1755 KIRBY PKWY, STE 330	MEMPHIS	ŤŃ	38120
11255	12/16/1986	NO	SANDERS, DELMAR C, MD	6853 BUCKINGHAM BLVE	OAKLAND	CA	94705-1708

License	Issued	Disciplinar	y Name	Address	City	State	Zip
17351	08/13/2001	NO	SANTIAGO, MARIA EUGENIA, MD	COLLIER NEUROLOGIC SPECIALISTS 730 GOODLETTE RD., SUITE 100	NAPLES	FL	34102
11885	08/31/1988	NO	SAYES, ROBERT MARK, MD	206 EAST 2ND ST	THIBODAUX	ĹĀ	70301
09559	04/28/1982	NO	SCHAEFFER, SANDEFORD JULIUS, JR, MD	7363 CROWTHER COVE	MEMPHIS	TN	38119
15218	03/03/1997	NO	SCHANZER, MARY CATHLEEN, MD	5350 POPLAR AVE STE 950	MEMPHIS	TN	38119
18697	10/04/2004	NO	SCHER, CHARLES D, MD	TULANE HOSPITAL AND CLINICS 1415 TULANE AVENUE	NEW ORLEANS	LA	70112
03780	06/27/1956	NO	SCHMIDT, FRANK LAMAR, MD	4442 MENGE AVE.	PASS CHRISTIAN	MS	39571
17511	01/28/2002	NO	SCHROEDER, ALAN CONRAD, MD	MS SPORTS MEDICINE & ORTHOPAEDIC CN 1325 E, FORTIFICATION ST	JACKSON	MS	39202
03506	06/21/1954	NO	SCRUGGS. CHARLES DAVID, MD	810 BRIDGEPORT DR	MADISON	MS	39110
04243	06/24/1959	NO	SEGARS, KELLY SCOTT, SR, MD	THE SEGARS CLINIC PA 1507 W QUITMAN	IUKA	MS	38852
15710	01/12/1998	NO	SEKI, IBRAHIM, MD	RIVERPARK MEDICAL CENTER 107 FRONT ST	VIDALIA	LA	71373
18340	12/01/2003	NO	SELLERS, RANDALL EUGENE, MD	NORTH OAKS HEALTH SYSTEM 15837 PAUL VEGA M.D. DRIVE SUITE 200	HAMMOND	LA	70403
12537	07/01/1990	NO	SELVA, REGINAM, MD	401 KEENE ST	COLUMBIA	MO	65201
12538	07/01/1990	NO	SELVA, THOMAS JOHN, MD	UNIV OF MO DEPT OF CHILD HEALTH 1 HOSPITAL DR	COLUMBIA	MO	65212
17863	11/18/2002	NO	SEMCHYSHYN, STEFAN, MD	211 SCOTT LANE	JONESBOROUGH	TN	37659
14458	07/10/1995	NO	SEYMOUR, MORRIS BURTON, JR., MD	THE OTHOPAEDIC CENTER, P.C. 927 FRANKLIN ST	HUNTSVILLE	AL	35801
19630	01/22/2007	NO	SHAIKH, KHAWAR MUSHTAQ, MD	1251 WESLEY DR., #153	MEMPHIS	TN	38116
17096	02/12/2001	NO	SHAW, SAMUEL NICK, MD	BASSFIELD MEDICAL CLINIC 108 ROBERT E BLOUNT DR	BASSFIELD	MS	39421
05754	12/21/1968	NO	SHERMAN, IRVIN JOSEPH, JR , MD	DERMATOLOGY CLINIC 5247 DIDESSE DR	BATON ROUGE	LA	70808
13105	04/20/1992	NO	SHERMAN, IVAN MORTON, MD	1525 SHORT ST	NEW ORLEANS	LA	70118-401
13104	04/20/1992	NO	SIMON, KENNETH B, MD	JACKSON VA MEDICAL CENTER 1500 E, WOODROW WILSON DRIVE	JACKSON	MS	39216
11476	07/01/1987	NO	SIMPSON, C KELLEY, MD	POUDRE VALLEY RADIATION ONCOLOGY 2121 E. HARMONY ROAD, SUITE 160	FT COLLINS	co	80528
18150	07/07/2003	NO	SINGH, AJIT, MD	1400 GROVE MEADOW COURT	GERMANTOWN	TN	38138
15196	02/10/1997	NO	SITLER, CHARLOTTE ANNE, MD	RENAISSANCE CENTER 1715 AARON BRENNER DR STE 326	MEMPHIS	TN	38120-144
13397	01/11/1993	NO	SLATER, WILLIAM MASON, MD	150 S HWY 160 STE C8 PMB #380	PAHRUMP	NV	89048
08255	06/28/1978	NO	SMALLWOOD, JAMES CLAYTON, MD	MOUNTAIN REGIONAL OB-GYN 174 COWAN STREET	SYLVA	NC	28779
13327	09/14/1992	NO	SMELSER, MICHAEL HARDING, MD	347 E MAIN	ADAMSVILLE	TN	38310
03991	06/26/1957	NO	SMITH, ALANSON BROWN, MD	1400 20TH AVENUE STE B	MERIDIAN	MS	39301-410
08882	10/17/1979	NO	SMITH, KEITH PATRICK, MD	901 LEIGHTON AVENUE SUITE 702	ANNISTON	AL	36207
05022	06/17/1964	NO	SMITH, PERRIN NELSON, MD	125 WILD PLUM ROAD	COLUMBUS	MS	39705
05538	06/07/1967	NO	SMITH, PRENTISS EDWARD, JR, MD	7597 SOUTH BOCAGE COURT	BATON ROUGE	LA	70809-117
14062	08/02/1994	NO	SMITH, ROBERT SCOTT, MD	TEREBONNE MENTAL HEALTH CENTER 106 MOSS LANE	HOUMA	LA	70360
06677	06/15/1973	NO	SMITH, WILLIAM CHAPMAN, MD	UNIV OF TN DEPT OF RADIOL 800 MADISON AVE	MEMPHIS	TN	38163
12677	10/01/1990	NO	SNIDER, ALLAN JEFFREY, MD	CHARLESTON AREA MEDICAL CENTER 501 MORRIS AVE	CHARLESTON	w	26325
13818 16544	05/17/1994	NO	SNYDER, JAMES ALLEN, DO	RUSH HOSPITAL EMERGENCY DEPT 1314 19TH AVE	MERIDIAN	MS	39301
12345	09/13/1999 11/21/1989	NO NO	SODD, ANTHONY NEWMAN, MD	MID AMERICA RADIOLOGY 3636 N BELT W	BELLEVILLE	IL.	62226
10086	07/13/1983	NO NO	SORENSEN, KENT W, MD	5802 -44TH AVE RED DEER, ALBERTA	CANADA	-	T4N3J5
18457	03/15/2004	NO NO	SPARROW, JOHN GREGORY, MD SPAW, JEFFREY NEAL, MD	87B MURRAY GUARD DR	JACKSON	TN MS	38305 39648
13786	04/04/1994	NO NO	SPECHT, HENRY OAVID, MD	SOUTHWEST CENTER FOR ORTHOPEDICS 1506 ASTON AVESTE A	MCCOMB	MO	39048
09685	06/29/1982	YES	SPEED, WILLARD EUGENE, JR, MD	NO PRIMARY PRACTICE ADDRESS ON FILE. HARDY WILSOM MEMORIAL HOSPITAL 233 MAGNOLIA ST	HAZLEHURST	MS	39083
19607	12/18/2006	NO NO	STANTON, RONALD ANDREW, JR., MD	UNIVERSITY OF TENNESSEE DEPT, OF RADIOLOGY	MEMPHIS	MS TN	38104
10025	07/01/1983	NO	STANTON, RONALD ANDREW, JR., MD	UNIVERSITY OF TENNESSEE DEPT, OF RADIOLOGY UNIVERSITY MEDICAL CENTER JACKSON MEDICAL MALL 2500 NORTH STATE STREET	JACKSON	MS	39216
12014	02/27/1989	NO	STEIN, LEE STUART, MD	THE NEUROLOGY CLINIC PC 8000 CENTERVIEW PKWY SUITE 300	CORDOVA	TN	38018
19249	03/06/2006	NO	STERLIN, MARIE GATIEN MYRIAM, MD	DIVISION OF DISABILITY DETERMINATIN 124 HALSEY STREET	NEWARK	NJ	07102
05540	06/07/1967	NO	STEWART, WORLEY K, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.	MEANAGE	143	01102
13563	07/01/1993	NO	STITT, JOHN CHARLES, MD	OB-GYN ASSOCIATES 1717 HIGH STREET, SUITE 4	HOPKINSVILLE	KY	42240
05679	06/21/1968	NO	STOEV, DIMITRE STOYKO, MD	9870 WATERMILL CIRCLE APT. H	BOYNTON BEACH	FL	33437
07954	08/05/1977	NO	STRINGER, DOUGLAS LYNN, MD	2011 N HARRISON AVE	PANAMA CITY	FL	32405
03630	06/27/1955	NO	STRINGER, WILLIE FRANKLIN, MD	116 SPRING HILL RD	POPLARVILLE	MS	39470
15907	07/07/1998	NO	STUBBS, MALCOLM JAY, MD	OPELOUSAS ORTHOPEDIC CLINIC 4015 I-49 S SERVICE RO	OPELOUSAS	LA	70570
13242	07/01/1992	NO	SULLIVAN, DAVIS LEE, MD	THE WOMEN'S PAVILION, PC 3368 HWY 280 STE 111	ALEXANDER CITY	AL	35010
19223	02/13/2006	NO	SULLIVAN, ROBERT JOSEPH, MD	UMC DEPT. OF ANESTHESIOLOGY 2500 N. STATE STREET	JACKSON	MS	39216
19078	09/19/2005	NO	SWYMN, JEREMY PAUL, MD	CAMPBELL CLINIC 1211 UNION AVE. SUITE 510	MEMPHIS	TN	38104
19267	03/20/2006	NO	SYED, MOHSIN MOIN, MD	EAGLE HOSPITAL PHYSICIANS 5901-C PEACHTREE DUNWOODY ROAD SUITE 350	ATLANTA	GA	30328
17717	07/15/2002	NO	TAKARA, JAMES PATRICK, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.	A. DAITA	0/1	30020

License	Issued	Disciplinary	Name	Address	City	State	Zip
17406	10/08/2001	NO	TALBOTT, DAVID WILLIAM, MD	RIVER REGIONAL MEDICAL CNTR 2100 HWY 61 N	VICKSBURG	MS	39183
09192	08/04/1980	NO	TALKINGTON, JAMES MCGEE, MD	2428 JENKS AVE	PANAMA CITY	FL	32405
16877	07/24/2000	NO	TASSIN, ROBERT LOUIS, JR, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
12024	03/13/1989	NO	TAYLOR, JOHN CHARLES, MD	6005 PARK STE 430B	MEMPHIS	TN	38119 .
12609	07/17/1990	NO	THAGGARD, SUSAN VANZANDT, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.			
10950	02/06/1986	NO	THEROUX, MARC ANDRE, MD	534 PROSPECT ST.	FALL RIVER	MA	02720
09658	07/01/1982	NO	THOMPSON, EVALINE JANE, MD	AMARILLO VAMC 6010 AMARILLO BLVD, WEST	AMARILLO	TX	79106
19423	07/24/2006	NO	TIPNIS, TISHA VIJAY, MD	2520 5TH STREET NORTH	COLUMBUS	MS	39705
15076 05026	09/30/1996	NO	TIPTON, ROBERT EUGENE, MD	3876 NEW COVINGTON PIKE	MEMPHIS	TN	38128
05165	06/17/1964 06/16/1965	NO	TODD, DONALD RALPH, MD	5147 N 9TH AVE STE 325-C	PENSACOLA	FL	32504
07465	10/28/1975	YES	TOUCHSTONE, WILLIAM CARLISLE, MD	NORTH SUNFLOWER MEDICAL CENTER 840 NORTH OAK AVE.	RULEVILLE	MS	38771
11090	07/01/1986	NO	TRAUTMAN, ROBERT JOSEPH, JR, MD	6005 PARK AVE 1005 B	MEMPHIS	TN	38119
15189	01/27/1997	NO NO	TRIPLETT, LARAMIE CURTIS, MD	MAGNOLIA FAMILY MEDICINE 611 CAMPUS DR, STE 200	ABINGDON	VA	24210
10137	09/14/1983	NO NO	TSENG, I-WEN , DO	2730 WILSHIRE BLVD., SUITE 370	SANTA MONICA	CA	90403
07597	07/13/1976	NO NO	TUCKER, CHARLES DOUGLAS, MD	MEDICAL ARTS BLDG 300 S 8TH ST STE 382	MURRAY	KY	42071
12770	04/08/1991	NO	TUCKER, ELLIOTT WANNAMAKER, JR, MD	ALLIANCE HEALTHCARE 1430 H EASTWY 4 38635	HOLLYSPRINGS	MS	38852
07065	08/08/1974	NO NO	TURNER, JAN L, MD UPCHURCH, JOHNNY J, MD	THE STERN CARDIOVASCULAR CENTER 8080 WOLF RIVER BLVD	GERMANTOWN	TN	38138
18098	06/09/2003	NO NO	UPSHAW, JOHN HAROLD, JR., MD	HEALTH TE AROHA 28 CHURCH STREET	TE AROHA, NEW ZEALAND		
17963	02/03/2003	NO NO	VALDIVIA, ENRIQUE ARTURO, MD	2525 TELEPHONE ROAD	PASCAGOULA	MS	39567
13589	07/01/1993	NO	VANCE, LEIGH ANN, MD	785 OHIO AVE STE 1F	CLARKSDALE	MS	38614
17964	02/03/2003	NO	VELARDE, CLAUDIA MARIA, MD	3100 W SAHARA STE 200	LAS VEGAS	NV	89102
19642	01/29/2007	NO NO	VESOM, URAIWAN, MD	785 OHIO AVE STE 3-H	CLARKSDALE	MS	38614
16742	05/01/2000	NO	WAFAPOOR, HUSSEIN, MD	NO PRIMARY PRACTICE ADDRESS ON FILE.		_	
16228	03/01/1999	NO	WAINNER, KENNETH FRED, MD	RETINA HEALTH CENTER 1567 HAYLEY LANE, SUITE 101	FORT MYERS	FL	33907
13767	02/28/1994	NO	WALKLETT, WILLIAM DONALD, MD	2208 WILDWOOD TERRACE	EDMOND	oĸ	73034
17446	11/26/2001	NO	WALL, MICHELLE GIROUARD, MD	4580 ORTEGA FOREST DR JONES FAMILY MEDICAL CLINIC 1200 N GLOSTER ST	JACKSONVILLE	FL	32210
16434	07/26/1999	NO	WALLER, BENJAMIN RUSH, JII, MD	UT MEDICAL GROUP 50 N. DUNLAP	TUPELO	MS	38804
06038	06/12/1970	NO	WALLING, ROBERT VAN, MD	40 N. DUNLAP	MEMPHIS	TN	38103
17783	09/09/2002	NO	WALLS, ULYSSES CHRISTOPHER, MD	GREAT LAKES HEART CENTER 460 LONG RAPIDS PLAZA	MEMPHIS	TN	38105
16357	06/07/1999	NO	WALTERS, MICHAEL JOSEPH, MD	BENEFIS HOSPITAL 1101 26TH ST SOUTH	ALPENA GREAT FALLS	MI	49707
19359	06/19/2006	NO	WANG, ALUN RONGXIANG, MD	1430 TULANE AVE.	NEW ORLEANS	MT	59404
18387	01/20/2004	NO	WANG, WELL MD	2520 5TH STREET NORTH AMERIPATH, COLUMBUS	COLUMBUS	LA	70131
12027	03/20/1989	NO	WARDEN, CLARK GERARD, MD	SURGICAL SPECIALISTS OF LOUISIANA 7015 HWY 190 E, SERVICE RD, STE#200	COVINGTON	MS LA	39705
12367	01/02/1990	NO	WARE, DONALD KEITH, II., DO	3425 S HIGHLANDS AVE	SEBRING	FL	70433 33870
15789	03/30/1998	NO	WARNER, RANDY TYLER, MD	690 DALLAS HIGHWAY STE 201	VILLARICA	GA	30180
19570	11/20/2006	NO	WATERS, BRENDAN LAWRENCE, DO	1677 PEACHTREE. STE. 1401	ATLANTA	GA	30308
07068	08/08/1974	NO	WATKINS, TROY B. JR . MD	125 E IDAHO STE 104	BOISE	ID	83712
18173	07/21/2003	NO	WATSON, CHARLES R., MD	331DITTMER	PUEBLO	CO	81005
10457	07/01/1984	NO	WATSON, DEBORAH DIANE, MD	6063 MT MORIAH EXT SUITE 13	MEMPHIS	TN	38115
13752	01/24/1994	NO	WATSON, RICHARD BALDWIN, MD	2134 EAST 27TH STREET	YUMA	AZ	85365
09201	08/04/1980	NO	WEILAND, RICHARD CALVIN, JR. MD	2250 MOON LAKE ROAD	DUNDEE	MS	38626
18010	03/24/2003	NO	WEIN, RICHARD ORIN, MD	UNIVERSITY OF MISS MEDICAL CENTER 2500 N STATE ST DEPARTMENT OF OTOLARYNGOLOGY	JACKSON	MS	39216
12064	05/15/1989	NO	WEST, LARRY KETNER, MD	PIKEVILLE RADIOLOGY PIKEVILLE MEDICAL BUILDING	PIKEVILLE	KY	41501
07489	12/15/1975	NO	WHEAT, WENDELL TILLMAN, MD	8538 DEAUVILLE COVE	GERMANTOWN	TN	38138
17385	09/17/2001	NO	WHITE, CHRISTOPHER J, MD	OCHSNER CLINIC DEPT OF CARDIOLOGY 1514 JEFFERSON HWY	NEW ORLEANS	LA	70121
05696	06/21/1968	NO	WHITWELL, EARL EMERSON, MD	EARL E. WHITWELL 1625 NORTHLAKE DRIVE	TUPELO	MS	38804
17521	02/04/2002	NO	WIDICK, BRETT JOSEPH, MD	3114 B SHILOH ROAD	CORINTH	MS	38834
11327	05/12/1987	NO	WILENSKY, MICHAEL ALLEN, MD	D'SOUZA & WILENSKY, APMC 200 W ESPLANADE AVE #401	KENNER	LA	70065
08231	05/23/1978	NO	WILSON, MARGARET ANN, MD	1071 VELTRE CIRCLE	ATLANTA	GA	30311
19651	02/05/2007	NO	WOO, MACK DAVISON, MD	UMC DEPT. OF ANESTHESIOLOGY 2500 N. STATE STREET	JACKSON	MS	39216
17458	12/03/2001	NO	WOOD, MICHAEL LEONARD, MD	UMC HEART STATION UNIVERSITY OF MS MEDICAL CENTER 2500 NORTH STATE STREET	JACKSON	MS	39216
19 4 07	07/17/2006	NO	WOOD, THOMAS REYNOLD, DO	UNIVERSITY OF MS MEDICAL CENTER DEPT. OF OB/GYN 2500 N. STATE STREET	JACKSON	MS	39216
						F	age: 11

License	Issued	Disciplinary	Name	Address	City	State	Zip
05372	06/15/1966	NO	WOOD, WILLIAM LUCIAN, JR, MD	NO MISSISSIPPI MEDICAL CENTER HEALTH INFORMATION SERVICES 830 S GLOSTER	TUPELO	MS	38801
01062	06/28/1940	NO	WOODBRIDGE, JOHN HOWARD, MD	6142 CARRIAGE HOUSE WY.	RENO	NV	89519
11442	07/01/1987	NO	WRIGHT, ANNA MARY, MD	4266 SUNBEAM ROAD	JACKSONVILLE	FL	32257
09778	09/15/1982	NO	WRIGHT, LYNN SWEARINGEN, MD	PARKRIDGE MED CTR-PATHOLOGY 2333 MCCALLIE AVE	CHATTANOOGA	TN	37404
12181	06/19/1989	NO	WRIGHT, PHILLIP EUGENE, MD	31 TIDY ISLAND BLVD.	BRADENTON	FL	34210
17447	11/26/2001	NO	WYATT-ASHMEAD, JOSEPHINE, MD	HAMMERSMITH HOSPITAL DU CANE ROAD LONDON W12 0NN	UNITED KINGDOM		
17893	12/02/2002	NO	YAGNICK, HEMANT KUMAR, MD	WALTON PAIN CENTER 1355 INDEPENDENCE DRIVE	AUGUSTA	GΑ	30901
18860	04/04/2005	NO	YALAMANCHILI, RAMESH, MD	401 SOUTHCREST CIRCLE SUITE 104	SOUTHAVEN	MS	38671
15466	07/29/1997	NO	YATES, NORMAN LEE, III, MD	GENERAL SURGERY CENTER 5102 PAULSON ST # 2	SAVANNAH	GΑ	31405
17456	12/03/2001	NO	YEOMAN, JOHN WESLEY, MD	TITAN RADIOLOGY CONSULTANTS 10 RIDGEWOOD DRIVE	TIFTON	GΑ	31793
17701	07/08/2002	NO	YOSYPIV. IHOR V., MD	THE PEDIATRIC CENTER 15190 COMMUNITY RD STE 270	GULFPORT	MS	39503
13575	07/01/1993	NO	YOUNG, AMY ELISE, MD	BAYLOR COLLEGE OF MEDICINE DEPT OF OB-GYN 1709 DRYDEN, SUITE 1100	HOUSTON	TX	77030
19279	04/10/2006	NO	YOUNGBLOOD, JESS HOWARD, MD	WEST JACKSON FAMILY MEDICINE CLINIC 1815 HOSPITAL DRIVE	JACKŠON	MS	39204
16238	03/08/1999	NO	YOUNGBLOOD, TONYA JOYCE, MD	800 SOUTH CHATFIELD	ENNIS	TX	75119
10753	07/01/1985	NO	YUEN, DANIEL MANKUI, MD	8120 TIMBERLAKE WAY #101	SACRAMENTO	CA	95823
14820	06/03/1996	NO	ZEINO, MERHAF, MD	CUMBERLAND KIDNEY CENTER 99 DOOLEY STREET	CROSSVILLE	TN	38555
18717	10/18/2004	NO	ZELEM, JOHN D. MD	100 HOSPITAL ST., SUITE 100-A	BOONEVILLE	MS	38829
12001	02/13/1989	NO	ZIMMERMAN, RENA BETH, MD	ALLISON RADIATION ONCOLOGY CENTER 803 W MARKET ST	LIMA	ОН	45805
17989	03/17/2003	NO	ZINKUS, TIMOTHY PETER, MD	UNIVERSITY MEDICAL CENTER DEPARTMENT OF RADIOLOGY 2500 N STATE ST	JACKSON	MS	39216

Foertify that the names appearing on this list have not renewed their Mississippi license for the period July 1, 2007 thru June 30, 2008.

EXECUTIVE DIRECTOR

Total number of physicians: 597

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

MEMORANDUM

To:

All Interested Parties

From:

H. Vann Craig, M.D.

Executive Director

Date:

July 12, 2007

Subject: Electronic Prescribing of Legend Drugs

On July 12, 2007, the Board of Medical Licensure approved a waiver of Board regulation, "Regulations Pertaining to Prescribing, Administering and Dispensing of Medication", subsection "Prescription Guidelines - All Medications". The waiver addresses the electronic prescribing of legend drugs.

Every written prescription delivered to a patient, or delivered to any other person on behalf of a patient, must be manually signed on the date of issuance by the physician. This does not prohibit, however, the transmission of electronically telefaxed (but not e-mail) prescriptions for non-controlled drugs to the pharmacy of the patient's choice. Such telefaxed prescriptions shall bear the signature of the prescribing physician and shall be issued in accordance with all other provisions of this section. No prescriptions for brand name or generic equivalents of Nalbuphine Hcl, Carisoprodol, Butalbital compounds, or Tramadol Hcl shall be telefaxed.

The Board's interpretation of the above paragraph is that prescriptions can only be sent electronically from facsimile to facsimile. The Board's waiver will allow the electronical transfer of prescriptions from computer to computer. This waiver will be in effect until such time as the Board has reviewed and modified its current regulations regarding electronic prescribing.

**This does not include the prescribing of controlled substances.

IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

GLYN R. HILBUN, M.D.

THIS MATTER came on regularly for hearing on July 12, 2007, before the Mississippi State Board of Medical Licensure, in response to a request for continuance of the hearing set for this date made by Stan Ingram, Complaint Counsel, as a result of a continuance having been requested and granted in a related matter pending before the Board. The Board was advised that a continuance would enable the related matters to be heard on the same date. After consideration of the matter, the Board finds said motion to be well taken.

IT IS, THEREFORE, ORDERED, that this matter is continued until September 20, 2007, at 9:00 a.m.

SO ORDERED, this the 12th day of July, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH, M.D., J.D.

PRESIDENT

IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

KEVIN SCOTT COOPER, M.D.

THIS MATTER came on regularly for hearing on July 12, 2007, before the Mississippi State Board of Medical Licensure, in response to a request for continuance of the hearing set for this date made by Kevin Scott Cooper, M.D. (hereinafter "Licensee"), through his attorney, Earl Denham. After consideration of the matter, the Board finds Licensee's motion to be well taken.

IT IS, THEREFORE, ORDERED, that this matter is continued until September 20, 2007, at 9:00 a.m.

SO ORDERED, this the 12th day of July, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP *f. MERIDETH, M.D., J.D.

PRESIDENT

NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



MISSISSIPPI SECRETARY OF STATE

Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216 (601) 987-3079 rhonda@msbml.state.ms.us	Specific Legal Authority Authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule_Section 73-43-11 Reference to Rules repealed, amended or suspended by the Proposed Rule: {Insert citation to specific rule(s) repealed, amended or suspended XXXIII. Temporary Training License for Out-of-State Residents
Explanation of the Purpose of the Proposed Rule and This regulation addresses physicians who wish to do an elective	the reason(s) for proposing the rule: rotation through a Missisippi ACGME approved training program.
The Agency Pule Making Pecord for this rule includi	ing any written comments received during the comment period
	public inspection by contacting the Agency at the above address
An oral proceeding was held on this rule:	
Date: Time: Place:	
An oral proceeding was not held on this rule	·
The Agency has considered the written comments and	l the presentations made in any oral proceedings, and
This rule as adopted is without variance from	the proposed rule.
This rule as adopted differs from the propose rather than the substance of the rule.	d rule as there are minor editorial changes which affect the form
the Notice of Proposed Rule Adoption and the c	Proposed Rule Adoption, the logical outgrowth of the contents of

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

August 11, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman **Division Director**

SOS FORM APA 002 Effective Date 07/29/2005

TELEPHONE: (601) 987-3079 FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

July 13, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This regulation addresses physicians who wish to do an elective rotation through a Mississippi ACGME approved training program.

XXXIII. TEMPORARY TRAINING LICENSE FOR OUT-OF-STATE RESIDENTS

An individual enrolled in an out-of-state postgraduate training program wishing to rotate through an ACGME or AOA approved training program within Mississippi, shall not be required to obtain a restricted temporary license provided the rotation lasts no longer than four (4) weeks. However, the individual must submit the following to the Board:

- 1. A completed information form which has been supplied by the Board.
- 2. A letter from the physician's postgraduate training program stating that he or she is going to be participating in a rotation in Mississippi and the duration.
- 3. A letter from the training program in Mississippi stating the physician will be training with them and the duration.
- 4. Verification of a current license (limited or training), permit, or letter from the state in which the individual is enrolled in a training program.
- 5. A licensure fee in the amount of \$50.

The individual may not participate in the Mississippi training program until a valid training license has been issued. The license will be effective the date the individual is to begin the Mississippi rotation and will become null and void the day the individual completes the rotation.

If during the duration of the training, it is determined that the physician may stay longer than four (4) weeks, the temporary training license may be renewed for an additional four (4) weeks. Under no circumstances will the license be renewed after eight (8) weeks. An individual anticipating on rotating through a Mississippi training program for a period longer than eight (8) weeks shall be required to obtain a Restricted Temporary Medical License.

The Board reserves the right to deny issuance of a temporary training license as provided herein based on any of the statutory grounds as enumerated in Mississippi Code, Sections 73-25-29 and 73-25-83.

Adopted July 12, 2007.







STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Mississippi State Board of Medical Licensure

Specific Legal Authority authorizing the promulgatio Rule: {Insert citation to state or federal statute, or rule Section 73-43-11	n of
Reference to Rules repealed, amended or suspended by Proposed Rule: { Insert citation to specific rule(s) repeal amended or suspended XXXIV. Short-Term Training for	•
Out-of State Physicians	}}

c/o Rhonda Freeman	
1867 Crane Ridge Drive, Suite 200-B	Reference to Rules repealed, amended or suspended by the
Jackson, MS 39216	Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended XXXIV. Short-Term Training for
	Out-of State Physicians }
(601) 987-3079	
rhonda@msbml.state.ms.us	
Explanation of the Purpose of the Proposed Rule and this regulation addresses physicians who wish to a	the reason(s) for proposing the rule: {Insert here} ssist out-of-state physicians who wish to expand their
knowledge and expertise by offering short-term train	ning to the out-of-state physician.
This rule is proposed as a Final Rule, and/or a Temp	porary Rule (Check one or both boxers as applicable.)
address. Persons making comments should include the	by addressing written comments to the agency at the above eir name and address, as well as other contact information, and telephone number of the party or parties you represent.
Oral Proceeding: Check one box below:	
An oral proceeding is scheduled on this rule of Place:	n Date: Time:
the above address at least day(s) prior to the	ne oral proceeding you must make a written request to the agency at the proceeding to be placed on the agenda. The request should a well as other contact information; and if you are an agent or or of the party or parties you represent.
will be held if a written request for an oral procest persons. The written request should be submitted (20) days after the filing of this notice of propose	ale. Where an oral proceeding is not scheduled, an oral proceeding eding is submitted by a political subdivision, an agency or ten (10) to the agency contact person at the above address within twenty d rule adoption and should include the name, address and telephone if you are an agent or attorney, the name, address and telephone
Economic Impact Statement: Check one box below:	
The agency has determined that an economic i	mpact statement is not required for this rule, or
The concise summary of the economic impact	statement required is attached.
The entire text of the Proposed Rule including the text of a	any rule being amended or changed is attached.
Date Rule Proposed: July 12 2007	Proposed Effective Date of Rule: 30 days from final filing.

SOS FORM APA 001 Signature and Title of Person Submitting Rule for Filing Effective Date 07/29/2005

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: July 13, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This is a new regulation. It allows physicians who wish to assist out-of-state physicians in expanding professional knowledge and expertise by offering short-term training to the out-of-state physician.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

XXXIV. SHORT-TERM TRAINING FOR OUT-OF-STATE PHYSICIANS

The Board is aware that there are Mississippi physicians assisting out-of-state physicians in expanding professional knowledge and expertise by offering short-term training to the out-of-state physician. The Mississippi physician wishing to offer this training to the unlicensed out-of-state physician(s) must have their short-term training program approved by the Board.

The Mississippi physician must submit a detailed letter stating the purpose of the short-term training program, the objectives of the course, approximately how long the course will last, and any supporting documentation that would assist the Board in determining the approval status of the program.

An individual wishing to attend the Board approved short-term training is not required to obtain a permanent Mississippi medical license; however, the individual must submit the following to the Board:

- 1. A completed information form which has been supplied by the Board.
- 2. A letter from the mentor of the Board approved training program stating that the applicant is going to be participating in the short-term training program and the duration.
- 3. Verification of a current unrestricted permanent license from the state in which the individual is currently practicing.
- 5. A permit fee in the amount of \$25.

The individual may not participate in the short-term training program until a valid training permit has been issued. The permit will be effective the date the individual is to begin the training and will become null and void the day the individual completes the training.

A short-term training permit is typically valid for two to three days; however, it can be issued up to fifteen (15) days. If during the duration of the training, it is determined that the physician may stay longer than fifteen (15) days, the temporary training permit may be renewed for an additional (15) days. Under no circumstances will the permit be renewed after thirty (30) days. An individual anticipating training for a period longer than thirty (30) days will be required to obtain a permanent Mississippi medical license.



MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE 1867 CRANE RIDGE DRIVE, SUITE 200-B JACKSON, MISSISSIPPI 39216 (601) 987-3079

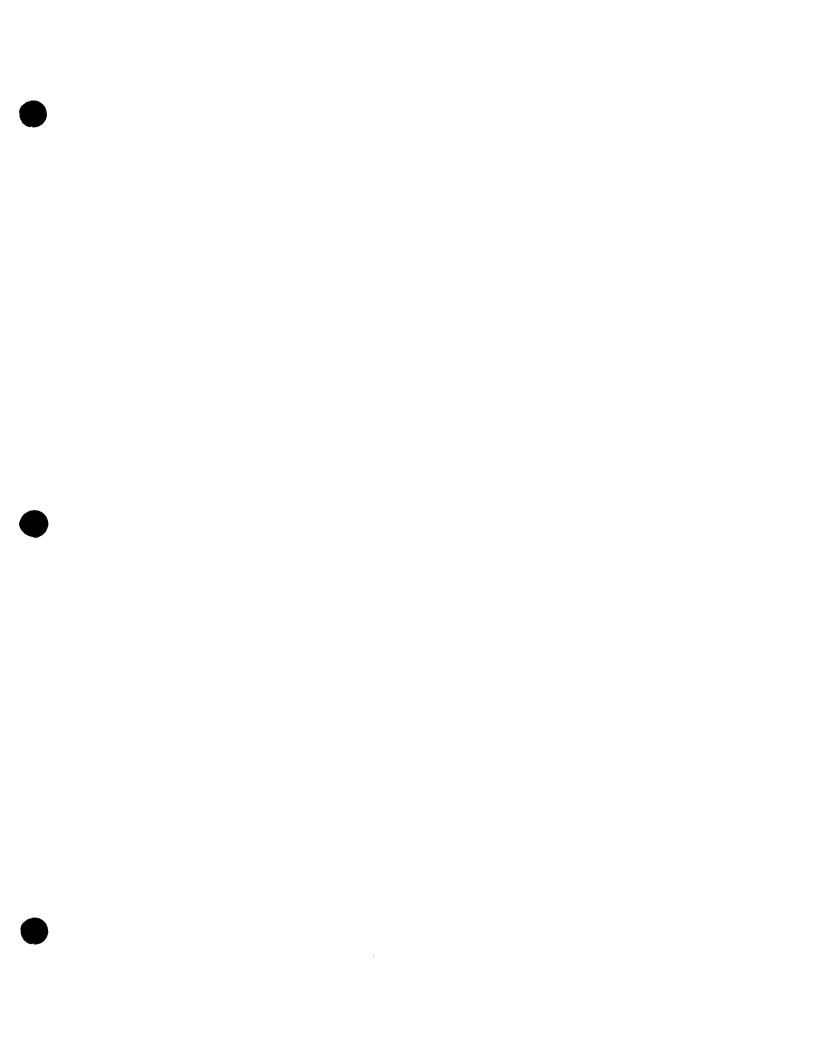
www.msbml.state.ms.us

Short-Term Training Permit

Na	me:			Date of Birth:	
Mailing Address:		Current Practice Location:			
			·		
Mi	ssissippi Training Location:				
Tel	ephone Number:		Email Address:		
Cu	rrent State of Licensure:	License Nun	nber:	Type of License	e:
1.	Have you ever been convicted of a fel	ony?			□ Yes □ No
2.	Have you ever been convicted of a cripractice of medicine?	me or offense ((felony or misdemeano	r) related to the	□ Yes □ No
3.	3. Have you ever been convicted of any violation of a state or federal law relating to controlled substances?			□ Yes □ No	
4.	4. Are any charges against you for violation of state or federal drug laws currently pending in any court?			□ Yes □ No	
5. Have you ever been denied a state or federal controlled substances certificate or have had such a certificate revoked, restricted, conditioned or curtailed?			□ Yes □ No		
6.	6. Have you ever surrendered a state or federal controlled substance certificate for any reason?			□ Yes □ No	
7.	7. Has your certificate of qualification or license to practice medicine in any state been suspended, revoked, restricted, conditioned, curtailed or voluntarily surrendered under threat of suspension or revocation?			□ Yes □ No	
8.	8. Have your staff privileges at any hospital or health care facility been revoked, suspended, curtailed, limited or placed under conditions restricting your practice?			□ Yes □ No	
9.	9. Have you ever resigned from the medical staff of any hospital or health care facility while an investigation or disciplinary proceeding was being conducted or pending?			□ Yes □ No	
10.	10. Have you ever been denied a certificate of qualification or license to practice medicine in any state or has your application for a certificate of qualification or license to practice medicine been withdrawn under threat of denial?			□ Yes □ No	
11.	Are you now, or have you ever used a addiction-forming or addiction-sustain practice medicine with reasonable skil	ning liability to	the extent it affects you		□ Yes □ No

12. Have you ever prescribed to yourself any controlled substance or other drug having addiction-forming or addiction-sustaining liability, or obtained said medications for your own use and consumption through any sources, other than by prescription or order of a licensed physician?	□ Yes □ No				
13. Are you now, or have you ever consumed alcohol or other intoxicating liquors to the extent it affects your ability to practice medicine with reasonable skill and safety to patients?	□ Yes □ No				
14. If your answer to any one of the three preceding questions is "yes", are you currently participating in a supervised rehabilitation program or professional assistance program which monitors you in order to assure that you are not engaging in illegal use of controlled substances or other drugs having addiction-forming or addiction-sustaining liability?	□ Yes □ No				
15. Have you ever been diagnosed as having, or have you ever been treated for, pedophilia, exhibitionism or voyeurism, bipolar disorder, sexual disorder, schizophrenia, paranoia or other psychiatric disorder?	□ Yes □ No				
16. Have you ever had a judgement rendered against you, or action settled relating to the performance of your professional service?	□ Yes □ No				
17. Have you ever been denied medical malpractice liability insurance?	□ Yes □ No				
18. To your knowledge, have you ever been or are you now, the subject of an investigation or disciplinary proceeding by any licensing Board/Agency as of the date of this application?	□ Yes □ No				
19. Have you ever been arrested, other than minor traffic citations?	□ Yes □ No				
I,					
Date Applicant's Signature					
County of					
State of					
SWORN to and subscribed before me this day of	, in the year				
of					
(SEAL) Notary Public					
My Commission Expires:					

	Permit Number: Issue Date:	
OFFICE USE ONLY:	Expiration Date: Date Processed:	



MINUTES EXECUTIVE COMMITTEE MEETING MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE JULY 31, 2007

MEMBERS PRESENT:

Philip T. Merideth, M.D., J.D., Jackson, President Don A. Gibson, M.D., Richland, Vice President

ALSO PRESENT:

H. Vann Craig, M.D., Director Rhonda Freeman, Bureau Director, Licensure Division Thomas Washington, Bureau Director, Investigative Division Sherry Harris, Staff Officer

NOT PRESENT:

William S. Mayo, D.O., Oxford, Secretary

The Executive Committee of the Mississippi State Board of Medical Licensure met on Tuesday, July 31, 2007, at 8:30 a.m. in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

AUGUSTUS P. SORIANO, M.D., PHILADELPHIA, MISSISSIPPI MEDICAL LICENSE NUMBER 06089, DETERMINATION OF REASONABLE CAUSE AND ORDER OF AUTHORITY TO INSPECT AND COPY RECORDS

Thomas Washington, Bureau Director, Investigative Division, presented to the Executive Committee those facts necessary to make a determination of reasonable cause pursuant to Miss. Code Ann. 73-25-28, to inspect records of Dr. Soriano. After questioning Mr. Washington, the Executive Committee unanimously agreed that reasonable cause did exist and made the decision to allow Ms. Leslie Ross, Board Investigator, and Dr. Craig approval to obtain and copy records necessary for the investigation.

EXECUTIVE COMMITTEE MINUTES July 31, 2007 Page 2

PERSONAL APPEARANCE BY JACQUELINE MOSES, M.D., JACKSON, APPLICANT

Dr. Craig advised that Dr. Moses had been requested to appear before the Executive Committee to address concerns discovered during the approval process of her application concerning education and post graduate training.

Dr. Moses joined the meeting but was not represented by legal counsel. She executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference.

After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. Merideth, and carried unanimously to issue Dr. Moses a full unrestricted medical license.

ADJOURNMENT

There being no further business, the meeting adjourned at 9:05 a.m.

PHILIP T. MERIDETH, M.D., J.D.

President

Minutes taken and transcribed by Sherry Harris Staff Officer July 31, 2007

AGREEMENT TO APPEAR INFORMALLY BEFORE EXECUTIVE COMMITTEE

before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal, no disciplinary action will be taken without my express written consent. In so doing, I have been advised and understand the following:

- During the meeting, the Executive Committee may or may not be represented by legal counsel. Notwithstanding, I understand that I have a right, if I so choose, to employ legal counsel and have counsel present during the informal meeting.
- I authorize the Committee Members to review and examine any statements, documentary evidence, or materials concerning the allegations during my informal appearance.
- 3. Because the purpose of my appearance is to avoid a hearing before the Board, I agree that presentation to and consideration by the Committee of any facts, matters, and documents pertaining to my case shall not unfairly or illegally prejudice the Committee members from further participation or consideration in the event a formal disciplinary hearing is later conducted. Stated differently, in the event the pending matter is not resolved following my appearance before the Committee, I will not object to any of the Committee members from further participating in subsequent meetings or hearings that may be conducted in relation to this matter.
- 4. By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:

with legal counsel present (name of counsel:)
without legal counsel present
EXECUTED, this the 31 st day of July , 2007.
March
$X_1 = X_1 $

MINUTES EXECUTIVE COMMITTEE MEETING MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE AUGUST 16, 2007

MEMBERS PRESENT:

Philip T. Merideth, M.D., J.D., Jackson, President Don A. Gibson, M.D., Richland, Vice President William S. Mayo, D.O., Oxford, Secretary

ALSO PRESENT:

H. Vann Craig, M.D., Director Thomas Washington, Bureau Director, Investigative Division Sherry Harris, Staff Officer

The Executive Committee of the Mississippi State Board of Medical Licensure met on Thursday, August 16, 2007, at 8:30 a.m. in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

PAUL WILLIAMSON PIERCE, III, M.D., VICKSBURG, MISSISSIPPI MEDICAL LICENSE NUMBER 06454, DETERMINATION OF REASONABLE CAUSE AND ORDER OF AUTHORITY TO INSPECT AND COPY RECORDS

Dr. Craig presented to the Executive Committee those facts necessary to make a determination of reasonable cause pursuant to Miss. Code Ann. 73-25-28, to inspect records of Dr. Pierce. After questioning Dr. Craig and Mr. Washington, the Executive Committee unanimously agreed that reasonable cause did exist and made the decision to allow Mr. Washington, Bureau Director, Investigative Division, and Dr. Craig approval to obtain and copy records necessary for the investigation.

OTHER BUSINESS

Dr. Merideth addressed the Executive Committee and advised that statute requires that a physician be a member on the Board of Nursing. Dr. Merideth advised that he is currently the Mississippi Board of Medical Licensure's representative and has served for two (2) years in this position. After a brief discussion, Dr. Merideth appointed Dr. Gibson and Dr. Mayo to serve on a nominating committee that will select a candidate to be nominated at the September Board meeting to fill this position on the Board of Nursing.

EXECUTIVE COMMITTEE MINUTES August 16, 2007 Page 2

ADJOURNMENT

There being no further business, the meeting adjourned at 8:45 a.m.

PHILIP T. MERIDETH, M.D., J.D.

President

Minutes taken and transcribed by Sherry Harris Staff Officer August 16, 2007

SEPTEMBER 2007

XXI INT (E)

MINUTES EXECUTIVE COMMITTEE MEETING MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE SEPTEMBER 19, 2007

MEMBERS PRESENT:

Philip T. Merideth, M.D., J.D., Jackson, President Don A. Gibson, M.D., Richland, Vice President William S. Mayo, D.O., Oxford, Secretary

ALSO PRESENT:

H. Vann Craig, M.D., Director Ellen O'Neal, Assistant Attorney General Rhonda Freeman, Bureau Director, Licensure Division Thomas Washington, Bureau Director, Investigative Division Frances Scott, Special Projects Officer, Investigative Division Sherry Harris, Staff Officer

The Executive Committee of the Mississippi State Board of Medical Licensure met on Wednesday, September 19, 2007, at 1:00 p.m. in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi. Dr. Gibson arrived at 1:15 p.m.

GREGORY MCNAMARA, M.D., AND JOSE E. MERCED, M.D., APPLICANTS GRADUATING FROM UNACCREDITED MEDICAL SCHOOL - SAN JUAN BAUTISTA SCHOOL OF MEDICINE, CAGUAS, PR

Dr. Craig advised the Executive Committee that licensure applications have been received from Drs. McNamara and Merced. The problem is that both of the physicians graduated from the medical school prior to it receiving accreditation by the Liaison Committee on Medical Education (LCME) in 2007.

After a brief discussion, the Executive Committee unanimously agreed to refer the matter to the Full Board and propose that the Board adopt a policy that is explicit in stating that the school must be accredited at the time the applicant graduates from the school.

JOHN E. HENRIKSEN, M.D., MAGNOLIA, AR, MISSISSIPPI MEDICAL LICENSE NUMBER 17897

For informational purposes only, Dr. Craig advised that the Executive Committee had discussed Dr. Henriksen at the May 16, 2007, meeting. Dr. Craig advised that since that time the Board had received Arkansas' Order. After discussing the Arkansas Board Order, motion was made by Dr. Merideth, seconded by Dr. Mayo, and carried unanimously to take the matter before the Full Board for a determination.

PROPOSED AMENDMENT CHANGES TO REGULATION CONCERNING THE PRACTICE OF RADIOLOGIST ASSISTANTS

For informational purposes only, Dr. Craig advised that an amended regulation would be presented to the Full Board to add additional verbiage and to bring radiologist assistants consistent with physician assistants in requiring them to appear and discuss their protocol with their supervising physician prior to obtaining practice approval from the Board.

LETTER FROM MISSISSIPPI PROFESSIONALS HEALTH COMMITTEE REQUESTING APPROVAL OF EXAMINING COMMITTEE MEMBERS

Dr. Craig advised that the Board had received a letter from Dr. Mel Flowers, Jr., Chairman of the Mississippi Professionals Health Committee (MPHC), reporting the appointment of Dr. Joe Wayne Walker to another term, and the appointment of Dr. George Wilkerson to replace Dr. Michael Byers as a member. Dr. Flowers noted that Dr. Byers will be retained in an advisory capacity.

Motion was made by Dr. Mayo, seconded by Dr. Gibson, and carried to approve MPHC's recommendations.

REQUEST FROM DIVISION OF MEDICAID

Dr. Craig advised that the Board had received a letter from the Division of Medicaid requesting that we provide them with a unique identifier such as the physician's social security number for their use in their verification process. Dr. Craig advised that the Board's policy has been <u>not</u> to provide this information due to the confidentiality that the Board has guaranteed to its licensees.

After a brief discussion, the Executive Committee agreed not to provide social security numbers but offer the Division of Medicaid NPI numbers. Motion was made by Dr. Mayo, seconded by Dr. Gibson, and carried to draft a letter respectfully declining making social security numbers available and offering NPI numbers instead. Ms. Freeman, Bureau Director, Licensure Division, will draft a letter to the Division of Medicaid advising the Board's decision.

REQUEST FROM THE FEDERATION OF STATE MEDICAL BOARDS

Dr. Craig advised that a letter had been received from the Federation of State Medical Boards (FSMB) offering credentialing assistance to physician assistant applicants through the Federation Credentials Verification Service (FCVS).

After a brief discussion, motion was made by Dr. Merideth, seconded by Dr. Mayo, and carried unanimously to approve FCVS for physician assistant applicants but to make participation strictly voluntary and not a requirement for licensure.

MISSISSIPPI STATE MEDICAL ASSOCIATION MEMBERSHIP APPLICATIONS

Dr. Craig advised that the Mississippi State Medical Association (MSMA) had requested that we make available membership applications to their organization.

After a brief discussion, motion was made by Dr. Merideth, seconded by Dr. Mayo, and carried unanimously to provide a link on our website to support and promote organized medicine within the state of Mississippi for interested associations or societies.

UPDATE ON MEDICAID PRESCRIPTIONS ON TAMPER-RESISTANT PADS

For informational purposes only, Dr. Craig briefly reviewed an article for Medicaid prescription requirements. Dr. Craig advised that there are three (3) requirements to comply with the Medicaid tamper-resistant prescription pad law and states must put one (1) of the three (3) in place by October 1, 2007, and have all three (3) in place by October 1, 2008.

UPDATE ON CHARLES KNIGHT, M.D., JACKSON, MS, APPLICANT

For informational purposes only, Dr. Craig advised that the Board had received a Notice of Appeal concerning Dr. Knight. Dr. Craig said the appeal was relative to charging investigative costs that Dr. Knight feels do not apply to him since he is an applicant, and clarification of the clinical skills assessment.

After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. Merideth, and carried unanimously to request an Attorney General's Opinion of the Board's authority to assess costs following a disciplinary proceeding.

UPDATE ON PATRICK SEWELL, M.D., JACKSON, MISSISSIPPI MEDICAL LICENSE NUMBER 14876, LEVEL II OFFICE BASED SURGERY

For informational purposes, Dr. Craig advised that Dr. Sewell had closed his office due to not being able to secure a hospital transfer agreement and being unable to comply with all the requirements for Level II Office Based Surgery.

HANDLING OF MALPRACTICE REPORTS

For informational purposes only, Dr. Craig briefly covered the current handling of malpractice reports.

After a brief discussion, motion was made by Dr. Merideth, seconded by Mayo, and carried unanimously to authorize the Executive Director to review and investigate on a case-by-case basis any potential competence issues.

THE EXECUTIVE COMMITTEE RECESSED AT 1:50 P.M. AND RECONVENED AT 2:05 P.M.

LIFELINE SCREENING

Dr. Craig advised that LifeLine Screening came before the Board in April of 2003 and was granted temporary approval for screening in Mississippi. Dr. Craig advised the Executive Committee of several issues that had come to light in a conversation that he had with their attorney, Barry Cockrell.

After a brief discussion, the Executive Committee unanimously agreed to invite LifeLine Screening to make a presentation before the Full Board to provide an update of their program.

FEDERATION OF STATE MEDICAL BOARDS REQUEST FOR PRESENTATION AT NOVEMBER BOARD MEETING

For informational purposes only, Dr. Craig advised that the Federation had requested time to provide a presentation at our November Board Meeting.

NOTICE OF CLERK'S MOTION TO DISMISS CASE FILED BY LANE C. ROLLING, D.P.M.

For informational purposes only, Dr. Craig advised that the Board had received information from the Board's attorney, Stan Ingram, advising that the Chancery Clerk sent a notice advising the matter would be dismissed pursuant to court rules on no action of record on the case.

LAPTOPS FOR EXECUTIVE COMMITTEE AND FULL BOARD MEETINGS

Dr. Craig discussed using laptops for Executive and Full Board meetings and sending out diskettes with all the information. After a brief discussion, it was suggested to start by testing laptops with the Executive Committee.

IQH CONTRACT

Dr. Craig briefly discussed a contract between MSBML and IQH (Information and Quality Healthcare) and requested approval to sign the contract. Dr. Craig advised that IQH is utilized to review patient charts for investigations to determine any quality of care issues.

After a brief discussion, motion was made by Dr. Mayo, and seconded by Dr. Gibson to approve the Board's entering into the agreement. Dr. Merideth abstained as he has recently been appointed as the Chairman of the Board for IQH.

OTHER BUSINESS

Dr. Craig advised that a treatment facility by the name of A Bridge to Recovery had requested Board approval. A Bridge to Recovery had previously been asked to provide the Board with a presentation and due to extenuating circumstances had cancelled. It has been discovered that the Mississippi Professionals Health Program (MPHP) referred a physician to them for treatment.

After a brief discussion, motion was made by Dr. Mayo, seconded by Dr. Gibson, and carried unanimously to make an exception on the physician referred and extend them an invitation to make a presentation before the Full Board at the November meeting. A letter will be sent to MPHP advising them that A Bridge to Recovery is not approved and to discontinue referrals until after the Board rules on the matter.

Dr. Craig advised that he had a meeting with several individuals from the University Medical Center (UMC) and they expressed concerns about their relationship with the Board. UMC has recently made changes to their monitoring process and this should alleviate licensure issues in the future.

Dr. Craig advised that UMC also is seeking advice on a license for Foreign Medical graduates to come and teach and practice at UMC and have their time after five (5) years to count towards their residency. After a brief discussion, Ms. O'Neal, Assistant Attorney General, advised she would look into this matter and advise the Board on proper handling.

For informational purposes only, Dr. Craig advised that he had a meeting with Carl Welch, M.D., concerning distance issues and the number of nurse practitioners he is supervising.

For informational purposes only, Dr. Craig distributed a copy of §75-25-83c addressing concerns of hospitals not reporting disciplinary action taken on medical staff of a hospital to MSBML. After a brief discussion, the Executive Committee agreed that Dr. Craig should supply the Mississippi Hospital Association with the statute and ask that they remind hospitals of the requirement.

Dr. Gibson, serving as Chair of the Board's Nominating Committee, advised that the Nominating Committee plans to nominate Virginia Crawford, M.D., as the Board's representative on the Board of Nursing, replacing Philip Merideth, M.D., J.D., at the Full Board Meeting on September 20, 2007.

For informational purposes only, Dr. Craig advised that Dr. Merideth and the Board had received another letter from W. Joseph Burnett, M.D., concerning his contract with MPHP. After a brief discussion, the Executive Committee unanimously agreed to send another letter to Dr. Burnett and appointed Dr. Craig and Dr. Merideth to meet and formulate the Board's response.

For informational purposes only, Dr. Craig advised that the Board recently received information from the Kentucky Board of Medical Licensure concerning William Elmore Cassidy Tiemann, M.D., who currently has an active Mississippi license. After a brief discussion, the Executive Committee unanimously agreed to offer Dr. Tiemann a Consent Order mirroring Kentucky's actions and agreeing not to perform any act which would constitute the "practice of medicine," in the state of Mississippi.

REVIEW OF SEPTEMBER 20, 2007, BOARD AGENDA

Dr. Craig briefly reviewed the agenda for tomorrow's Board meeting.

ADJOURNMENT

There being no further business, the meeting adjourned at 3:30 p.m.

PHILIP T. MERIDETH, M.D., J.D.

President

Minutes taken and transcribed by Sherry Harris Staff Officer September 19, 2007

BOARD MINUTES MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE SEPTEMBER 20, 2007

The regularly scheduled meeting of the Mississippi State Board of Medical Licensure was held on Thursday, September 20, 2007, in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

The following members were present:

Philip T. Merideth, M.D., J.D., Jackson, President Don A. Gibson, M.D., Richland, Vice President William S. Mayo, D.O., Oxford, Secretary Larry B. Aycock, M.D., McComb Dewitt G. Crawford, M.D., Louisville Virginia M. Crawford, M.D., Hattiesburg A. Wallace Conerly, M.D., Jackson S. Randall Easterling, M.D., Vicksburg William B. Harper, D.O., Greenwood

Also present:

H. Vann Craig, M.D., Director Stan T. Ingram, Complaint Counsel for the Board Ellen O'Neal, Assistant Attorney General Rhonda Freeman, Bureau Director, Licensure Division Thomas Washington, Bureau Director, Investigative Division Frances Scott, Special Projects Officer, Investigative Division Sherry Harris, Staff Officer Cecil R. Burnham, Jackson, Consumer Health Committee

Not present:

Wesley Breland, Hattiesburg, Consumer Health Committee Martha Thompson, Oxford, Consumer Health Committee

The meeting was called to order at 9:05 a.m. by Dr. Merideth, President. The invocation was given by Dr. Mayo and the pledge was led by Dr. Harper. Dr. Merideth welcomed James Moody, Court Reporter. Dr. Merideth extended a welcome to all visitors present at the meeting.

APPROVAL OF CERTIFICATION OF MISSISSIPPI LICENSES TO OTHER ENTITIES FOR THE PERIOD JULY 01, 2007, THROUGH AUGUST 31, 2007

One hundred fifty-five (155) licenses were certified to other entities for the period July 01, 2007, through August 31, 2007. Motion was made by Dr. D. Crawford, seconded by Dr. Easterling, and carried unanimously to approve these certifications.

APPROVAL OF LICENSES ISSUED FOR THE PERIOD JULY 01, 2007, THROUGH AUGUST 31, 2007

One hundred six (106) licenses were issued for the period July 01, 2007, through August 31, 2007. Motion was made by Dr. D. Crawford, seconded by Dr. Easterling, and carried unanimously to approve these licenses.

REVIEW OF MINUTES OF THE SPECIAL EXECUTIVE COMMITTEE HEARING DATED JUNE 29 & 30, 2007, MINUTES OF THE EXECUTIVE COMMITTEE MEETING DATED JULY 11, 2007, MINUTES OF THE BOARD MEETING DATED JULY 12, 2007, MINUTES OF THE SPECIAL EXECUTIVE COMMITTEE MEETING DATED JULY 31, 2007, AND MINUTES OF THE SPECIAL EXECUTIVE COMMITTEE MEETING DATED AUGUST 16, 2007

Minutes of the Special Executive Committee Hearing dated June 29 & 30, 2007, Minutes of the Executive Committee Meeting dated July 11, 2007, Minutes of the Board Meeting dated July 12, 2007, Minutes of the Special Executive Committee Meeting dated July 31, 2007, and Minutes of the Special Executive Committee Meeting dated August 16, 2007, were reviewed. Dr. Mayo moved for approval of the minutes as submitted. Dr. Gibson seconded the motion, and it carried unanimously.

REPORT OF SEPTEMBER 19, 2007, EXECUTIVE COMMITTEE MEETING

Dr. Craig briefly reported on the September 19, 2007, Executive Committee meeting. Dr. Craig advised that the Executive Committee had deferred several issues to the Full Board for discussion and/or approval.

Dr. Craig advised that the Board had received applications from two (2) physicians that graduated from an unaccredited medical school (San Juan Bautista, PR) prior to the medical school receiving accreditation by the Liaison Committee on Medical Education (LCME) in 2007. Dr. Craig advised that the Executive Committee proposed that the Board adopt a policy that is explicit in stating that the school must be accredited at the time the applicant graduates.

After a brief discussion, Dr. Aycock advised that the Board needs to draft a policy or change the current regulation to address this matter. Dr. Easterling suggested that the current regulation be changed to reflect that as a requirement for licensure, an applicant's medical school must be accredited at time of the applicant's graduation. Ms. Freeman, Bureau Director, Licensure Division, will notify the physicians of the Board's decision and also work on proposed changes to our regulation.

Dr. Craig advised that the Executive Committee discussed a situation regarding a Mississippi licensed physician, John Henriksen, M.D., concerning an order that he is currently under with the Arkansas Board.

After a brief discussion of the Order, motion was made by Dr. D. Crawford, seconded by Dr. Easterling, and carried unanimously to invite Dr. Henriksen to appear before the Executive Committee and to request that Arkansas' Professionals Health Program send updates for our review.

Dr. Craig presented other informational items, which are reflected in the Executive Committee Minutes. Motion was made by Dr. D. Crawford, seconded by Dr. Conerly, and carried unanimously to approve the actions of the Executive Committee.

REPORTS FROM COMMITTEES

Consumer Health - Mr. Breland (Chair), Ms. Thompson, Mr. Burnham

In Mr. Breland's absence, Mr. Burnham advised there was no new information to report.

Dr. Craig recognized Mr. Burnham with a plaque honoring his faithful service to the Board since September 2004. Dr. Craig advised that Mr. Burnham had agreed to accept another term as a Consumer Health Member.

Education & Workforce - Dr. Conerly (Chair), Dr. D. Crawford, Dr. Mayo

Dr. Conerly advised that he and Dr. D. Crawford had attended a meeting at the Department of Health for the Mississippi Healthcare Workforce.

Scope of Practice - Dr. Merideth (Chair), Dr. Easterling, Dr. Aycock

Dr. Merideth reported on the Expanded Role Joint Committee between the Board of Nursing and MSBML on Wednesday, September 19, 2007. Dr. Merideth advised that the Joint Committee had agreed to present proposed language to the Board for adoption concerning Botox use by nurse practitioners.

After a brief discussion, Dr. Aycock and Dr. Easterling objected to stating "including off-label" in the language. Jane Tallant, RN, MSN, was present at the meeting and stated that she agrees with the editorial change requested by Dr. Easterling and Dr. Aycock.

Motion was made by Dr. Easterling, seconded by Dr. Aycock, and carried unanimously to approve the proposed policy with the editorial changes. A copy of the proposed policy is attached hereto and incorporated by reference.

Professional Health Program - Dr. Gibson (Chair), Dr. Mayo, Dr. Merideth

Dr. Gibson advised there was no new information to report.

Rules, Regulation & Legislative - Dr. Easterling (Chair), Dr. D. Crawford, Dr. Harper

Dr. Easterling advised there was no new information to report.

Ethics - Dr. Merideth (Chair), Dr. V. Crawford, Dr. Conerly

Dr. Merideth reported that the Ethics Committee met earlier today to discuss a proposal concerning the sale of health related goods from a physician's office and agreed that the matter needs further consideration. Plans are to report at the next Board meeting.

Electronic Medical Records - Dr. Aycock (Chair), Dr. V. Crawford, Dr. Mayo

Dr. Aycock advised that the Electronic Medical Records Committee had worked on language to amend the Board's current regulation to allow electronic transmissions of prescriptions. Dr. Aycock reviewed the proposed changes.

After a brief discussion, motion was made by Dr. Mayo, seconded by Dr. Gibson, and carried unanimously of the Board's intent to adopt the amended regulation concerning prescribing, administering and dispensing of medication. A copy of the proposed amendment is attached hereto and incorporated by reference. The proposed amendment will be filed with the Secretary of State under the Administrative Procedures Act.

Nominating Committee - Dr. Gibson (Chair), Dr. Mayo

Dr. Gibson reported that the Nominating Committee was recommending that Dr. V. Crawford replace Dr. Merideth as the Board's representative to the Board of Nursing. There being no objections, Dr. V. Crawford was unanimously approved for this position.

HEARING IN THE CASE OF CHARLES S. KNIGHT, M.D., REQUESTING REINSTATEMENT OF LICENSURE

Stan Ingram, Complaint Counsel for Board, addressed the Board and advised that neither Dr. Knight nor his attorney, Joel W. Howell, III, were present. Mr. Ingram advised that Mr. Howell had requested to appear to appeal a portion of the Board's decision from the June 29 & 30, 2007, hearing. Mr. Ingram explained that there was a communication problem and requested a continuance until the November 8, 2007, Board meeting.

Motion was made by Dr. Gibson, seconded by Dr. Mayo, and carried unanimously to grant a continuance to Dr. Knight until the November 8, 2007, Board meeting. The Order of Continuance is attached hereto and incorporated by reference.

HEARING IN THE CASE OF GLYN R. HILBUN, M.D., MADISON, MISSISSIPPI MEDICAL LICENSE NUMBER 04679

HEARING IN THE CASE OF KEVIN S. COOPER, M.D., PASCAGOULA, MISSISSIPPI MEDICAL LICENSE NUMBER 13038

HEARING IN THE CASE OF HAROLD T. COULTER, M.D. OCEAN SPRINGS, MISSISSIPPI MEDICAL LICENSE NUMBER 14334

HEARING IN THE CASE OF RAYMOND HARRON, M. D., BRIDGEPORT, WV, MISSISSIPPI MEDICAL LICENSE NUMBER 14223

HEARING IN THE CASE OF ANDREW W. HARRON, D.O, KENOSHA, WI, MISSISSIPPI MEDICAL LICENSE NUMBER 17572

Dr. Merideth delegated the responsibility of ruling on procedural and evidentiary issues to Ms. O'Neal, Assistant Attorney General, as allowed in the Board's **Rules of Procedure, Formal Hearing, 1102**.

Mr. Ingram advised the Board that he had filed a motion to Consolidate Hearings concerning the five (5) physicians. Mr. Ingram also advised that attorneys for Dr. Coulter, Dr. R. Harron, and Dr. A. Harron had all requested continuances and all three (3) attorneys agreed that they would pose no objection with the Board conducting the Hilbun and Cooper hearings separately.

After a brief discussion, motion was made by Dr. Conerly, seconded by Dr. Easterling, and carried unanimously to grant continuances to Dr. Coulter, Dr. R. Harron, and Dr. A. Harron until the November 8, 2007, Board meeting. The Orders of Continuance are attached hereto and incorporated by reference.

Mr. Ingram introduced Ms. Cynthia Speetjens as legal counsel for Glyn Hilbun, M.D., and Earl Denham as legal counsel for Kevin Cooper, M.D.

After a brief discussion and a request from the defense attorneys to leave the record open in order for them to have the right to cross exam the other physicians involved, which was opposed by Mr. Ingram, there was additional discussion about granting continuances to Drs. Hilbun and Cooper. Ms. Speetjens and Mr. Denham advised that it was their understanding that all five (5) cases were to be heard today. Motions from Ms. Speetjens and Mr. Denham to grant continuances for Dr. Hilbun and Dr. Cooper were unanimously denied.

Mr. Ingram addressed the Board and recommended that the Board consider going into Executive Session to resolve handling of the matter.

After further discussion on whether to proceed with today's hearings, Dr. Merideth requested that the Board raise their hands for all in favor of consolidating the hearings for Dr. Hilbun and Dr. Cooper and proceed today. The vote was unanimous.

THE BOARD RECESSED AT 10:20 A.M. AND RECONVENED AT 10:35 A.M.

Dr. Merideth called the session back in order.

11:00 A.M. TO 11:05 A.M. BREAK FOR COURT REPORTER

Dr. Merideth called the session back in order.

DR. EASTERLING EXITS THE MEETING AT 11:35 A.M. AND RETURNS AT 11:39 A.M.

THE BOARD RECESSED FOR LUNCH AT 12:00 NOON AND RETURNED AT 12:45 P.M.

Dr. Merideth called the session back in order.

THE BOARD RECESSED AT 1:30 P.M. AND RETURNED AT 1:40 P.M.

Dr. Merideth called the session back in order.

THE BOARD RECESSED AT 2:40 P.M. AND RETURNED AT 2:50 P.M.

Dr. Merideth called the session back in order.

DR. EASTERLING EXITS THE MEETING AT 4:55 P.M. AND RETURNS AT 4:58 P.M.

THE BOARD RECESSED AT 5:05 P.M. AND RETURNED AT 5:25 P.M.

Dr. Merideth called the session back in order.

Following testimony by the Board's witness, Danny Mulholland, both Ms. Speetjens and Mr. Denham made a request to dismiss the cases due to no clear and convincing evidence of guilt of the two (2) parties.

Mr. Ingram objected and stated that he believes that both physicians have acknowledged that they made mistakes and there is evidence to show burden of proof.

Motion was made by Dr. Gibson, seconded by Dr. V. Crawford, and carried unanimously to consider going into Executive Session. With a motion by Dr. Mayo, seconded by Dr. Conerly, the Board went into Executive Session.

Upon motion by Dr. Harper, seconded by Dr. Gibson, and carried unanimously, the Board came out of Executive Session at which time Dr. Merideth requested that Dr. Mayo present the Board's decision. Dr. Mayo advised that in response to defense counsels' motion to dismiss the charges against Dr. Hilbun and Dr. Cooper that the Board's decision is:

Count I - Dismiss
Count II - Deny dismissal
Count III - Dismiss
Count IV - Dismiss

MS. O'NEAL EXITED THE MEETING AT 6:30 P.M. AND DID NOT RETURN

Motion was made by Dr. Aycock, seconded by Dr. Easterling, and carried unanimously to proceed with the hearings.

THE BOARD RECESSED FOR DINNER AT 8:05 P.M. AND RETURNED AT 8:30 P.M.

Dr. Merideth called the session back in order.

THE BOARD RECESSED AT 9:35 P.M. AND RETURNED AT 9:45 P.M.

Dr. Merideth called the session back in order.

Motion was made by Dr. D. Crawford, seconded by Dr. Mayo, and carried unanimously to consider going into Executive Session. With a motion by Dr. D. Crawford, seconded by Dr. Gibson, the Board went into Executive Session.

Upon motion by Dr. Gibson, seconded by Dr. Harper, and carried unanimously, the Board came out of Executive Session at which time Dr. Merideth requested that Dr. Mayo present the Board's decision. Dr. Mayo advised that in the hearing in the case of Kevin S. Cooper, M.D., and Glyn R. Hilbun, M.D., the verdict is guilty of Count II. Dr. Mayo advised that both Dr. Cooper and Dr. Hilbun would be issued a public reprimand. Copies of the Board's Orders are attached hereto and incorporated by reference.

A verbatim account of the proceedings from all witnesses was recorded by James Moody, Court Reporter.

PROPOSED AMENDMENT TO THE REGULATION CONCERNING THE PRACTICE OF RADIOLOGIST ASSISTANTS

Dr. Craig discussed the proposed amendment to the current regulation and the need to add additional verbiage to bring radiologist assistants consistent with physician assistants.

After a brief discussion, motion was made by Dr. Aycock, seconded by Dr. Gibson, and carried unanimously of the Board's intent to adopt the proposed amendment concerning the practice of radiologist assistants. A copy of the proposed amendment is attached hereto and incorporated by reference. The proposed amendment of the regulation will be filed with the Secretary of State under the Administrative Procedures Act.

FINAL ADOPTION OF REGULATION CONCERNING SHORT-TERM TRAINING FOR OUT-OF-STATE PHYSICIANS

Motion was made by Dr. D. Crawford, seconded by Dr. Mayo, and carried unanimously to adopt in final form the Board's regulation concerning short-term training for out-of-state physicians, a copy of which is attached hereto and incorporated by reference. The regulation will be filed with the Secretary of State under the Administrative Procedures Act.

MEDICAID PRESCRIPTION REQUIREMENTS

For informational purposes only, Dr. Craig advised the Board of an article for Medicaid prescription requirements. Dr. Craig advised that there are three (3) requirements to comply with the Medicaid tamper-resistant prescription pad law and that states must put one (1) of the three (3) in place by October 1, 2007, and have all three (3) in place by October 1, 2008.

LETTER FROM MISSISSIPPI ACADEMY OF PHYSICIAN ASSISTANTS

For informational purposes only, Dr. Craig advised that the Board had received a letter from the Ms Academy of Physician Assistants providing information relative to their biannual DEA CME Course. After review, there was no objection from the Board to approve the DEA CME workshop.

HONORED BOARD MEMBER

Dr. Mayo was congratulated for being elected to the American Osteopathic Association board of trustees during its recent annual business meeting.

OTHER BUSINESS

Dr. Merideth advised that Dr. V. Crawford would replace him as the Chair of the Scope of Practice Committee as well as replacing him as the Board's representative on the Nursing Board.

ADJOURNMENT

Dr. Merideth advised that Mr. Ingram had suggested the Board plan on a three (3) day Board meeting in November. Dr. Merideth advised the next meeting is scheduled for November 8, 9, and 10. The meeting adjourned at 11:50 p.m.

PHILIP T. MERIDETH, M.D., J.D.

President

Minutes taken and transcribed by Sherry Harris Staff Officer September 20, 2007

AGENDA ITEM: IX. Hearing in the case of Glyn Roy Hilbun, M.D.

X. Hearing in the case of Kevin Scott Cooper, M.D.

COUNT I

Motion made by Dr. D. Crawford, seconded by Dr. V. Crawford and carried to dismiss Count I.

<u>VOTE</u> :	<u>FOR</u>	<u>AGAINST</u>	<u>ABSTAIN</u>	<u>ABSENT</u>
Larry B. Aycock, M.D.	X			
A. Wallace Conerly, M.D.	Χ			
Dewitt G. Crawford, M.D.	Χ			
Virginia M. Crawford, M.D.	Χ			
S. Randall Easterling, M.D.		X		
Don A. Gibson, M.D.	Χ			
William B. Harper, D.O.	Χ			
William S. Mayo, D.O.	Χ			
Philip T. Merideth, M.D., J.D.	Χ			

Philip T. Merideth, M.D., J.D.

AGENDA ITEM: IX. Hearing in the case of Glyn Roy Hilbun, M.D.

X. Hearing in the case of Kevin Scott Cooper, M.D.

COUNT II

Motion made by Dr. Harper, seconded by Dr. Gibson and carried unanimously to deny dismissal of Count II.

<u>VOTE</u> :	<u>FOR</u>	<u>AGAINST</u>	<u>ABSTAIN</u>	<u>ABSENT</u>
Larry B. Aycock, M.D.	Х			
A. Wallace Conerly, M.D.	X			
Dewitt G. Crawford, M.D.	X			
Virginia M. Crawford, M.D.	Χ			
S. Randall Easterling, M.D.	X			
Don A. Gibson, M.D.	Χ			
William B. Harper, D.O.	Χ			
William S. Mayo, D.O.	Χ			
Philip T. Merideth, M.D., J.D.	X			

Philip T. Merideth, M.D., J.D.

AGENDA ITEM: IX. Hearing in the case of Glyn Roy Hilbun, M.D.

X. Hearing in the case of Kevin Scott Cooper, M.D.

COUNT III

Motion made by Dr. Gibson, seconded by Dr. V. Crawford and carried to dismiss Count III.

<u>VOTE</u> :	<u>FOR</u>	<u>AGAINST</u>	<u>ABSTAIN</u>	<u>ABSENT</u>
Larry B. Aycock, M.D.	X			
A. Wallace Conerly, M.D.	Χ			
Dewitt G. Crawford, M.D.		X		
Virginia M. Crawford, M.D.	Χ			
S. Randall Easterling, M.D.		X		
Don A. Gibson, M.D.	Χ			
William B. Harper, D.O.		X		
William S. Mayo, D.O.		X		
Philip T. Merideth, M.D., J.D.	Χ			

Philip T. Merideth, M.D., J.D.

AGENDA ITEM: IX. Hearing in the case of Glyn Roy Hilbun, M.D.

X. Hearing in the case of Kevin Scott Cooper, M.D.

COUNT IV

Motion made by Dr. Easterling, seconded by Dr. D. Crawford and carried to dismiss Count IV.

VOTE:	<u>FOR</u>	AGAINST	ABSTAIN	ABSENT
Larry B. Aycock, M.D.		X		
A. Wallace Conerly, M.D.	Χ			
Dewitt G. Crawford, M.D.	X			
Virginia M. Crawford, M.D.	Χ			
S. Randall Easterling, M.D.	X			
Don A. Gibson, M.D.	X			
William B. Harper, D.O.	X			
William S. Mayo, D.O.	X			
Philip T. Merideth, M.D., J.D.	X			

With a motion by Dr. Harper, seconded by Dr. Gibson, the Board came out of Executive Session.

Philip T. Merideth, M.D., J.D.

AGENDA ITEM: IX. Hearing in the case of Glyn Roy Hilbun, M.D.

Motion made by Dr. V. Crawford, seconded by Dr. D. Crawford, and carried that Dr. Hilbun be found guilty of Count II.

VOTE:	<u>FOR</u>	<u>AGAINST</u>	<u>ABSTAIN</u>	<u>ABSENT</u>
Larry B. Aycock, M.D.	X			
A. Wallace Conerly, M.D.	Χ			
Dewitt G. Crawford, M.D.	Χ			
Virginia M. Crawford, M.D.	X			
S. Randall Easterling, M.D.	X			
Don A. Gibson, M.D.		X		
William B. Harper, D.O.	X			
William S. Mayo, D.O.	X			
Philip T. Merideth, M.D., J.D.		X		

Philip T. Merideth, M.D., J.D.

AGENDA ITEM: X. Hearing in the case of Kevin Scott Cooper, M.D.

Motion made by Dr. Easterling, seconded by Dr. D. Crawford, and carried unanimously that Dr. Cooper be found guilty of Count II.

<u>VOTE</u> :	<u>FOR</u>	<u>AGAINST</u>	ABSTAIN	ABSENT
Larry B. Aycock, M.D.	Χ			
A. Wallace Conerly, M.D.	Χ			
Dewitt G. Crawford, M.D.	Χ			
Virginia M. Crawford, M.D.	X			
S. Randall Easterling, M.D.	Χ			
Don A. Gibson, M.D.	Χ			
William B. Harper, D.O.	Χ			
William S. Mayo, D.O.	Χ			
Philip T. Merideth, M.D., J.D.	X			

Philip T. Merideth, M.D., J.D.

AGENDA ITEM: IX. Hearing in the case of Glyn Roy Hilbun, M.D.

Motion made by Dr. Aycock, seconded by Dr. Easterling, and carried that Dr. Hilbun be issued a public letter of reprimand.

<u>VOTE</u> :	<u>FOR</u>	<u>AGAINST</u>	<u>ABSTAIN</u>	<u>ABSENT</u>
Larry B. Aycock, M.D.	X			
A. Wallace Conerly, M.D.	X			
Dewitt G. Crawford, M.D.	Χ			
Virginia M. Crawford, M.D.		X		
S. Randall Easterling, M.D.	Χ			
Don A. Gibson, M.D.		X		
William B. Harper, D.O.	X			
William S. Mayo, D.O.	Χ			
Philip T. Merideth, M.D., J.D.		X		•

With a motion by Dr. Gibson, seconded by Dr. Harper, the Board came out of Executive Session.

Philip T. Merideth, M.D., J.D.

EXECUTIVE SESSION MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE September 20, 2007

AGENDA ITEM: X. Hearing in the case of Kevin Scott Cooper, M.D.

Motion made by Dr. Easterling, seconded by Dr. D. Crawford, and carried that Dr. Cooper be issued a public letter of reprimand.

VOTE:	<u>FOR</u>	<u>AGAINST</u>	ABSTAIN	ABSENT
Larry B. Aycock, M.D.	Χ			
A. Wallace Conerly, M.D.	Χ			
Dewitt G. Crawford, M.D.	Χ			
Virginia M. Crawford, M.D.		X		
S. Randall Easterling, M.D.	Χ			
Don A. Gibson, M.D.		X		
William B. Harper, D.O.	X			
William S. Mayo, D.O.	X			
Philip T. Merideth, M.D., J.D.	X			

Philip T. Merideth, M.D., J.D.

President

OF

GLYN R. HILBUN, M.D.

DETERMINATION AND ORDER

THIS MATTER came on regularly for hearing on September 20, 2007, before the Mississippi State Board of Medical Licensure (hereinafter "Board"), pursuant to Title 73, Chapters 25 and 27, Miss. Code (1972) Annotated. The Board initiated these proceedings on April 13, 2007, by issuance of a Summons and Affidavit against Glyn R. Hilbun, M.D. (hereinafter "Licensee") setting forth four (4) counts of violation of Mississippi Code Annotated Section 73-25-28. This matter was initially set for hearing on May 17, 2007, but upon request of Licensee, was continued to this date. Licensee was present, represented by Honorable Cynthia H. Speetjens. Complaint Counsel for the Board was Honorable Stan T. Ingram. Sitting as legal advisor to the Board was Honorable Ellen O'Neal, Assistant Attorney General.

Pursuant to motion filed by Complaint Counsel, this hearing along with a hearing involving similar allegations pertaining to another licensee, Kevin Scott Cooper, M.D., were consolidated. A separate order will be entered for each licensee.

Based upon the evidence and testimony presented, the Board renders the following Findings of Fact, Conclusions of Law, and Order.

FINDINGS OF FACT

 Licensee is a physician licensed to practice medicine in the State of Mississippi, currently holding License No. 04679.

- 2. In April 2002, Licensee was hired by N & M, Inc. (hereinafter "N & M"), a screening company, to perform abbreviated physical examinations on individuals undergoing diagnostic screening for silicosis, in Columbus, Mississippi, which examinations and screenings would eventually be used in a mass tort litigation case which came to be styled In Re: Silica Products Liability Litigation, U.S. Dist. Crt., Southern District of Texas, Corpus Christi Division; Case No.: MDL-03-1553. Licensee was paid \$25,000 for five (5) days of screenings in Columbus, Mississippi, on April 22-26, 2002. During those five (5) days, Licensee screened approximately 456 individuals.
- 3. Licensee testified in a deposition in the above-referenced litigation and at the hearing before this Board. The Board was not a party to the silica litigation. A transcript of Licensee's deposition testimony offered in the silica litigation was presented as evidence at the hearing (Exhibit 5).
- 4. The evidence showed that the screening consisted of Licensee asking whether the individual had shortness of breath and/or connective tissue disease, listening to the individual's lungs, and observing the individual for cyanosis, clubbing of fingers and/or lower extremity edema, and lasted between five (5) to perhaps ten (10) or fifteen (15) minutes. After completing his portion of a one-page form which had been prepared by N & M, Licensee left the form in the custody of N &M at the end of the screening day. Licensee had no input in the drafting of the form or in the scope of the examination he performed for N & M. Licensee did not keep a copy of the exam forms Licensee completed. Further, Licensee knew that the examinations being performed were in relation to silica litigation.

5. Sometime after the screenings, N & M presented to Licensee for his signature a stack of typed forms (hereinafter "Diagnosing Letters") which stated the following as to each individual which Licensee had examined:

On the basis of this client's history of occupational exposure to silica and a B reading of the clients chest x-ray, then within a reasonable degree of medical certainty, [the client] has silicosis. Exposure to silica is associated with an increased incidence of lung cancer, connective tissue diseases and autoimmune diseases. Therefore, this client should consult with his or her physician.

- 6. Licensee testified that he was not in the office when the Diagnosing Letters were left by N & M for his signature. Licensee's office assistant called and informed Licensee that N &M had left a stack of papers for Licensee to sign. Licensee testified that he did not read or review the Diagnosing Letters in any way, and that he believed the Diagnosing Letters were merely a typed version of the physical examination he had previously performed. Without asking his office assistant to read the Diagnosing Letters to him, Licensee nevertheless instructed his office assistant to stamp his signature to each of the approximately 450 Diagnosing Letters. Furthermore, as instructed by N & M, the Diagnosing Letters were dated with the date of the physical examinations rather than the true date the Diagnosing Letters were signed.
- 7. Contrary to the language contained in the Diagnosing Letters, Licensee never reviewed any chest x-rays or pulmonary function tests and no chest x-ray reports or pulmonary function tests were attached to the Diagnosing Letters bearing Licensee's signature.
- 8. Licensee's 450 Diagnosing Letters were later utilized in the silicosis litigation referenced above.

9. The above-referenced litigation was ultimately dismissed by order of the court, MDL Docket No. 1533 (S.D. Tex., June 30, 2005), resulting in an investigation by the federal Oversight and Investigations Subcommittee of the Energy and Commerce Committee into the standards, practices and roles of the screening companies and physicians in the silica litigation.

CONCLUSIONS OF LAW

Licensee is guilty of Count Two of the Affidavit with Counts One, Three and Four having been dismissed by the Board. Licensee is guilty of unprofessional conduct, which includes dishonorable or unethical conduct likely to deceive, defraud or harm the public as a result of Licensee placing his signature on Diagnosing Letters in the manner noted above, in violation of Miss. Code Ann. Section 73-25-29 (8)(d), and Section 73-25-83(a).

ORDER

NOW THEREFORE, the Board hereby publicly reprimands Dr. Hilbun's medical license for the afore-mentioned conduct.

SO ORDERED, this the 20th day of September, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH, M.D., J.D.,

OF

KEVIN SCOTT COOPER, M.D.

DETERMINATION AND ORDER

THIS MATTER came on regularly for hearing on September 20, 2007, before the Mississippi State Board of Medical Licensure (hereinafter "Board"), pursuant to Title 73, Chapters 25 and 27, Miss. Code (1972) Annotated. The Board initiated these proceedings on April 13, 2007, by issuance of a Summons and Affidavit against Kevin Scott Cooper, M.D. (hereinafter "Licensee") setting forth four (4) counts of violation of Mississippi Code Annotated Section 73-25-28. This matter was initially set for hearing on May 17, 2007, but upon request of Licensee, was continued to this date. Licensee was present, represented by Honorable Earl Denham. Complaint Counsel for the Board was Honorable Stan T. Ingram. Sitting as legal advisor to the Board was Honorable Ellen O'Neal, Assistant Attorney General.

Pursuant to motion filed by Complaint Counsel, this hearing along with a hearing involving similar allegations pertaining to another licensee, Glynn R. Hilbun, M.D., were consolidated. A separate order will be entered for each licensee.

Based upon the evidence and testimony presented, the Board renders the following Findings of Fact, Conclusions of Law, and Order.

FINDINGS OF FACT

1. Licensee is a physician licensed to practice medicine in the State of

Mississippi, currently holding License No. 13038.

- 2. In April and May, 2002, Licensee was hired by N & M, Inc. (hereinafter "N & M"), a screening company, to perform abbreviated physical examinations on individuals undergoing diagnostic screening for silicosis, which examinations and screenings would eventually be used in a mass tort litigation case which came to be styled In Re: Silica Products Liability Litigation, U.S. Dist. Crt., Southern District of Texas, Corpus Christi Division; Case No.: MDL-03-1553.
- 3. Licensee testified in a deposition in the above-referenced litigation and at the hearing before this Board. The Board was not a party to the silica litigation. A transcript of Licensee's deposition testimony offered in the silica litigation was presented as evidence at the hearing (Exhibit 7).
- 4. The evidence showed that, as part of this screening, Licensee performed a cursory physical examination on approximately 250 individuals, consisting of listening to the individual's lung sounds, observing his/her fingers and ankles, and possibly listening to heart sounds, after which Licensee completed the physical examination portion of a form which has been prepared by N & M, and left the form in the custody of N &M at the end of the screening day. Licensee had no input in the drafting of the form or in the scope of the examination he performed for N & M. Licensee did not keep a copy of the exam forms Licensee completed. Further, Licensee knew that the examinations being performed were in relation to silica litigation.
- 5. Sometime after the screenings, N & M presented to Licensee for his signature a stack of typed forms (hereinafter "Diagnosing Letters") which stated the following as to each individual which Licensee had examined:

On the basis of this client's history of occupational exposure to silica and a B reading of the clients chest x-ray, then within a reasonable degree of medical certainty, [the client] has silicosis. Exposure to silica is associated with an increased incidence of lung cancer, connective tissue diseases and autoimmune diseases. ¹ Therefore, this client should consult with his or her physician.

- that he did not read or review the Diagnosing Letters in any way, and that he believed the Diagnosing Letters were merely a typed version of the physical examinations he had previously performed. However, during the hearing before the Board, Licensee testified that he did read portions of the Diagnosing Letters and was concerned with the diagnosing language noted above. License contacted the screening company and received assurances that despite the diagnosing language noted above, Licensee was not rendering a diagnosis in the Diagnosing Letters. Notwithstanding the clear diagnosing language noted above, Licensee capitulated and personally signed each of the approximately 250 Diagnosing Letters. Furthermore, as instructed by N & M, Licensee dated each of the Diagnosing Letters with the date of the physical examinations rather than the true date the Diagnosing Letters were signed.
- 7. Contrary to the language contained in the Diagnosing Letters, Licensee never reviewed any chest x-rays or pulmonary function tests and no chest x-ray reports or pulmonary function tests were attached to the Diagnosing Letters Licensee signed.

¹ In addition to the language referenced above, some of the Diagnosing Letters also contained a reference to tuberculosis (i.e., "Exposure to silica is associated with an increased incidence of tuberculosis, lung cancer, connective tissue diseases and autoimmune diseases. . . .").

- 8. Licensee's 250 Diagnosing Letters were later utilized in the silicosis litigation referenced above.
- 9. The above-referenced litigation was ultimately dismissed by order of the court, MDL Docket No. 1533 (S.D. Tex., June 30, 2005), resulting in an investigation by the federal Oversight and Investigations Subcommittee of the Energy and Commerce Committee into the standards, practices and roles of the screening companies and physicians in the silica litigation.

CONCLUSIONS OF LAW

Licensee is guilty of Count Two of the Affidavit with Counts One, Three and Four having been dismissed by the Board. Licensee is guilty of unprofessional conduct, which includes dishonorable or unethical conduct likely to deceive, defraud or harm the public as a result of Licensee placing his signature on Diagnosing Letters in the manner noted above, in violation of Miss. Code Ann. Section 73-25-29(8)(d), and Section 73-25-83(a).

ORDER

NOW THEREFORE, the Board hereby publicly reprimands Dr. Cooper's medical license for the afore-mentioned conduct.

SO ORDERED, this the 20th day of September, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH. M.D., J.D.,

DRAFT

09/20/07

The Joint Committee of the Mississippi Board of Nursing (BON) and the Mississippi State Board of Medical Licensure (MSBML) has determined that the appropriately prepared Nurse Practitioner (NP) can administer Botox injections, -including "off label" use provided:

- 1) the NP is educated and competent in the use of Botox and the procedure being performed. This education and competence must be documented initially and on an ongoing basis;
- 2) the collaborative physician is educated in the use of Botox;
- 3) the NP's protocol addresses the administration of Botox;
- 4) the collaborative physician has examined the patient and documented the patient's chart approving the use of Botox; and
- 5) the NP practices according to generally accepted standards of practice.



MISSISSIPPI SECRETARY OF STATE

NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Mississippi State Board of Medical Licensure c/o Rhonda Freeman

Specific Legal Authority authorizing the promulgation of Rule: (Insert citation to state or federal statute, or rule_Section 73-43-11

Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended Chapter 25, Section 1000, Regulations
Pertaining to Prescribing, Administering and Dispensing of Medication
he reason(s) for proposing the rule: {Insert here} on to allow electronic transmissions of prescriptions.
porary Rule (Check one or both boxers as applicable.)
by addressing written comments to the agency at the above bir name and address, as well as other contact information, and telephone number of the party or parties you represent.
n Date: Time:
ne oral proceeding you must make a written request to the agency at the proceeding to be placed on the agenda. The request should well as other contact information; and if you are an agent or or of the party or parties you represent.
le. Where an oral proceeding is not scheduled, an oral proceeding ding is submitted by a political subdivision, an agency or ten (10) to the agency contact person at the above address within twenty d rule adoption and should include the name, address and telephone f you are an agent or attorney, the name, address and telephone
mpact statement is not required for this rule, or
statement required is attached.
ny rule being amended or changed is attached.

Date Rule Proposed: September 20, 2007 Signature and Title of Person Submitting Rule for Filing Proposed Effective Date of Rule: 30 days from final filing.

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

September 21, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This is an amendment to Board regulation, "Regulations Pertaining to Prescribing, Administering and Dispensing of Medication", Chapter 25, Section 1000. It amends the current regulation to allow for the electronic transmission of prescriptions.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

Chapter 25 Regulations Pertaining to Prescribing, Administering and Dispensing of Medication

Prescription Guidelines - All Medications

- In addition to any other requirements set forth in these regulations pertaining to the issuance of prescriptions of controlled substances, the following additional requirements apply to all prescriptions, whether or not said prescriptions are for controlled substances, legend drugs or any other medication:
 - 1. Electronic prescription transmissions are allowed using standards established and approved by the United States Department of Health and Human Services Agency for Healthcare Research and Quality (HHS-AHRQ). E-prescribing is the electronic entry of a prescription by a practitioner, the secure electronic transmission of the prescription to a pharmacy, the receipt of an electronic message by the pharmacy and E-prescription renewal requests sent electronically by the pharmacy to the practitioner. Electronic transmissions may be computer to computer or computer to facsimile.
 - 42. Every written prescription delivered to a patient, or delivered to any other person on behalf of a patient, must be manually signed on the date of issuance by the physician. This does not prohibit, however, the transmission of electronically telefaxed (but not e-mail) prescriptions for non-controlled drugs to the pharmacy of the patient's choice. Such telefaxed or electronic prescriptions shall bear the signature of the prescribing physician and shall be issued in accordance with all other provisions of this section. No prescriptions for brand name or generic equivalents of Nalbuphine Hcl, Carisoprodol, Butalbital compounds, or Tramadol Hcl shall be telefaxed or electronically transmitted.
 - 23. All prescriptions shall be on forms containing two lines for the physician's signature. There shall be a signature line in the lower right-hand corner of the prescription form beneath which shall be clearly imprinted the words "substitution permissible." There shall be a signature line in the lower left corner of the prescription form beneath which shall be clearly imprinted the words "dispense as written." The physician's signature on either signature line shall validate the prescription and designate approval or disapproval of product selection. The prescription form shall bear the pre-printed name of the physician, or the physician shall clearly print his or her name on the prescription form, in addition to the physician's original signature. In the event that the prescription form bears the pre-printed name of more than one physician, the physician shall clearly indicate the name of the physician writing the prescription.
 - 34. If a prescription form which does not contain two signature lines required in Section 1000.2 of this Chapter is utilized by the physician, he or she shall write in his or her own handwriting the words "dispense as written" thereupon to prevent product selection.
 - 45. Every written prescription issued by a physician for a legend drug should clearly state whether or not the prescription should be refilled, and if so, the number of authorized refills and/or the duration of therapy. Physicians should avoid issuing

prescriptions refillable on "prn" basis. If a physician chooses to issue a prescription refillable "prn", the life of the prescription or time limitation must clearly be set forth on the prescription. In no case shall a prescription which is refillable on a "prn" basis be refilled after the expiration of one (1) year. Regardless of whether a prescription is refillable on a "prn" basis or the prescription expressly states the number of authorized refills, the use of said medication should be re-evaluated on at least an annual basis. Upon the expiration of one (1) year, a prescription becomes invalid, regardless of the number of refills indicated or "prn" designation. Thereafter, a new prescription, if indicated, must be issued.

Every written prescription issued by a physician, bearing more than one non-controlled medication, shall clearly indicate the intended refill instructions for each medication. Lack of clearly indicated refill instructions prohibit the refilling of the medications. All unused lines on a multi-line prescription blank shall be clearly voided by the issuing physician.

- A prescription shall no longer be valid after the occurrence of any one of the following events:
 - a. Thirty (30) days after the death of the issuing physician.
 - b. Thirty (30) days after the issuing physician has moved or otherwise changed the location of his or her practice so as to terminate the doctor/patient relationship. Termination of the doctor/patient relationship results when a patient is no longer able to seek personal consultation or treatment from the issuing physician.
 - c. Insofar as controlled substances are concerned, immediately after loss of DEA Controlled Substances Privilege by the issuing physician.
 - d. Immediately after revocation, suspension or surrender of the physician's license.

OF

CHARLES KNIGHT, M.D.

ORDER OF CONTINUANCE

THIS MATTER came on regularly for hearing on September 20, 2007, before the Mississippi State Board of Medical Licensure, in response to a request for continuance of the hearing set for this date. After consideration of the matter, the Board finds that the request is well taken.

IT IS, THEREFORE, ORDERED, that this matter is continued until November 8, 2007. The hearing will promptly begin on November 8, 2007 at 10:00 a.m.

SO ORDERED, this the 20th day of September, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH, M.D., J.D.

OF

HAROLD TODD COULTER, M.D.

ORDER OF CONTINUANCE

THIS MATTER came on regularly for hearing on September 20, 2007, before the Mississippi State Board of Medical Licensure, in response to a request for continuance of the hearing set for this date made Harold Todd Coulter, M.D. (hereinafter "Licensee"), through his attorney, William Kulick. After consideration of the matter, the Board finds Licensee's motion to be well taken. The Board is further advised that two (2) or three (3) days are needed to complete the scheduled hearing.

IT IS, THEREFORE, ORDERED, that this matter is continued until November 8-10, 2007. The hearing will promptly begin on November 8, 2007 at 10:00 a.m.

SO ORDERED, this the 20th day of September, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH, M.D., J.D.

OF

RAY HARRON, M.D.

ORDER OF CONTINUANCE

THIS MATTER came on regularly for hearing on September 20, 2007, before the Mississippi State Board of Medical Licensure, in response to a request for continuance of the hearing set for this date made by Ray Harron, M.D. (hereinafter "Licensee"), through his attorney, Ron Barroso. After consideration of the matter, the Board finds Licensee's motion to be well taken. The Board is further advised that two (2) or three (3) days are needed to complete the scheduled hearing.

IT IS, THEREFORE, ORDERED, that this matter is continued until November 8-10, 2007. The hearing will promptly begin on November 8, 2007 at 10:00 a.m.

SO ORDERED, this the 20th day of September, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH, M.D., J.D.

OF

ANDREW HARRON, D.O.

ORDER OF CONTINUANCE

THIS MATTER came on regularly for hearing on September 20, 2007, before the Mississippi State Board of Medical Licensure, in response to a request for continuance of the hearing set for this date made by Andrew Harron, D.O. (hereinafter "Licensee"), through his attorney, Jed Stone. After consideration of the matter, the Board finds Licensee's motion to be well taken. The Board is further advised that two (2) or three (3) days are needed to complete the scheduled hearing.

IT IS, THEREFORE, ORDERED, that this matter is continued until November 8-10, 2007. The hearing will promptly begin on November 8, 2007 at 10:00 a.m.

SO ORDERED, this the 20th day of September, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH, M.D., J.D.



NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure

Mississippi State Board of Medical Licensure

Specific Legal Authority authorizing the promulgation Rule: {Insert citation to state or federal statute, or rule Section 73-43-11			
Reference to Rules repealed, amended or suspended by the Proposed Rule: Insert citation to specific rule(s) repealed, amended or suspended Chapter 12, Section 400, The Practice of			
Radiologist Assistants			

c/o Rhonda Freeman	}
1867 Crane Ridge Drive, Suite 200-B	Reference to Rules repealed, amended or suspended by the Proposed Rule: { Insert citation to specific rule(s) repealed,
Jackson, MS 39216	amended or suspended Chapter 12, Section 400, The Practice of
(601) 987-3079	Radiologist Assistants
rhonda@msbml.state.ms.us	
Explanation of the Purpose of the Proposed Rule and	the reason(s) for proposing the rule: {Insert here}
assistant to appear prior to getting practice approve	ion to require the supervising radiologist and radiologist
This rule is proposed as a Pinal Rule, and/or a Tem	porary Rule (Check one or both boxers as applicable.)
address. Persons making comments should include th	by addressing written comments to the agency at the above their name and address, as well as other contact information, and telephone number of the party or parties you represent.
Oral Proceeding: Check one box below	r.
An oral proceeding is scheduled on this rule of Place:	on Date: Time:
the above address at least day(s) prior to t	the oral proceeding you must make a written request to the agency at the proceeding to be placed on the agenda. The request should s well as other contact information; and if you are an agent or er of the party or parties you represent.
will be held if a written request for an oral proce persons. The written request should be submitte (20) days after the filing of this notice of propose	ule. Where an oral proceeding is not scheduled, an oral proceeding eding is submitted by a political subdivision, an agency or ten (10) d to the agency contact person at the above address within twenty ed rule adoption and should include the name, address and telephone if you are an agent or attorney, the name, address and telephone
Economic Impact Statement: Check one box below	
☑The agency has determined that an economic	impact statement is not required for this rule, or
The concise summary of the economic impact	t statement required is attached.
The entire text of the Proposed Rule including the text of	any rule being amended or changed is attached.
Date Rule Proposed: September 20, 2007	Proposed Effective Date of Rule: 30 days from final filing.
Mars Do Staggette =	

Signature and Title of Person Submitting Rule for Filing

SOS FORM APA 001 Effective Date 07/29/2005

Rhonda Freeman **Division Director**

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: September 21, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This is an amendment to Board regulation, "The Practice of Radiologist Assistants", Chapter 12, Section 400. It amends the current regulation to require the supervising radiologist and radiologist assistant to appear at the Board prior to the practice approval being granted.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

Chapter 12 The Practice of Radiologist Assistants

Scope

- The following regulations pertain to radiologist assistants performing any x-ray procedure or operating any x-ray equipment in a physician's office, hospital or clinical setting.
- The radiologist assistant shall evaluate the day's schedule of procedures with the supervising radiologist and determine where the radiologist assistant's skills will be best utilized.
- After demonstrating competency, the radiologist assistant when ordered to do so by the supervising radiologist may:
 - 1. Perform selected procedures under the direct supervision of a radiologist including static and dynamic fluoroscopic procedures.
 - 2. Assess and evaluate the physiologic and psychological responsiveness of patients undergoing radiologic procedures.
 - 3. Evaluate image quality, make initial image observations and communicate observations of image quality to the supervising radiologist.
 - 4. Administer intravenous contrast media or other prescribed medications.
- 103 The radiologist assistant may not interpret images, make diagnoses, or prescribe medications or therapies.
- The radiologist assistant shall adhere to the Code of Ethics of the American Registry of Radiologic Technologists and to national, institutional and/or departmental standards, policies and procedures regarding the standards of care for patients.

Definitions

- For the purpose of Chapter 12 only, the following terms have the meanings indicated:
 - 1. "A.R.R.T." American Registry of Radiologic Technologists.
 - 2. <u>"Full Certification"</u> Certification obtained by submitting certification issued by the A.R.R.T.
 - 3. <u>"Radiologist"</u> A physician licensed by the Mississippi State Board of Medical Licensure who is certified or eligible to be certified by the American Board of Radiology or the American Osteopathic Board of Radiology.
 - 4. "Radiologist Assistant Certification" Certification obtained by submitting proof of A.R.R.T. certification as a radiologist assistant which will enable the holder to perform any and all radiologist assistant procedures or functions as defined in Section 300 below in a radiology practice or radiologist's office.
 - 5. "Direct Supervision" The radiologist must be present in the office suite and immediately available to furnish assistance and direction throughout the performance of all procedures. "Direct supervision" does not mean that the supervising radiologist must be present in the room when the procedure is

performed.

Qualifications for Licensure

- Applicants for radiologist assistant licensure must be graduates of a radiologist assistant education program accredited by the American Registry of Radiologic Technologists or graduates of an RPA school holding an RA certification from the A.R.R.T., must have passed the radiologist assistant examination provided by the A.R.R.T., must have current and unencumbered registration as a radiologic technologist with the Mississippi State Department of Health, must have current certification in advanced cardiac life support (ACLS), and must meet the following additional requirements:
 - 1. Satisfy the Board that he or she is at least twenty-one (21) years of age and of good moral character.
 - 2. Submit an application for license on a form supplied by the Board, completed in every detail with a recent passport type photograph.
 - 3. Pay the appropriate fee as determined by the Board.
 - 4. Present a certified copy of birth certificate or valid passport.
 - 5. Submit proof of legal change of name if applicable (notarized or certified copy of marriage license or other legal proceeding).
 - 6. Provide information on registration or licensure in all other states where the applicant is or has been registered or licensed as a radiologist assistant.
 - 7. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
 - 8. No basis or grounds exist for the denial of licensure as provided at Section 1000 below.

Radiologist assistants meeting these licensure requirements will be eligible for license renewal so long as they meet standard renewal requirements.

Supervision

- Before any radiologist shall supervise a radiologist assistant, the radiologist must first (a) present to the Board's Executive Director a duly executed protocol, (b) appear personally before the Board or its Executive Director, and (c) obtain written approval to act as a supervising radiologist. The facts and matters to be considered by the Board when approving or disapproving a protocol or supervision arrangement shall include, but are not limited to, how the supervising radiologist and radiologist assistant plan to implement the protocol, the method and manner of supervision, consultation, referral and liability.
- Where two or more radiologists anticipate executing a protocol to supervise a radiologist assistant, it shall not be necessary that all of the radiologists personally appear before the Board or Executive Director as required in Section 400. In this situation, the radiologist who will bear the primary responsibility for the supervision of the radiologist assistant shall make the required personal appearance.

Supervising Physician Limited

- No radiologist shall be authorized to supervise a radiologist assistant unless that radiologist holds an unrestricted license to practice medicine in the state of Mississippi.
- The employing radiologist(s), or a radiologist designated by the employing physician(s) as a substitute supervisor, shall exercise supervision and assume full control and responsibility for the services provided by any person practicing as a radiologist assistant employed in the radiologist's practice. Any services being provided by a radiologist assistant must be performed at either the physical location of the radiologist's primary medical practice or any healthcare facility where the supervising radiologist holds staff privileges.

Termination

The radiologist assistant and supervising radiologist shall notify the Board in writing immediately upon the radiologist assistant's termination; radiologist retirement; withdrawal from active practice; or any other change in employment, functions or activities. Failure to notify can result in disciplinary action.

Duty to Notify Board of Change of Address

5700 Any radiologist assistant who is licensed or receives a license to practice as a radiologist assistant in this state and thereafter changes his or her practice location from what was noted in the application upon which he or she received a license, shall immediately notify the Board in writing of the change of location. Failure to notify within 30 days could result in disciplinary action.

Continuing Education

- 6800 Biennially attend and complete at least twenty-four (24) hours of radiological related continuing education courses sponsored or approved by any of the following organizations:
 - 1. Mississippi Society of Radiologic Technologists
 - 2. Mississippi Radiological Society
 - Mississippi Medical Association or Mississippi Osteopathic Medical Association
 - 4. American Medical Association or American Osteopathic Association
 - 5. American Society of Radiologic Technologists
 - 6. American Registry of Radiologic Technologists
 - 7. American College of Radiology or American Osteopathic College of Radiology

Identification

7900 The supervising physician shall be responsible to ensure that any radiologist assistant under his or her supervision does not advertise or otherwise hold himself or herself out in any manner which would tend to mislead the general public or patients. Radiologist

- assistants shall at all times when on duty wear a name tag, placard or plate identifying themselves as radiologist assistants.
- 7901 Radiologist assistants may not advertise in any manner which implies that the radiologist assistant is an independent practitioner.
- 7902 A person not licensed as a radiologist assistant by the Board who holds himself or herself out as a radiologist assistant is subject to the penalties applicable to the unlicensed practice of medicine.

Physician Liability

<u>\$10</u>00 Prior to the supervision of a radiologist assistant, the physician's and/or radiologist assistant's insurance carrier must forward to the Board a Certificate of Insurance.

Renewal Schedule

- 91100 The license of every person licensed to practice as a radiologist assistant in the state of Mississippi shall be renewed annually.
- 91101 On or before May 1 of each year, the State Board of Medical Licensure shall mail an application for renewal of license to every radiologist assistant to whom a license was issued or renewed during the current licensing year. The applicant shall complete the application and return it to the Board before June 30 and the renewal fee of an amount established by the Board. The payment of the annual license renewal fee shall be optional with all radiologist assistants over the age of seventy (70) years. Upon receipt of the application and fee, the Board shall verify the accuracy of the application and issue to applicant a certificate of renewal for the ensuing year, beginning July 1 and expiring June 30 of the succeeding calendar year. Such renewal shall render the holder thereof a licensed radiologist assistant as stated on the renewal form.
- 91102 A radiologist assistant practicing in Mississippi who allows his or her license to lapse by failing to renew the license as provided in Section 901 may be reinstated by the Board on satisfactory explanation for such failure to renew, by completion of a reinstatement form, and upon payment of the renewal fee for the current year, and shall be assessed a fine of Twenty-five Dollars (\$25.00) plus an additional fine of Five Dollars (\$5.00) for each month thereafter that the license renewal remains delinquent.
- 91103 Any radiologist assistant not practicing in Mississippi who allows his or her license to lapse by failing to renew the license as provided in Section 901 may be reinstated by the Board on satisfactory explanation for such failure to renew, by completion of a reinstatement form, and upon payment of the arrearage for the previous five (5) years and the renewal fee for the current year.
- 91104 Any radiologist assistant who allows his or her license to lapse shall be notified by the Board within thirty (30) days of such lapse.

91105 Any person practicing as a radiologist assistant during the time his or her license has lapsed shall be considered an illegal practitioner and shall be subject to the same penalties as provided at Mississippi Code, Section 73-25-14.

Disciplinary Proceedings

10200 Grounds for Disciplinary Action Against Radiologist Assistants

For the purpose of conducting disciplinary actions against individuals licensed to practice as radiologist assistants, the Board hereby incorporates those grounds for the non-issuance, suspension, revocation, or restriction of a license or the denial of reinstatement or renewal of a license, as set forth in Mississippi Code, Sections 73-25-29 and 73-25-83. As a basis for denial, suspension, revocation or other restriction, the Board may initiate disciplinary proceedings based upon any one or more of those grounds as set forth in Sections 73-25-29 and 73-25-83, and may make provision for the assessment of costs as provided therein.

10201 Hearing Procedure and Appeals

No individual shall be denied a license or have his or her license suspended, revoked or restriction placed thereon, unless the individual licensed as a radiologist assistant has been given notice and opportunity to be heard. For the purpose of notice, disciplinary hearings and appeals, the Board hereby adopts and incorporates by reference all provisions of the "Rules of Procedure" now utilized by the Board for those individuals licensed to practice medicine, osteopathic medicine, and podiatric medicine in the state of Mississippi.

19202 Reinstatement of License

- 1. A person whose license to practice as a radiologist assistant has been revoked, suspended, or otherwise restricted may petition the Mississippi State Board of Medical Licensure to reinstate his or her license after a period of not less than one (1) year has elapsed from the date of the revocation or suspension. The procedure for the reinstatement of a license that is suspended for being out of compliance with an order for support, as defined in Section 93-11-153, shall be governed by Sections 93-11-157 or 93-11-163, as the case may be.
- 2. The petition shall be accompanied by two (2) or more verified recommendations from physicians (M.D. or D.O.) licensed by the Board of Medical Licensure to which the petition is addressed and by two (2) or more recommendations from citizens each having personal knowledge of the activities of the petitioner since the disciplinary penalty was imposed and such facts as may be required by the Board of Medical Licensure.

The petition may be heard at the next regular meeting of the Board of Medical Licensure but not earlier than thirty (30) days after the petition was filed. No petition shall be considered while the petitioner is under sentence for any criminal offense, including any period during which he or she is under probation or parole. The hearing may be continued from time to time as the Board of Medical

Licensure finds necessary.

3. In determining whether the disciplinary penalty should be set aside and the terms and conditions, if any, which should be imposed if the disciplinary penalty is set aside, the Board of Medical Licensure may investigate and consider all activities of the petitioner since the disciplinary action was taken against him or her, the offense for which he or she was disciplined, his or her activity during the time his or her certificate was in good standing, his or her general reputation for truth, professional ability and good character; and it may require the petitioner to pass an oral examination.

Impaired Radiologist Assistants

14300 For the purpose of the Mississippi Disabled Physician Law, Mississippi Code, Sections 73-25-51 to 73-25-67, any individual licensed to practice as a radiologist assistant shall be subject to restriction, suspension, or revocation in the case of disability by reason of one or more of the following:

Mental illness

Physical illness, including but not limited to deterioration through the aging process, or loss of motor skills

Excessive use or abuse of drugs, including alcohol

14301 If the Board has reasonable cause to believe that a radiologist assistant is unable to practice with reasonable skill and safety to patients because of one or more of the conditions described above, referral of the radiologist assistant shall be made, and action taken, if any, in the manner as provided in Sections 73-25-55 through 73-25-65, including referral to the Mississippi Professionals Health Program, sponsored by the Mississippi State Medical Association.

Effective Date of Regulations

12400 The above rules and regulations pertaining to the practice of radiologist assistants shall become effective upon adoption.

Adopted November 16, 2005. Amended July 20, 2006.



NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI



Mississippi State Board of Medical Licensure

Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216 (601) 987-3079 rhonda@msbml.state.ms.us	Specific Legal Authority Authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule Section 73-43-11 } Reference to Rules repealed, amended or suspended by the Proposed Rule: {Insert citation to specific rule(s) repealed, amended or suspended Chapter 4, Section 400, Short-Term Training for Out-of State Physicians
Date Rule Proposed:	
Explanation of the Purpose of the Proposed Rule and the This regulation addresses physicians who wish to assist out-of-state knowledge and expertise by offering short-term training to the out-	e physicians who wish to expand their
	any written comments received during the comment period ablic inspection by contacting the Agency at the above address.
An oral proceeding was held on this rule:	
Date: Time: Place:	
An oral proceeding was not held on this rule.	
The Agency has considered the written comments and the	he presentations made in any oral proceedings, and
✓ This rule as adopted is without variance from the	ne proposed rule.
This rule as adopted differs from the proposed rather than the substance of the rule.	rule as there are minor editorial changes which affect the form
the Notice of Proposed Rule Adoption and the com	oposed Rule Adoption, the logical outgrowth of the contents of
The entire text of the Proposed Rule including the text of an	y rule being amended or changed is attached.
Effective Date of Rule: September 20, 2007	

Signature and Title of Person Submitting Rule for Filing Rhonda Freeman Division Director

SOS FORM APA 002 Effective Date 07/29/2005





MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: September 21, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This regulation addresses physicians who wish to assist out-of-state physicians who wish to expand their knowledge and expertise by offering short-term training to the out-of-state physician.

Chapter 04 Temporary Licensure

Short-Term Training for Out-of-State Physicians

- The Board is aware that there are Mississippi physicians assisting out-of-state physicians in expanding professional knowledge and expertise by offering short-term training to the out-of-state physician. The Mississippi physician wishing to offer this training to the unlicensed out-of-state physician(s) must have their short-term training program approved by the Board.
- The Mississippi physician must submit a detailed letter stating the purpose of the short-term training program, the objectives of the course, approximately how long the course will last, and any supporting documentation that would assist the Board in determining the approval status of the program.
- An individual wishing to attend the Board approved short-term training is not required to obtain a permanent Mississippi medical license; however, the individual must submit the following to the Board:
 - 1. A completed information form which has been supplied by the Board.
 - A letter from the mentor of the Board approved training program stating that the applicant is going to be participating in the short-term training program and the duration.
 - 3. Verification of a current unrestricted permanent license from the state in which the individual is currently practicing.
 - 5. A permit fee in the amount of \$25.
- 403 The individual may not participate in the short-term training program until a valid training permit has been issued. The permit will be effective the date the individual is to begin the training and will become null and void the day the individual completes the training.
- A short-term training permit is typically valid for two to three days; however, it can be issued up to fifteen (15) days. If during the duration of the training, it is determined that the physician may stay longer than fifteen (15) days, the temporary training permit may be renewed for an additional (15) days. Under no circumstances will the permit be renewed after thirty (30) days. An individual anticipating training for a period longer than thirty (30) days will be required to obtain a permanent Mississippi medical license.

MARIANA (MARIA)

MINUTES EXECUTIVE COMMITTEE MEETING MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE OCTOBER 22, 2007

MEMBERS PRESENT:

Philip T. Merideth, M.D., J.D., Jackson, President Don A. Gibson, M.D., Richland, Vice President William S. Mayo, D.O., Secretary, was present telephonically

ALSO PRESENT:

H. Vann Craig, M.D., Director Stan T. Ingram, Complaint Counsel for the Board Rhonda Freeman, Bureau Director, Licensure Division

The Executive Committee of the Mississippi State Board of Medical Licensure met on Monday, October 22, 2007, at 4:00 p.m. in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Suite 200-B, Jackson, Mississippi.

JAMES BENJAMIN BURKE, M.D., BIRMINGHAM, AL, APPLICANT

Dr. Craig advised that the Board had received an application for licensure from a physician who had signed a contract with the Mississippi Professionals Health Program due to sexual misconduct. Dr. Craig requested that the Executive Committee review the information surrounding the sexual misconduct and make a determination as to whether the Board should issue an unrestricted license based on the signed contract with MPHP or request the physician appear before the Board. It was the consensus of the Executive Committee that a reportable Consent Order limiting the applicant's practice to the male population at Parchman State Penitentiary be offered to the applicant. If applicant chooses not to sign the Consent Order, then applicant can appear for a hearing before the Board.

DR. CRAIG EXITED THE MEETING

HAROLD TODD COULTER, M.D., OCEAN SPRINGS, MS, MS LICENSE 14334

Mr. Ingram presented the Committee with a request for a continuance of the November 8, 2007, hearing regarding Dr. Coulter. Mr. Ingram also advised that Dr. Coulter may be willing to sign a Consent Order and surrender his DEA certificate. Upon further discussion, the Committee agreed to offer Dr. Coulter a reportable Consent Order suspending his license for one year with the suspension stayed after 90 days, subject to Dr. Coulter completing a Board approved prescribing course, surrendering his DEA certificate in Schedules II, IIN, III, IIIN, and IV, assessment of costs, and strict compliance with the Board's rules and regulations pertaining to use of controlled drugs and record keeping. Dr. Coulter may petition the Board after one year for reinstatement of DEA schedules.

The Committee agreed to not grant a continuance. If Dr. Coulter agrees to the terms of the Consent Order, it will be presented to the full Board at the November 8, 2007, meeting. If the Board fails to accept the Consent Order, the hearing will be held at the next available meeting.

ADJOURNMENT

There being no further business, the meeting adjourned at 4:45 p.m., with the next Executive Committee meeting scheduled for Wednesday, November 7, 2007.

Philip T. Merideth, M.D., J.D.

President

Minutes taken and transcribed by Rhonda Freeman, CPM Bureau Director October 22, 2007

MINUTES EXECUTIVE COMMITTEE MEETING MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE NOVEMBER 7, 2007

MEMBERS PRESENT:

Philip T. Merideth, M.D., J.D., Jackson, President Don A. Gibson, M.D., Richland, Vice President Dewitt G. Crawford, M.D., Louisville

ALSO PRESENT:

H. Vann Craig, M.D., Director Stan T. Ingram, Complaint Counsel for the Board Ellen O'Neal, Assistant Attorney General Rhonda Freeman, Bureau Director, Licensure Division Thomas Washington, Bureau Director, Investigative Division Frances Scott, Special Projects Officer, Investigative Division Mickey Boyette, Investigator, Investigative Division Sherry Harris, Staff Officer

NOT PRESENT:

William S. Mayo, D.O., Oxford, Secretary

The Executive Committee of the Mississippi State Board of Medical Licensure met on Wednesday, November 7, 2007, at 1:00 p.m. in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

STEVEN T. HAYNE, M.D., BRANDON, MISSISSIPPI MEDICAL LICENSE NUMBER 10600

Dr. Craig advised that Dr. Hayne is an anatomical pathologist and recently the Supreme Court overturned his testimony in a case. Dr. Craig advised that Dr. Hayne performs 1200 to 1500 autopsies per year and statistics show more than 350 per year is high. After a brief discussion, the Executive Committee agreed that the Board should investigate the matter as a standard of care issue and verify there is evidence we need to pursue.

EXECUTIVE COMMITTEE MINUTES November 7, 2007 Page 2

GARY A. ROBERSON, M.D., JACKSON, MISSISSIPPI MEDICAL LICENSE NUMBER 15474

Dr. Craig advised that a letter had been received from Dr. Roberson requesting the Board accept his year of enrollment at Oxford University in England in the Master's program in lieu of his 2006 - 2008 CME requirement. After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. Crawford, and carried to accept this educational time as Dr. Roberson's requirement of CME hours.

PROPOSED FORM LETTER FROM INVESTIGATIONS CONCERNING CONTROLLED SUBSTANCE ISSUES

Dr. Craig distributed a copy of a letter that Investigations had drafted to send to physicians who are seeing individuals as patients that are obtaining controlled substance prescriptions from a number of physicians during the same time period. After a brief discussion on the legal issues and how the information is received, motion was made by Dr. Gibson, seconded by Dr. Crawford, and carried unanimously to approve the letter with editorial changes discussed. A copy of the approved letter is attached hereto and incorporated by reference.

PROPOSED 2008 LEGISLATION

Dr. Craig advised that there are two (2) bills that he would like to have introduced for legislation in 2008.

- 1) A bill to increase the cap on annual license renewal for physicians and podiatrists from \$200 to \$400. Ms. Freeman, Bureau Director, Licensure Division, advised that there needs to be an incentive to renew online versus manual renewing and the renewal fee would be less for online renewals.
- 2) A bill providing the Executive Director ability to issue subpoenas during investigations for needed medical records. Dr. Craig advised that the Mississippi State Medical Association will support the bill for legislation. After a brief discussion, Dr. Craig advised the purpose of the request is for investigatory subpoena power.

EXECUTIVE COMMITTEE MINUTES November 7, 2007 Page 3

CHARLTON H. BARNES, M.D., PASCAGOULA, MISSISSIPPI MEDICAL LICENSE NUMBER 13745

Dr. Craig advised that information had been received by the Board that advised Singing River Hospital had taken hospital privileges from Dr. Barnes and requested he go to Pine Grove in Hattiesburg for an evaluation. Dr. Craig discussed a letter received from Dr. Barnes addressing the situation. After a brief discussion, the Executive Committee unanimously agreed that there are no issues the Board needs to address.

PERSONAL APPEARANCE BY JOHN ERIC HENRIKSEN, M.D., MAGNOLIA, AR, MISSISSIPPI MEDICAL LICENSE NUMBER 17897

Dr. Henriksen joined the meeting but was not represented by legal counsel. He executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference.

Gary D. Carr, M.D., Medical Director, Mississippi Professionals Health Program (MPHP), joined Dr. Henriksen in the meeting.

Dr. Merideth advised Dr. Henriksen that the Board had invited him to appear before the Executive Committee to discuss issues the Board has with boundary violations while he was employed as a physician while in the U.S. Air Force. Dr. Henriksen addressed the Executive Committee and discussed the circumstances and also answered their questions.

Dr. Carr advised that Arkansas, the state where Dr. Henriksen is currently practicing, does not monitor boundary issues, but that he has agreed to monitor Dr. Henriksen and provide reports to Arkansas and Mississippi.

After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. Crawford, and carried unanimously to allow Dr. Henriksen to enter into a monitoring contract with MPHP and have Dr. Carr provide the Board with regular reports.

THE EXECUTIVE COMMITTEE RECESSED AT 2:00 P.M. AND RETURNED AT 2:10 P.M.

EXECUTIVE COMMITTEE MINUTES November 7, 2007 Page 4

PERSONAL APPEARANCE BY JOHNNY RAY BULLOCK, JR., M.D., TYLERTOWN, MISSISSIPPI MEDICAL LICENSE NUMBER 13883

Dr. Bullock joined the meeting but was not represented by legal counsel. He executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference.

Dr. Craig introduced Dr. Bullock to the Executive Committee members and advised them that Dr. Bullock has recently completed a five (5) year contract with the Mississippi Professionals Health Program (MPHP) and was here to petition the Board to lift the restrictions on his current license.

Dr. Carr was present and advised that MPHP supports the request to have all restrictions removed from Dr. Bullock's license.

After a brief discussion, motion was made by Dr. Crawford, seconded by Dr. Gibson, and carried unanimously to remove the restrictions currently placed on Dr. Bullock's medical license. A copy of the Order Removing All Restrictions is attached hereto and incorporated by reference.

PAUL W. PIERCE, III, M.D., VICKSBURG, MISSISSIPPI MEDICAL LICENSE NUMBER 06454

Dr. Pierce was not present or represented by legal counsel.

Dr. Craig advised that the Board received a complaint on Dr. Pierce concerning disruptive behavior. The Board requested that Dr. Pierce appear before the Examining Committee to determine his fitness to practice medicine with reasonable skill and safety to patients. Dr. Craig advised that the Board received the Examining Committee's report and that it contained multiple recommendations.

After a brief discussion, the Executive Committee unanimously agreed that the matter be referred back to the Examining Committee requesting a specific recommendation that would be the best option in a multi-disciplinary evaluation.

EXECUTIVE COMMITTEE MINUTES
November 7, 2007
Page 5

PERSONAL APPEARANCE BY DARCEY GUS KOBS, JR., M.D., HATTIESBURG, MISSISSIPPI MEDICAL LICENSE NUMBER 05934

Dr. Kobs joined the meeting and was represented by legal counsel, Chris Henderson. Dr. Kobs had executed a written agreement for this informal meeting, a copy of which is attached hereto and incorporated by reference.

Dr. Craig provided the Executive Committee with a brief history and problems at Forrest General Hospital that caused them to take away Dr. Kob's hospital privileges. Dr. Craig advised the Executive Committee that a Consent Order had been sent to Dr. Kobs, but he had requested an appearance to discuss the Consent Order.

Dr. Kobs addressed the Executive Committee and advised that he is no longer taking weekend or night calls and only works two (2) weeks a month. Dr. Kobs advised that the errors were due to the long hours and workload he was working under. Mr. Henderson advised that they were here to discuss with the Board the possibly of amending the Consent Order to include Computerized Tomography (CT). Also, since Dr. Kobs plans on retiring in 2008, suggested a random 10% check by a qualified radiologist and have the reports submitted quarterly to the Board in lieu of the one (1) year post graduate training in radiological studies in the current Consent Order.

After a brief discussion, motion was made by Dr. Crawford, seconded by Dr. Gibson, and carried to accept the Consent Order with the requested changes. A copy of the revised Consent Order is attached hereto and incorporated by reference.

UMC TELEMERGENCY PROGRESS UPDATE / PRESENTATION BY ROBERT GALLI, M.D.

Dr. Galli joined the meeting and provided the Executive Committee with an update on the progress of the TelEmergency program. After a brief discussion, Dr. Galli presented a presentation to the Executive Committee and requested expanding the current program to allow nurse practitioners working in hospitals in the emergency room to follow patients over the weekend once they are admitted on the floor. Dr. Galli advised this would be weekend coverage only and the nurse practitioners will be making rounds with the robot camera under the supervision of the UMC physician.

After a brief discussion, the Executive Committee unanimously agreed to allow the expansion and requested that Dr. Galli provide the Board with quarterly reports on the program.

EXECUTIVE COMMITTEE MINUTES November 7, 2007 Page 6

REVIEW OF NOVEMBER 8, 2007, BOARD AGENDA

Dr. Craig briefly reviewed the agenda for tomorrow's Board meeting.

ADJOURNMENT

There being no further business, the meeting adjourned at 4:30 p.m.

PHILIP T. MERIDETH, M.D., J.D.

Philip Merideth

President

Minutes taken and transcribed by Sherry Harris Staff Officer November 7, 2007

FAX: (601) 987-6822



MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE H. Vann Craig, M.D., Executive Director

November 20, 2007

TELEPHONE: (601) 987-3079

Practitioner name, M.D. Practice location address City and State zip code

Dear Dr. :

We have received information of an individual, (identity of patient), who may be obtaining controlled substance prescriptions from a number of physicians including you in the same time period. This appears to be drug seeking behavior on the part of this patient.

Reports indicate Mr/Ms (name) have received prescriptions for hydrocodone and xanax from you and the physicians listed (attached) in the past twelve months.

This information is being forwarded as a courtesy for you to determine your next course of treatment for this patient.

Sincerely,

Thomas Washington Bureau Director of Investigations

AGREEMENT TO APPEAR INFORMALLY BEFORE EXECUTIVE COMMITTEE

I, John Eric Henriksen, M.D., have requested an opportunity to appear informally before
he Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board")
o discuss possible resolution of a pending disciplinary matter/investigation or to respond to a
complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts
of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give
he Committee or its staff an opportunity to ask questions of me. Because the meeting is informal,
no disciplinary action will be taken without my express written consent. In so doing, I have been
advised and understand the following:

- 1. During the meeting, the Executive Committee may or may not be represented by legal counsel. Notwithstanding, I understand that I have a right, if I so choose, to employ legal counsel and have counsel present during the informal meeting.
- I authorize the Committee Members to review and examine any statements, documentary evidence, or materials concerning the allegations during my informal appearance.
- 3. Because the purpose of my appearance is to avoid a hearing before the Board, I agree that presentation to and consideration by the Committee of any facts, matters, and documents pertaining to my case shall not unfairly or illegally prejudice the Committee members from further participation or consideration in the event a formal disciplinary hearing is later conducted. Stated differently, in the event the pending matter is not resolved following my appearance before the Committee, I will not object to any of the Committee members from further participating in subsequent meetings or hearings that may be conducted in relation to this matter.
- 4. By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:

and retaining as treated above. That is created to proceed.	
with legal counsel present (name of counsel:	_)
<u>√</u> without legal counsel present	
EXECUTED, this the 7 day of November, 2007.	
Ole 11	

Witness. Merry Janis

AGREEMENT TO APPEAR INFORMALLY BEFORE EXECUTIVE COMMITTEE

- I, <u>Johnny Ray Bullock, Jr., M.D.</u>, have requested an opportunity to appear informally before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter "Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to give the Committee or its staff an opportunity to ask questions of me. Because the meeting is informal, no disciplinary action will be taken without my express written consent. In so doing, I have been advised and understand the following:
 - 1. During the meeting, the Executive Committee may or may not be represented by legal counsel. Notwithstanding, I understand that I have a right, if I so choose, to employ legal counsel and have counsel present during the informal meeting.
 - I authorize the Committee Members to review and examine any statements, documentary evidence, or materials concerning the allegations during my informal appearance.
 - 3. Because the purpose of my appearance is to avoid a hearing before the Board, I agree that presentation to and consideration by the Committee of any facts, matters, and documents pertaining to my case shall not unfairly or illegally prejudice the Committee members from further participation or consideration in the event a formal disciplinary hearing is later conducted. Stated differently, in the event the pending matter is not resolved following my appearance before the Committee, I will not object to any of the Committee members from further participating in subsequent meetings or hearings that may be conducted in relation to this matter.
 - 4. By signing my name in the space provided below, I hereby authorize the Executive Committee to proceed with the informal appearance, subject to the stipulations and understandings as noted above. I have elected to proceed:

with legal counsel present (nam	ne of cou	ınsel:	_)
without legal counsel present			
EXECUTED , this the day of			

Witness Therry Vauis

BEFORE THE MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

JOHNNY RAY BULLOCK, JR., M.D.

ORDER REMOVING ALL RESTRICTIONS

THIS MATTER came on regularly for consideration on November 7, 2007, before the Executive Committee of the Mississippi State Board of Medical Licensure, in response to the request of Johnny Ray Bullock, M.D. (hereinafter "Licensee"), seeking removal of all restrictions on his license to the practice medicine in the State of Mississippi. By virtue of that certain Consent Order dated March 19, 1999, and subsequent order and Re-Entry Contracts thereafter executed, Licensee's certificate to practice medicine in the State of Mississippi has been restricted since 1999. The Board is now in receipt of a request by Licensee to remove all restrictions, along with written confirmation of support and advocacy from the Mississippi Professionals Health Program (MPHP). The Committee has been submitted proof that Licensee has complied with all terms and conditions since the Board's last action on July 18, 2002. Further, the Mississippi Professional Health Program (MPHP) has tendered to the Board written confirmation of such advocacy. All prerequisites have now been met. Therefore, the Executive Committee of the Board, after hearing said request, finds the same to be well-taken.

IT IS HEREBY ORDERED, that Licensee's request for removal of all restrictions on his license to practice medicine is hereby granted. Licensee now holds an unrestricted license to practice medicine in the State of Mississippi.

IT IS FURTHER ORDERED, that pursuant to Miss. Code Ann. Sections 73-25-27 and 73-25-32 (1972), a copy of this Order shall be sent by registered mail or personally served upon Johnny Ray Bullock, M.D.

ORDERED, this the <u>Marketing</u> day of November, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH, JR., M.D., J.D.

PRESIDENT

AGREEMENT TO APPEAR INFORMALLY BEFORE EXECUTIVE COMMITTEE

I, <u>Darcey Gus Kobs, Jr., M.D.</u> , have requested an opportunity to appear informally
before the Executive Committee of the Mississippi State Board of Medical Licensure (hereinafter
"Board") to discuss possible resolution of a pending disciplinary matter/investigation or to respond
to a complaint duly received by the Board. It is the purpose of the informal meeting to discuss the
facts of the case, to give me an opportunity to ask questions of the Committee or its staff, and to
give the Committee or its staff an opportunity to ask questions of me. Because the meeting is
informal, no disciplinary action will be taken without my express written consent. In so doing, I have
been advised and understand the following:

- During the meeting, the Executive Committee may or may not be represented by legal counsel. Notwithstanding, I understand that I have a right, if I so choose, to employ legal counsel and have counsel present during the informal meeting.
- 2. I authorize the Committee Members to review and examine any statements, documentary evidence, or materials concerning the allegations during my informal appearance.
- 3. Because the purpose of my appearance is to avoid a hearing before the Board, I agree that presentation to and consideration by the Committee of any facts, matters, and documents pertaining to my case shall not unfairly or illegally prejudice the Committee members from further participation or consideration in the event a formal disciplinary hearing is later conducted. Stated differently, in the event the pending matter is not resolved following my appearance before the Committee, I will not object to any of the Committee members from further participating in subsequent meetings or hearings that may be conducted in relation to this matter.

EXECUTED, this the _____ day of _____ // Love m ons _____ 2007

Witness Herry Jaws

IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

DARCEY GUS KOBS, JR., M.D.

CONSENT ORDER

WHEREAS, **DARCEY GUS KOBS**, **JR.**, **M.D.**, hereinafter referred to as "Licensee," is the current holder of License Number No. 05934, issued December 4, 1969, to practice medicine in the State of Mississippi;

WHEREAS, on or about July 24, 2006, Forrest General Hospital, pursuant to terms and conditions of a Contract for Radiological Services with the Hattiesburg Radiology Group withdrew Licensee's privileges at the hospital pending further review by the Quality Management Committee (QMC) based on certain CT radiological interpretations performed by Licensee. On July 24, 2006, Licensee resigned from the medical staff of Forrest General Hospital. The basis for the QMC review of Licensee's interpretations was described in a National Practitioner Data Bank report as "substandard or inadequate skill level."

WHEREAS, such conduct, if established in a due process hearing before the Board, would constitute being disciplined by a licensed hospital or medical staff of said hospital or the voluntary surrender or resignation of hospital privileges while an investigation or disciplinary proceeding is being conducted by said licensed hospital medical staff; all in violation of Subsections (c) of Miss. Code Ann. Section 73-25-83, being grounds for which the Mississippi State Board of Medical Licensure may place Licensee's medical license on

probation, the terms of which may be set by the Board, suspend his right to practice for a time deemed proper by the Board, revoke said license, or take any other action in relation to said license as the Board may deem proper under the circumstances;

WHEREAS, Licensee through communications with the Mississippi State Board of Medical Licensure has expressed his desire to restrict himself to reading plain films and no longer take night or weekend call;

WHEREAS, so as to avoid a disciplinary hearing, Licensee has further agreed to memorialize his agreement with the Board by virtue of this Consent Order;

NOW, THEREFORE, Licensee hereby agrees to the following restrictions on his license to practice medicine in the State of Mississippi, to-wit:

- Until authorized by order of the Board, Licensee's radiology practice shall be limited to reading plain films and Computerized Tomography ("CT") films; however, such limitation shall not include Computerized Tomography Angiogram ("CTA") films.
- Until authorized otherwise by order of this Board, ten percent (10%) of all radiology reports issued by Licensee, chosen at random, shall be overread by a Mississippi licensed and qualified radiologist designated by the Board, and a comparative report shall be submitted on a quarterly basis to the Mississippi Board of Medical Licensure to the attention of its executive director.
- 3. Prior to petitioning the Board for removal of the above enumerated restrictions as voluntarily agreed to herein, Licensee shall complete an additional one (1) year post-graduate training in radiological studies at a facility and/or school approved in advance and in writing by the Mississippi State Board of Medical Licensure.
- 4. Pursuant to Miss. Code Ann., Section 73-25-30, Licensee agrees to pay all costs associated with the disciplinary action taken herein. Licensee shall be advised of the total assessment by separate written notification, and shall have a certified check or money order made payable to the Mississippi State Board of Medical Licensure on or before forty (40) days from the day of acceptance and approval of this Consent Order by the Board.

Licensee understands and expressly acknowledges that this Agreed Order shall constitute a public record of the State of Mississippi.

Recognizing his right to notice of charges specified against him, to have such charges adjudicated pursuant to Miss. Code (1972) Annotated, Sections 73-25-1 et seq., to be represented therein by legal counsel of his choice, and to a final decision based upon written findings of fact and conclusions of law, DARCEY GUS KOBS, JR., M.D., nonetheless hereby waives his right to notice and a formal adjudication of charges, and authorizes the Board to enter this Consent Order, thereby placing the above enumerated restrictions on his license to practice medicine in the State of Mississippi.

EXECUTED this the 154 day of November, 2007.

Mississippi State Board of Medical Licensure

By. Dhillip Maridath M.D. L.

President

ACCEPTED, this the <u>Jo</u> day of November, 2007.

Darcey Gus Kobs, M.D.

BOARD MINUTES MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE NOVEMBER 8, 2007

The regularly scheduled meeting of the Mississippi State Board of Medical Licensure was held on Thursday, November 8, 2007, in the Executive Conference Room of the Office of the Board located at 1867 Crane Ridge Drive, Jackson, Mississippi.

The following members were present:

Philip T. Merideth, M.D., J.D., Jackson, President Don A. Gibson, M.D., Richland, Vice President Larry B. Aycock, M.D., McComb Dewitt G. Crawford, M.D., Louisville Virginia M. Crawford, M.D., Hattiesburg A. Wallace Conerly, M.D., Jackson

Also present::

H. Vann Craig, M.D., Director
Stan T. Ingram, Complaint Counsel for the Board
Ellen O'Neal, Assistant Attorney General
Rhonda Freeman, Bureau Director, Licensure Division
Thomas Washington, Bureau Director, Investigative Division
Frances Scott, Special Projects Officer, Investigative Division
Sherry Harris, Staff Officer
Wesley Breland, Hattiesburg, Consumer Health Committee
Cecil R. Burnham, Jackson, Consumer Health Committee
Martha Thompson, Oxford, Consumer Health Committee

Not present:

William S. Mayo, D.O., Oxford, Secretary S. Randall Easterling, M.D., Vicksburg William B. Harper, D.O., Greenwood

The meeting was called to order at 9:15 a.m. by Dr. Merideth, President. The invocation was given by Mr. Breland and the pledge was led by Dr. Gibson. Dr. Merideth welcomed Harvey Rayborn, Court Reporter. Dr. Merideth introduced and welcomed two (2) visitors from the Federation of State Medical Boards, Ms. Carol Clothier, Vice President, Examination and Post-Licensure Services, and Stacy Lankford, M.D., Chairman of the Board of Directors. Dr. Merideth extended a welcome to all visitors present at the meeting.

Dr. Merideth opened the floor for public comments. There were no public comments brought before the Board for discussion.

APPROVAL OF CERTIFICATION OF MISSISSIPPI LICENSES TO OTHER ENTITIES FOR THE PERIOD SEPTEMBER 01, 2007, THROUGH OCTOBER 31, 2007

Dr. Merideth advised that we are in a transition period and changing certifications to Veridoc. Due to the transition, Dr. Merideth advised that the total number of certifications from local records and Veridoc totals one hundred thirty-one (131) licenses that were certified to other entities for the period September 01, 2007, through October 31, 2007. Motion was made by Dr. Gibson, seconded by Dr. D. Crawford, and carried unanimously to approve these certifications.

APPROVAL OF LICENSES ISSUED FOR THE PERIOD SEPTEMBER 01, 2007, THROUGH OCTOBER 31, 2007

Sixty-seven (67) licenses were issued for the period September 01, 2007, through October 31, 2007. Motion was made by Dr. D. Crawford, seconded by Dr. Aycock, and carried unanimously to approved these licenses.

REVIEW OF MINUTES OF THE EXECUTIVE COMMITTEE MEETING DATED SEPTEMBER 19, 2007, MINUTES OF THE BOARD MEETING DATED SEPTEMBER 20, 2007, AND MINUTES OF THE EXECUTIVE COMMITTEE MEETING DATED OCTOBER 22, 2007

Minutes of the Executive Committee Meeting dated September 19, 2007, and Minutes of the Board Meeting dated September 20, 2007, were reviewed. Dr. Aycock moved for approval of the minutes as submitted. Dr. Gibson seconded the motion, and it carried unanimously.

Minutes of the Executive Committee Meeting dated October 22, 2007, were reviewed. Dr. Aycock moved for approval of the minutes as submitted. Dr. D. Crawford seconded the motion, and it carried unanimously.

REPORT OF NOVEMBER 7, 2007, EXECUTIVE COMMITTEE MEETING

Dr. Craig briefly reported on the November 7, 2007, Executive Committee meeting.

Dr. Craig advised that at the September 20, 2007, Board meeting, the Board voted to invite John Eric Henriksen, M.D., to appear before the Executive Committee to discuss the order that he is currently under with the Arkansas Board. Dr. Craig advised that Dr. Henriksen appeared before the Executive Committee, along with Gary D. Carr, M.D., Medical Director, Mississippi Professionals Health Program (MPHP). Dr. Craig advised that Arkansas does not currently monitor boundary issues but that Dr. Carr had agreed with Arkansas to monitor Dr. Henriksen. Dr. Craig advised that the Executive Committee unanimously agreed for Dr. Henriksen to enter into a monitoring contract with MPHP and have Dr. Carr provide the Board with regular reports.

Dr. Craig advised that Robert Galli, M.D., provided the Executive Committee with an update on the progress of the TelEmergency program at the University Medical Center (UMC) as well as presented a presentation requesting expanding the program so that nurse practitioners can provide weekend coverage as hospitalists making rounds on patients that are admitted to the hospital. Dr. Craig advised that Dr. Galli stated this request was for weekend coverage only.

Dr. Aycock asked several questions about the concept and there was a brief discussion about the request. After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. D. Crawford to approve Dr. Galli's request for the expansion of the TelEmergency Program. All Board members present, with the exception of Dr. Aycock, who voted against the approval, voted to approve the request for the expansion.

Dr. Craig advised that the Executive Committee unanimously voted to approve a form letter to be sent to physicians with patients demonstrating suspicious drug behavior patterns to advise them of the matter. A copy of the form letter was distributed to all Board members for review.

Dr. Craig presented other informational items which are reflected in the Executive Committee Minutes. Motion was made by Dr. Dr. Crawford, seconded by Dr. Gibson, and carried to approve the actions of the Executive Committee.

REPORTS FROM COMMITTEES

Consumer Health - Mr. Breland (Chair), Ms. Thompson, Mr. Burnham

Mr. Breland advised there was no new information to report.

Education & Workforce - Dr. Conerly (Chair), Dr. D. Crawford, Dr. Mayo

Dr. Conerly advised there was no new information to report.

Scope of Practice - Dr. V. Crawford (Chair), Dr. Easterling, Dr. Aycock

Dr. V. Crawford advised there was no new information to report.

Professional Health Program - Dr. Gibson (Chair), Dr. Mayo, Dr. Merideth

Dr. Gibson advised there was no new information to report.

Rules, Regulation & Legislative - Dr. Easterling (Chair), Dr. D. Crawford, Dr. Harper

In Dr. Easterling's absence, Dr. D. Crawford reported on proposed 2008 legislation. Dr. Crawford briefly discussed two (2) bills that the Committee would like to have introduced for legislation in 2008.

- 1) A bill to increase the cap on annual license renewal for physicians and podiatrists from \$200 to \$400. Dr. Crawford advised that the legislation was for a new cap and that it would provide a means to allow an incentive to renew online versus manual renewing.
- 2) A bill providing the Executive Director ability to issue subpoenas during investigations for needed medical records. Dr. Crawford advised the purpose of the request is for investigatory subpoena power.

After a brief discussion, motion was made by Dr. D. Crawford, seconded by Dr. Conerly and carried unanimously to promote the two (2) bills for introduction during the 2008 legislative session. Dr. Craig advised that the Mississippi State Medical Association supports the bill allowing investigatory subpoena power.

Ethics - Dr. Merideth (Chair), Dr. V. Crawford, Dr. Conerly

Dr. Merideth advised that the Ethics Committee met earlier today and distributed a copy of their proposed policy concerning the sale of goods from a physician's office. Dr. Merideth requested that the Board members review the proposed policy and the matter would be discussed and voted on later in the meeting.

Electronic Medical Records - Dr. Aycock (Chair), Dr. V. Crawford, Dr. Mayo

Dr. Aycock advised that the Board had received a letter from the National Association of Chain Drug Stores (NACDS), advising their concern about proposed

language that would prohibit prescriptions for products listed in the rule from being electronically transmitted. After a brief discussion, motion was made by Dr. Aycock, seconded by Dr. D. Crawford, and carried unanimously to leave the language as it is currently in the regulation.

THE BOARD RECESSED AT 9:55 A.M. AND RECONVENED AT 10:05 A.M.

Dr. Merideth called the session back in order and advised that the court reporter had to leave at noon. In order to have the hearings on record, Dr. Merideth advised we would be making some changes to the order of the agenda.

PRESENTATION BY THE FEDERATION OF STATE MEDICAL BOARDS

Dr. Merideth introduced Stacy Lankford, M.D., Chairman of the Board of Directors, and Ms. Carol Clothier, Vice President, Examination and Post-Licensure Services, from the Federation. Dr. Lankford and Ms. Clothier gave an informative presentation concerning their organization and discussed areas of services provided to state medical boards by the Federation. After their presentation, the floor was opened for a question and answer session.

APPEAL IN THE CASE OF CHARLES S. KNIGHT, M.D., JACKSON, MISSISSIPPI MEDICAL LICENSE NUMBER 06210

Stan Ingram, Complaint Counsel for the Board, addressed the Board and provided a brief history of the case. Mr. Ingram advised that Dr. Knight in the appeal was appealing the assessment of costs and requesting clarification of the clinical skills assessment exam.

Dr. Knight was present for meeting and represented by Joel W. Howell, III, and Jeffrey Knight. Mr. Howell addressed the Board and advised that Dr. Knight was appealing the assessment of costs because §73-25-30 states the costs are for disciplinary actions and they feel Dr. Knight's case is not a disciplinary matter. Also, Mr. Howell advised they were wanting clarification on the clinical skills assessment exam. Mr. Howell proposed that Dr. Knight be allowed to be proctored in the clinical skills assessment locally by two (2) physicians. Mr. Howell advised that Dr. Knight wants to teach and read charts and needs an unrestricted license.

After a brief discussion, Dr. Merideth advised that the Board would take the appeal under advisement and make a decision later in order to have all hearings heard before the court reporter had to leave.

Following Executive Session at the end of the meeting, the Board's decision is that the "clinical skills assessment exam" in paragraph 4 of the Order be clarified to mean a Board approved nationally recognized facility and not a locally proctored exam, and to overturn the decision regarding the assessment of costs as stated in paragraph 7 of the order. A copy of the Order on Appeal is attached hereto and incorporated by reference.

HEARING IN THE CASE OF HAROLD T. COULTER, M.D., OCEAN SPRINGS, MISSISSIPPI MEDICAL LICENSE NUMBER 14334

Dr. Coulter was present at the meeting and represented by William Kulick, Esq.

Mr. Ingram addressed the Board and introduced Dr. Coulter and Mr. Kulick. Mr. Ingram provided a brief history of the case and advised that the Executive Committee had presented Dr. Coulter with a proposed Consent Order. Mr. Ingram advised that the proposed Consent Order would suspend Dr. Coulter's license for one (1) year, with the suspension stayed after three (3) months, and for a period of at least one (1) year thereafter, Dr. Coulter's controlled substance be limited to Schedule V only.

Mr. Kulick addressed the Board and requested that Dr. Coulter be able to serve his three (3) month suspension in the spring after the flu season and to allow Dr. Coulter ample time to notify his patients.

Dr. Coulter addressed the Board and answered several questions concerning his current practice.

Dr. Merideth advised that the Board would take the matter under advisement and discuss the matter after all hearings have been heard.

Following Executive Session at the end of the meeting, the Board's decision is to accept the entry of a Consent Order with the date of suspension to be effective January 1, 2008. A copy of the Consent Order and the Order Approving Consent Order and Setting Effective Date are attached hereto and incorporated by reference.

HEARING IN THE CASE OF RAY HARRON, M.D., BRIDGEPORT, WV, MISSISSIPPI MEDICAL LICENSE NUMBER 14223

HEARING IN THE CASE OF ANDREW W. HARRON, D.O., KENOSHA, WI, MISSISSIPPI MEDICAL LICENSE NUMBER 17572

Dr. Ray Harron nor Dr. Andrew Harron were present at the meeting or represented by legal council.

Mr. Ingram addressed the Board and advised that Dr. Ray Harron and Dr. Andrew Harron had signed and submitted Agreed Orders not to renew or seek reinstatement of their Mississippi medical license. Mr. Ingram advised the Board that this would be a permanent solution to the problem and their actions would be reportable.

After a brief discussion, Dr. Merideth advised that the Board would take the matter under advisement and discuss the matter after all hearings have been heard.

Following Executive Session at the end of the meeting, the Board's decision is to accept entry of Dr. Ray Harron's and Dr. Andrew Harron's Agreed Order as presented. A copy of both Agreed Orders is attached hereto and incorporated by reference.

HEARING IN THE CASE OF STANLEY C. RUSSELL, M.D., BRANDON, MISSISSIPPI MEDICAL LICENSE NUMBER 03623

HEARING IN THE CASE OF NEIL B. SLOAN, M.D., CORINTH, MISSISSIPPI MEDICAL LICENSE NUMBER 19029

Dr. Stanley nor Dr. Sloan were present at the meeting or represented by legal council.

Mr. Ingram addressed the Board and advised that he was requesting a continuance in the hearing of Stanley Russell, M.D., and that the attorney for Dr. Neil Sloan, D. Collier Graham, Jr., had requested a continuance.

After a brief discussion, motion was made by Dr. D. Crawford, seconded by Dr. Aycock and carried unanimously to grant continuances to Dr. Russell and Dr. Sloan until the January 24, 2008, Board meeting. The Orders of Continuance are attached hereto and incorporated by reference.

THE BOARD RECESSED FOR LUNCH AT 12:15 P.M. AND RETURNED AT 1:00 P.M.

PRESENTATION BY STAN INGRAM, COMPLAINT COUNSEL FOR THE BOARD

Mr. Ingram presented an informative presentation concerning the legal basis the Board has and the procedural process taken. Mr. Ingram covered the rules of procedure and explained his job as the prosecuting attorney and Ms. O'Neal's job as the objective advisor from the Attorney General's office.

The presentation was followed by a brief question and answer period.

MS. THOMPSON AND MR. INGRAM EXITED THE MEETING AT 1:40 P.M.

THE BOARD RECESSED AT 1:40 P.M. AND RETURNED AT 1:50 P.M.

PRESENTATION BY BARRY K. COCKRELL AND LIFELINE SCREENING

Dr. Craig advised that LifeLine Screening had made an appearance before the Board in 2003 and granted temporary approval for their program. Dr. Craig advised that representatives from LifeLine were here today to answer questions and provide the Board with a presentation.

Barry Cockrell, Esq. for LifeLine Screening, Colin Scully, CEO, LifeLine Screening, and Andy Manganaro, M.D., National Medical Director with LifeLine Screening presented an informative presentation concerning the services provided. Dr. Manganaro advised that they provide three (3) tests for \$140.00 and if they identify any problem, they in turn advise the patient to see their personal physician for additional testing within 24 hours. Dr. Manganaro advised that the individuals using their services must provide LifeLine Screening with the name of their personal physician.

After a brief question and answer period, Dr. Merideth requested that LifeLine Screening provide the Board with yearly follow-up reports advising the number of patients seen, the number of positive findings, etc. Mr. Scully advised that LifeLine Screening would be happy to supply the Board with annual updates.

PRESENTATION BY SCOTT GILBERT, PRESIDENT, A BRIDGE TO RECOVERY

Scott Gilbert, President, Denise Marsters, and Kelley Pears, PhD, of A Bridge to Recovery gave an informative overview of their outpatient treatment facility in Ridgeland, Ms.

Mr. Gilbert addressed the Board's concern of no Medical Director and he advised that they are an outpatient facility and they do no detoxification. A Bridge to Recovery refers patients that need residential treatment.

After a brief discussion, motion was made by Dr. Gibson, seconded by Dr. V. Crawford, and carried unanimously that the Board approve of Mississippi Professionals Health Program (MPHP) referring patients for outpatient treatment to A Bridge to Recovery.

MR. BURNHAM EXITED THE MEETING AT 3:00 P.M.

PROPOSED AMENDMENT TO REGULATIONS CONCERNING LICENSURE REQUIREMENTS FOR THE PRACTICE OF MEDICAL DOCTORS, OSTEOPATHIC PHYSICIANS, AND PODIATRISTS

Dr. Merideth advised that at the September 20, 2007, Board meeting the matter of medical schools not being approved at the time foreign medical students graduate needed to be addressed.

Proposed amendments to the current regulations were discussed. Motion was made by Dr. D. Crawford, seconded by Dr. Gibson, and carried unanimously of the Board's intent to adopt the proposed amendment **Concerning Licensure Requirements for medical doctors, osteopathic physicians, and podiatrists**. A copy of both proposed amendments are attached hereto and incorporated by reference. Copies of both proposed amendments of the regulations will be filed with the Secretary of State under the Administrative Procedures Act.

PROPOSED AMENDMENT TO REGULATION CONCERNING CME REQUIREMENTS

Dr. Craig advised that the proposed changes to the regulation was needed to address the issue that initial board certification be from a speciality board recognized by the American Board of Medical Specialties or the American Osteopathic Association.

Motion was made by Dr. D. Crawford, seconded by Dr. Conerly, and carried unanimously of the Board's intent to adopt the proposed amendment of the Board's **Regulation Concerning CME Requirements**. A copy of the proposed amendment is attached hereto and incorporated by reference. The proposed amended regulation will be filed with the Secretary of State under the Administrative Procedures Act.

PROPOSED AMENDMENT TO REGULATION CONCERNING PHYSICIAN ADVERTISING

Dr. Craig briefly discussed the need for language changes to clarify our current regulation concerning physician advertising.

Motion was made by Dr. D. Crawford, seconded by Dr. Conerly, and carried unanimously of the Board's intent to adopt the proposed amendment of the Board's **Regulation Concerning Physician Advertising**. A copy of the proposed amendment is attached hereto an incorporated by reference. The proposed amended regulation will be filed with the Secretary of State under the Administrative Procedures Act.

FINAL ADOPTION OF AMENDED REGULATION PERTAINING TO PRESCRIBING, ADMINISTERING, AND DISPENSING OF MEDICATION

Dr. Craig advised that the Board had received one comment letter after the 20 day comment period from the National Association of Chain Drug Stores (NACDS), advising their concern about proposed language that would prohibit prescriptions for products listed in the rule from being electronically transmitted.

After a brief discussion, motion was made by Dr. D. Crawford, seconded by Dr. V. Crawford, and carried unanimously of the Board's intent to final adopt the amended regulation without changes to the current language. A copy of the amended regulation is attached hereto and incorporated by reference. The regulation will be filed with the Secretary of State under the Administrative Procedures Act.

Ms. Jane Tallant, RN, with the Board of Nursing (BON), advised the Board of their intent to jointly promulgate the language.

FINAL ADOPTION OF AMENDED REGULATION CONCERNING THE PRACTICE OF RADIOLOGIST ASSISTANTS

Motion was made by Dr. Aycock, seconded by Dr. Gibson, and carried unanimously to adopt in final form the Board's amended **Regulation Concerning the Practice of Radiologist Assistants**, a copy of which is attached hereto and incorporated by reference. The regulation will be filed with the Secretary of State under the Administrative Procedures Act.

OTHER BUSINESS

Dr. Merideth opened the floor for comments or suggestions concerning the Ethics Committee's proposed policy concerning the Sale of Goods from Physician Offices. After a brief discussion, motion was made by Dr. D. Crawford, seconded by Dr. Gibson, and carried unanimously to adopt as Board policy. The policy will be posted on the Board's website. A copy of the policy is attached hereto and incorporated by reference.

After a brief discussion about the date for the January 2008 meeting, the Board's unanimous decision was to schedule the meeting for January 24, 2008.

Motion was made by Dr. Gibson, seconded by Dr. Conerly, and carried unanimously to consider going into Executive Session to consider the hearings from earlier today. With a motion by Dr. Conerly and seconded by Dr. D. Crawford, the Board went into Executive Session.

Upon a motion by Dr. D. Crawford, seconded by Dr. Conerly, and carried unanimously, the Board came out of Executive Session at which time Dr. Merideth announced the results of the appeal in the case of Charles S. Knight, M.D., as well as the results in the hearings of Harold T. Coulter, M.D., Ray Harron, M.D., and Andrew W. Harron, D.O., all which are included previously in the minutes.

ADJOURNMENT

The meeting adjourned at 4:15 P.M., with the next meeting scheduled for Thursday, January 24, 2008.

PHILIP T. MERIDETH, M.D., J.D.

President

Minutes taken and transcribed by Sherry Harris Staff Officer November 8, 2007

AGENDA ITEM: XIV. Appeal in the case of Charles S. Knight, M.D.

Motion made by Dr. V. Crawford, seconded by Dr. Aycock, and carried unanimously that the "clinical skills assessment exam" in paragraph 4 of the Order be clarified to mean a Board approved nationally recognized facility and not be a locally proctored exam.

<u>VOTE</u> :	<u>FOR</u>	<u>AGAINST</u>	<u>ABSTAIN</u>	<u>ABSENT</u>
Larry B. Aycock, M.D.	X			
A. Wallace Conerly, M.D.	Χ			
Dewitt G. Crawford, M.D.	X			
Virginia M. Crawford, M.D.	Χ			
S. Randall Easterling, M.D.				X
Don A. Gibson, M.D.	Χ			
William B. Harper, D.O.				X
William S. Mayo, D.O.				X
Philip T. Merideth, M.D., J.D.	Χ			

Philip T. Merideth, M.D., J.D

AGENDA ITEM: XIV. Appeal in the case of Charles S. Knight, M.D.

Motion made by Dr. Aycock, seconded by Dr. D. Crawford, and carried to affirm the decision regarding the assessment of costs as stated in paragraph 7 of the Order.

<u>VOTE</u> :	<u>FOR</u>	<u>AGAINST</u>	<u>ABSTAIN</u>	ABSENT
	.,			
Larry B. Aycock, M.D.	X			
A. Wallace Conerly, M.D.	X			
Dewitt G. Crawford, M.D.	Χ			
Virginia M. Crawford, M.D.	Χ			
S. Randall Easterling, M.D.				X
Don A. Gibson, M.D.	Χ			
William B. Harper, D.O.				X
William S. Mayo, D.O.				X
Philip T. Merideth, M.D., J.D.		X		

Philip T. Merideth, M.D., J.D.

AGENDA ITEM: XV. Hearing in the case of Harold T. Coulter, M.D.

Motion made by Dr. D. Crawford, seconded by Dr. Gibson, and carried unanimously to accept the entry of a Consent Order with the date of suspension to be effective on January 1, 2008.

VOTE:	<u>FOR</u>	<u>AGAINST</u>	<u>ABSTAIN</u>	ABSENT
	V			
Larry B. Aycock, M.D.	Х			
A. Wallace Conerly, M.D.	X			
Dewitt G. Crawford, M.D.	X			
Virginia M. Crawford, M.D.	X			
S. Randall Easterling, M.D.				X
Don A. Gibson, M.D.	Χ			
William B. Harper, D.O.				X
William S. Mayo, D.O.				X
Philip T. Merideth, M.D., J.D.	Χ			

Philip T. Merideth, M.D., J.D.

AGENDA ITEM: XVI. Hearing in the case of Ray Harron, M.D.

Motion made by Dr. D. Crawford, seconded by Dr. Gibson, and carried unanimously to accept the entry of the Consent Order as presented.

VOTE:	<u>FOR</u>	<u>AGAINST</u>	<u>ABSTAIN</u>	<u>ABSENT</u>
Larry B. Aycock, M.D.	X			
A. Wallace Conerly, M.D.	X			
Dewitt G. Crawford, M.D.	X			
Virginia M. Crawford, M.D.	X			
S. Randall Easterling, M.D.				X
Don A. Gibson, M.D.	X			
William B. Harper, D.O.				X
William S. Mayo, D.O.				X
Philip T. Merideth, M.D., J.D.	X			

Philip T. Merideth, M.D., J.D.

AGENDA ITEM: XVII. Hearing in the case of Andrew W. Harron, D.O.

Motion made by Dr. D. Crawford, seconded by Dr. Gibson, and carried unanimously to accept the entry of the Consent Order as presented.

<u>VOTE</u> :	<u>FOR</u>	<u>AGAINST</u>	<u>ABSTAIN</u>	<u>ABSENT</u>
Larry B. Aycock, M.D.	X			
A. Wallace Conerly, M.D.	X			
Dewitt G. Crawford, M.D.	X			
Virginia M. Crawford, M.D.	X			
S. Randall Easterling, M.D.				X
Don A. Gibson, M.D.	X			
William B. Harper, D.O.				X
William S. Mayo, D.O.				X
Philip T. Merideth, M.D., J.D.	X			

With a motion by Dr. D. Crawford, seconded by Dr. Conerly, the Board came out of Executive Session.

Philip T. Merideth, M.D., J.D.

TELEPHONE: (601) 987-3079



FAX: (601) 987-6822

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

H. Vann Craig, M.D., Executive Director

November 20, 2007

Practitioner name, M.D. Practice location address City and State zip code

Dear Dr. :

We have received information of an individual, (identity of patient), who may be obtaining controlled substance prescriptions from a number of physicians including you in the same time period. This appears to be drug seeking behavior on the part of this patient.

Reports indicate Mr/Ms (name) have received prescriptions for hydrocodone and xanax from you and the physicians listed (attached) in the past twelve months.

This information is being forwarded as a courtesy for you to determine your next course of treatment for this patient.

Sincerely,

Thomas Washington
Bureau Director of Investigations

BEFORE THE MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

CHARLES KNIGHT, M.D.

ORDER ON APPEAL

THIS MATTER having come on for hearing on November 8, 2007, before the Mississippi State Board of Medical Licensure (hereinafter "Board"), pursuant to Title 73, Chapter 25 of Mississippi Code Annotated, in response to the appeal by Charles Knight, M.D., hereinafter "Licensee", seeking clarification of the action taken by the Executive Committee on June 30, 2007, following a full evidentiary hearing and issuance of that certain Order dated July 25, 2007, denying reinstatement of license, but setting forth certain terms and conditions which Licensee must meet in order to return to practice.

Licensee does not appeal the Board's Findings of Fact or Conclusions of Law. rather, Licensee's appeal seeks clarification of Paragraphs 4 and 7 of the Board's Order. Specifically, Licensee requests clarification of the "clinical skills assessment exam" referenced in Paragraph 4 of said Order, and seeks to assign error to the Board's assessment of costs referenced in Paragraph 7.

After consideration of all oral arguments of counsel and pleadings filed herein on appeal, the Board hereby affirms in part and amends in part the Order rendered by the Executive Committee on July 25, 2007. Specifically, the Board affirms the actions of the Executive Committee to the extent that the "clinical skills assessment exam" must be conducted by a facility approved in writing by the Board and selected by Licensee from a

list of out-of-state facilities which have experience in conducting clinical assessment evaluations. Licensee's proposal to employ the services of local physicians and/or the University of Mississippi to conduct such an evaluation or clinical assessment is hereby denied.

The Board is in agreement with Licensee's argument that assessment of costs as set forth in Miss. Code Ann. §73-25-30 should not be assessed to Licensee in this particular situation. The Board disagrees with Licensee's argument that he would not be deemed to be the holder of a license as Licensee specifically retained the right pursuant to §73-25-14 to seek reinstatement and/or renewal of the same. The Board's decision not to assess is based upon the merits of the case, and its desire not to assess costs to Licensee in this particular instance.

As this was a limited appeal, all other terms and conditions as set forth in the referenced Order rendered by the Board on July 25, 2007, remain in full force and effect.

SO ORDERED, this the 34 day of November, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH, M.D., J.D.,

PRESIDENT

BEFORE THE MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE
IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

HAROLD TODD COULTER, M.D.

ORDER APPROVING
CONSENT ORDER AND SETTING EFFECTIVE DATE

THIS MATTER came on regularly for hearing on November 8, 2007, before the

Mississippi State Board of Medical Licensure, in response to a request for Harold Todd Coulter.

M.D. (hereinafter "Licensee"), to approve Consent Order and to set an effective date thereof.

Licensee was present and represented by Honorable William Kulick, Ocean Springs,

Mississippi. Stan Ingram, Complaint Counsel for the Board presented the Consent Order, which

was approved by the Board's Executive Committee. After consideration of the matter, the

Board finds the Consent Order to be a proper resolution of the pending disciplinary proceedings.

However, Licensee's motion to use March or April, 2008 as an effective date of licensure

suspension is not well taken. The Board believes that a January 1, 2008 effective date would

be appropriate.

IT IS, THEREFORE, ORDERED, that the Consent Order duly executed by Licensee on

October 31, 2007 is hereby approved and accepted,

IT IS FURTHER ORDERED, that the three (3) month suspension as called for in the

Consent Order shall take effect January 1, 2008 and shall end on March 31, 2008.

SO ORDERED, this the 8th day of November, 2007.

MISSISSIPPI STATE BOARD OF

MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH, M.D., J.D.

PRESIDENT

IN THE MATTER OF PHYSICIAN'S LICENSE OF HAROLD TODD COULTER, M.D.

CONSENT ORDER

WHEREAS, Licensee is current holder of License No. 14334 for the practice of medicine in the State of Mississippi;

WHEREAS, the Investigative Staff of the Mississippi State Board of Medical Licensure has conducted a comprehensive investigation into the medical practice of HAROLD TODD COULTER, M.D., Ocean Springs, Mississippi, and has documented evidence indicating that Dr. Coulter, hereinafter referred to as "Licensee," is in violation of the Rules and Regulations of the Board "Pertaining to Prescribing, Administering and Dispensing of Medication" by administering, dispensing or prescribing narcotic drugs, or any other drug having addiction-forming or addiction-sustaining liability, otherwise than in the course of legitimate professional practice;

WHEREAS, there is also pending before the Board charges that Licensee committed acts of unprofessional conduct in relation to his involvement with silicosis screenings and performing occupational reports and patient evaluations.

WHEREAS, such conduct, if established before the Board, constitutes violation of the Mississippi Medical Practice Act and specifically, Subsections (3), (8)(d) and (13) of Section 73-25-29, and Section 73-25-83(a) Mississippi Code (1972) as amended, for which the Mississippi State Board of Medical Licensure may revoke the medical license of Licensee, suspend it for a time deemed proper by the Board, or take any other action the Board may deem proper under the circumstances;

WHEREAS, Licensee wishes to avoid a hearing before the Mississippi State Board of Medical Licensure and in lieu thereof has consented to the suspension of his license and stay of said suspension subject to the terms, conditions, and restrictions as specified below;

NOW THEREFORE, the Mississippi State Board of Medical Licensure, with consent of Licensee as signified by his joinder herein, does hereby suspend Licensee's certificate (No. 14334) to practice medicine in the State of Mississippi for a period of one (1) year, with the suspension stayed after expiration of three (3) months from the date of this order, subject to the following terms and conditions, to-wit:

- 1. During the three (3) month period of active suspension, Licensee shall successfully complete a continuing medical education course pertaining to the clinical, legal and ethical issues of prescribing abusable **medication**, chosen by Licensee from a list of Board approved CME programs attached hereto as Exhibit "A" and incorporated herein by reference;
- 2. Upon his return to practice following expiration of the three (3) month period of active suspension, and for a period of at least one (1) year thereafter, Licensee's controlled substance privileges (prescribing, administering, and dispensing) shall be limited to Schedule V. Licensee shall execute such forms or documents so as to surrender his U.S. Drug Enforcement Administration (DEA) Uniform Controlled Substances Registration Certificate pertaining to Schedules II, IIN, III, IIIN, and IV. After expiration of the one (1) year period following his return to practice, Licensee shall have the right to petition the Board for return of part or all of his controlled substances privileges. When considering return of Controlled Substances Privileges, the Board will take into consideration: (i) whether or not Licensee successfully completed the medical education course mandated at paragraph 1 above, (ii) whether or not Licensee at all times preceding his petition and Board appearance, properly prescribed, administered, and dispensed those controlled substances for which he then held privileges, and (iii) Licensee's compliance with all remaining terms and conditions of this agreement. In the event less than all controlled substance privileges are returned, Licensee shall then have the right to again petition the Board for return of all or portion of the remaining schedules at reasonable intervals, but no more often than one petition every twelve (12) months.

- 3. Licensee shall comply with all Federal and State laws governing the practice of medicine and shall comply with the rules and regulations of the Board "Pertaining to Prescribing, Administering and Dispensing of Medication," including, but not limited to:
 - (a) Licensee shall maintain a complete record of his examination, evaluation and treatment of patients, including documentation of the diagnosis and reason for prescribing, dispensing or administering any controlled substances or <u>other mood</u> <u>altering substance</u>; the name, dose, strength, quantity of the medication, and the date the medication was prescribed, dispensed or administered.
 - (b) Whenever issuing a prescription for a controlled substance or <u>other mood altering</u> <u>substance</u>, Licensee shall, in addition to that set forth in sub-paragraph (a) above, enter into the patient record the following information:
 - i Vital signs, whenever possible.
 - ii Status of treatment plan and prognosis.
 - iii If the patient is requesting additional medication too early, i.e., has consumed previously prescribed medications (including refills) contrary to Licensee's specific directions, the purpose and reason for the patient's additional request and/or unauthorized dose escalation.
 - iv Licensee's observation of the patient.
 - (c) Licensee shall not prescribe, administer, or dispense any controlled substance or other <u>mood altering substance</u> without a good faith prior examination and medical indication thereof.
- 4. Licensee's practice of medicine shall be subject to periodic surveillance by the Mississippi State Board of Medical Licensure to monitor compliance with any Board approved plan of practice. The Board's medical Executive Director, any member of the Board, or investigative

staff may perform a patient chart review of a representative sample of those patients treated by Licensee.

- 5. Licensee shall notify the Board within ten (10) days of any change in his practice location and/or change in employment.
- 6. Licensee shall reimburse the Board for all costs incurred in relation to the pending matter pursuant to Miss. Code Arm. Section 73-25-30.

This Consent Order shall be subject to approval by the Board. If the Board fails to approve this Consent Order, in whole or in part, it shall have no force or effect on the parties. It is further understood and agreed that the purpose of this Consent Order is to avoid a hearing before the Board. In this regard, Licensee authorizes the Board to review and examine any documentary evidence or material concerning the Licensee prior to, or in conjunction with its consideration of this Consent Order. Should this Consent Order not be accepted by the Board, it is agreed that presentation to and consideration of the Consent Order and other documents and matters pertaining thereto by the Board shall not unfairly or illegally prejudice the Board or any of its members from further participation or consideration of the resolution of the proceeding.

Acceptance and entry of this Consent Order shall constitute a full and complete resolution of all charges now pending against Licensee before the Board.

Licensee understands and expressly acknowledges that this Consent Order, if approved and executed by the Mississippi State Board of Medical Licensure, shall constitute a public record of the State of Mississippi. Licensee further acknowledges that the Board shall provide a copy of this Order to, among others, **the National Practitioner Data Bank and** the U.S. Drug Enforcement Administration, and the Board makes no representation as to actions, if any, which the U.S. Drug Enforcement Administration may take in response to this Order.

Recognizing his right to notice of charges specified against him, to have such charges adjudicated pursuant to Miss. Code (1972) Annotated, Sections 73-25-27 and 73-25-83, to be represented therein by legal counsel of his choice, and to a final decision based upon written

findings of fact and conclusions of law, HAROLD TODD COULTER, M.D., nonetheless hereby waives his right to notice and a formal adjudication of charges and authorizes the Board to enter this Consent Order, thereby suspending his license to practice medicine in the State of Mississippi, subject to the terms and conditions enumerated above.

EXECUTED, this the 3/3 day of October, 2007.

HAROLD TODD COULTER, M.D.

ACCEPTED AND APPROVED this the 8th day of November, 2007, by the MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE.

PHILIP T. MERIDETH, M.D., J.D., PRESIDENT

IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

RAY A. HARRON, M.D.

AGREED ORDER NOT TO RENEW OR SEEK REINSTATEMENT OF MEDICAL LICENSE

WHEREAS, RAY A. HARRON, M.D. hereinafter referred to as "Licensee," is the current holder of License Number 14223, issued January 9, 1995, to practice medicine in the State of Mississippi;

WHEREAS, On or about April 13, 2007, based on allegations related to silica/silicosis litigation and Licensee's determination and signature on x-ray findings of silicosis for numerous silicosis plaintiffs, Licensee entered into an Agreed Order with the Texas Medical Board wherein Licensee agreed not to practice medicine in the period before Licensee's Texas medical license (#C9439) expires, not to renew his Texas medical license after it expires, and not to petition the Texas Medical Board for reinstatement or re-issuance of Licensee's Texas medical license. A copy of said Agreed Order is attached hereto as Attachment "A".

WHEREAS, such conduct, if established in a due process hearing before the Board might constitute the surrender of License to practice medicine in another state or jurisdiction while under disciplinary investigation; which conduct violates the Mississippi State Board of Licensure Laws; being grounds for which the Mississippi State Board of Medical Licensure may place Licensee's medical license on probation, the terms of which may be set by the Board, suspend his

right to practice for a time deemed proper by the Board, revoke said license, or take any other action in relation to said license as the Board may deem proper under the circumstances;

WHEREAS, on July 11, 2007, the Board was in receipt of a letter of same date from Licensee's attorney, advising the Board that Licensee had permitted his Mississippi Medical licensee to lapse effective June 30, 2007;

WHEREAS, pursuant to Mississippi law and the rules and regulations of the Board, Licensee has the right to seek reinstatement of licensure, a right which can only be relinquished by action of the Board or by agreement by and between Licensee and the Board;

WHEREAS Licensee further denies any violation of the Mississippi Medical Practice Act but recognizes the Agreed Order which is Attachment "A" herein and the allegations set forth in the Board's charging affidavit might be construed as unprofessional conduct and/or violation of such Act;

NOW, THEREFORE, RAY A. HARRON, M.D. inasmuch as he is 75 years of age and is not currently practicing medicine or residing in Mississippi, acknowledges his decision not to renew his license (No. 14223) to practice medicine in the State of Mississippi, said license having lapsed effective July 1, 2007; and Licensee does hereby agree never to seek reinstatement of said license at anytime in the future.

Pursuant to Miss. Code Ann., Section 73-25-30, Licensee agrees to pay all costs associated with the investigation and conduct of the disciplinary proceeding herein not to exceed \$5,000.00. Licensee shall be advised of the

total assessment by separate written notification, and shall have a certified check or money order made payable to the Mississippi State Board of Medical Licensure on or before forty (40) days from the day of acceptance and approval of this Consent Order by the Board and Notice to Licensee.

Licensee understands and expressly acknowledges that this Agreed Order shall constitute a public record of the State of Mississippi and the information submitted to the National Practioner's Data Bank shall accurately reflect this Agreement.

Recognizing his right to notice of charges specified against him, to have such charges adjudicated pursuant to Miss. Code (1972) Annotated, Sections 73-25-1 et seq., to be represented therein by legal counsel of his choice, and to a final decision based upon written findings of fact and conclusions of laws, RAY A. HARRON, M.D., nonetheless hereby waives his right to notice and a formal adjudication of charges, and authorizes the Board to enter this Agreed Order, thereby prohibiting Licensee from ever seeking reinstatement of his lapsed license.

ACCEPTED, this the 31^{eV} day of October, 2007.

Ray A. Harron, M.D.

EXECUTED this the 8th day of November, 2007.

Mississippi State Board of Medical Licensure

By: Philip Merideth, M.D., President

ATTACHMENT A

COPY

LICENSE NO. C-9439

IN THE MATTER OF

BEFORE THE

THE LICENSE OF

RAYMOND ANTHONY HARRON, M.D. \$

TEXAS MEDICAL BOARD

AGREED ORDER

On the 13th day of April, 2007, came on to be heard before the Texas Medical Board ("the Board"), duly in session, the matter of the license of Raymond Anthony Harron, M.D. ("Respondent").

By the signature of Respondent on this Order, Respondent waived the right to appear at an Informal Show Compliance Proceeding and Settlement Conference pursuant to TEX.OCC. CODE, Title 3, Subtitle B, §164.004 and 22 TEX. ADMIN. CODE §187.18 and all rights pursuant to TEX. GOV'T CODE, §2001.051 and §2001-054, including, but not limited to the right to notice and hearing, and instead agrees to the entry of this Order to resolve the matters addressed in this Order. Scott M. Freshour represented Board Staff. Mr. Ron Barroso represented Respondent.

Upon the recommendation of the Board's staff and with the consent of Respondent, the Board makes the following Findings of Fact and Conclusions of Law and enters the Order as set forth herein:

FINDINGS OF FACT

The Board finds that:

- 1. Respondent received all notice required by law. All jurisdictional requirements have been satisfied. Respondent waives any defect in notice and any further right to notice or hearing under TEX. OCC. CODE ANN. Title 3, Subtitle B (the "Act") or the Rules of the Board.
- 2. Respondent holds Texas Medical License No. E-7175 and was granted this license on June 18, 1962.
- 3. Respondent is also licensed in West Virginia, New York, North Carolina, Florida, Louisiana, New Mexico, Mississippi, California and Hawaii.

- 4. Respondent is 74 years of age.
- 5. Respondent is no longer in active practice. When practicing, his primary practice was radiology. Respondent is board certified by the American Board of Radiology and the American Board of Nuclear Medicine.
- Respondent resides in Texas and is not practicing in Texas. Respondent does not intend to renew his Texas Medical License after it expires on May 31, 2007.
- 7. The Respondent is subject to allegations related to Silica/Silicosis litigations and his determination and signature on x-ray findings of silicosis for numerous silicosis plaintiffs.
- 8. Respondent denies he had any physician-patient relationship with any silicosis claimant, and states he was acting as an expert for attorneys and government agencies.
- 9. Silicosis litigation was the subject of congressional hearings concerning mass tort litigation.
- 10. Silicosis litigation has also been the subject of numerous legal proceedings. A federal judge in Corpus Christi, Texas recently heard arguments over the findings of plaintiffs' medical experts including Respondent, and the validity of their diagnosis.
- 11. Respondent either performed B-reads, which are physician findings from a chest x-ray by a physician certified by National Institute of Occupational Health and Safety, ("NIOSH"), and reported on a standardized form using a classification system devised by International Labour Office ("ILO"), or produced diagnostic reports for numerous plaintiffs. Respondent was also the diagnosing physician for numerous plaintiffs. He performed numerous B-reads in the silicosis litigation before the federal judge.
- 12. The Respondent read x-rays from a screening company. The acreening company did not have medical doctors overseeing or supervising the x-rays, and its owners admit their main purpose was to serve law firms bringing the silicosis litigation.

. 11

- 13. Respondent read numerous x-rays and found numerous claimants had both x-ray findings consistent with silicosis and asbestosis. The silicosis and asbestosis have different findings on x-rays.
- 14. Respondent testified in federal court that he "capitulated" to a request by attorneys that he put language in his reports concerning his relying on a "physical examination" even if those physical examinations did not add anything to the diagnosis.
- 15. Respondent admits he does not know if the law firms or the screening companies took the exposure history referenced in his reports. Respondent relied on the representations contained in these exposure histories, which were signed by the Claimants. Respondent stated all he needs to make a diagnosis is an exposure history, a positive x-ray, and some latency (meaning the clapsed time period between exposure and the positive x-ray).
- 16. Unless he had a reason to believe there were other possible causes, Respondent did not rule out other possible causes that might have caused a positive radiographic finding.
- 17. Respondent testified that he relied on his secretary and typists to type his reports from information given to them in writing on the ILO forms, the English translation of the B-read, and information on the A sheet (exposure history). He testified he initially reviewed the reports until he was confident the reports were being done correctly. After that time he did not usually review or edit the reports before they were sent out to law firms.
- 18. Inasmuch as Respondent is not currently practicing medicine in Texas, Respondent agrees that from the date of this Order until the expiration of his license on May 31, 2007, he will not practice medicine in the State of Texas nor will he seek to renew his license, nor will the Respondent seek reinstatement of said license.
- 19. Respondent does not admit or deny the Findings of Fact and Conclusions of Law set forth in this Agreed Order, Respondent denies any violation of the Medical Practice Act.

20. Respondent has cooperated with Board staff in the investigation of the allegations related to this Agreed Order. Respondent's cooperation, through consent to this Agreed Order, pursuant to the provisions of Section 164.002 of the Act, will save money and resources for the State of Texas. To avoid further investigation, hearings, and the expense and inconvenience of litigation, Respondent agrees to the entry of this Agreed Order and to comply with its terms and conditions.

CONCLUSIONS OF LAW

Based on the above Findings of Fact, the Board concludes that:

- 1. The Board has jurisdiction over the subject matter and Respondent pursuant to the Act.
- 2. Section 164.051 of the Act, as defined by Board Rule 190.8 authorizes the Board to take disciplinary action against Respondent under any of the basis therein.
- 3. Section 164.002(a) of the Act authorizes the Board to resolve and make a disposition of this matter through an Agreed Order.

ORDER

Based on the above Findings of Fact and Conclusions of Law, the Board

ORDERS that:

- 1. Respondent shall not practice medicine until the expiration of his medical license on May 31, 2007. Neither shall Respondent seek to renew his medical license after said date.
- 2. Respondent shall not petition the Board for reinstatement or re-issuance of his Texas license.

RESPONDENT WAIVES ANY FURTHER HEARINGS OR APPEALS TO THE BOARD OR TO ANY COURT IN REGARD TO ALL TERMS AND CONDITIONS OF THIS AGREED ORDER, RESPONDENT AGREES THAT THIS IS A FINAL ORDER.

THIS ORDER IS A PUBLIC RECORD.

I. RAYMOND ANTHONY HARRON, M.D., HAVE READ AND UNDERSTAND THE FOREGOING AGREED ORDER. I UNDERSTAND THAT BY SIGNING, I WAIVE CERTAIN RIGHTS. I SIGN IT VOLUNTARILY. I UNDERSTAND THIS AGREED ORDER CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.

Respondent

STATE OF Texas COUNTY OF Travis

SWORN TO AND ACKNOWLEDGED BEFORE ME, the undersigned Notary day of march

Signature of Notary Public

					presiding officer	of the	Texas Medical	Board
on this	<u>13th</u>	day	of Apr	11	, 2007.			

Roberta M. Kalafut, D.O., President Texas Medical Board

> STATE OF TRXAS COUNTY OF TRAVIS

I, CA//A MYRSh W, cortify that I am an afficing assistant custodien of records for the Penns Medical Board and that this is a true and sorrest Capy of the original, as it appears un tile in this office.

Witness my efficiel hand and soul of the Board.
this 242 day of 4071 so 07

Assistant Custodian of Records

IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

ANDREW HARRON, D.O.

AGREED ORDER NOT TO RENEW OR SEEK REINSTATEMENT OF MEDICAL LICENSE

WHEREAS, ANDREW HARRON, D.O., hereinafter referred to as "Licensee," is the current holder of License Number No. 17572, issued April 8, 2002, to practice medicine in the State of Mississippi;

WHEREAS, there is now pending before the Mississippi State Board of Medical Licensure certain allegations related to Licensee's determination and x-ray findings of silicosis for certain silicosis plaintiffs;

WHEREAS Licensee denies any violation of the Mississippi Medical Practice Act, but recognizes that the allegations set forth in the Board's charging affidavit might be construed if proven as unprofessional conduct and/or violation of such Act;

WHEREAS, the Board and the Licensee have entered into this agreement to avoid hearing and further litigation with respect to the allegations;

WHEREAS, Licensee has permitted his Mississippi Medical license to lapse effective June 30, 2006;

WHEREAS, pursuant to Mississippi law and the rules and regulations of the Board, Licensee has the right to seek reinstatement of licensure, a right which can only be relinquished by action of the Board or by agreement by and between Licensee and the Board:

WHEREAS, Licensee wishes to resolve the pending matter by relinquishing his right to seek reinstatement of licensure;

WHEREAS, the Board acknowledges Licensee's assertion that this agreement is not an admission of any liability, misconduct, wrongdoing or ethical breach;

Licensee understands and expressly acknowledges that this Agreed Order shall constitute a public record of the State of Mississippi and the information submitted to the National Practitioner's Data Bank shall accurately reflect this Agreement.

NOW, THEREFORE, ANDREW HARRON, D.O. acknowledges his decision not to renew his license (No. 17572) to practice medicine in the State of Mississippi, said license having lapsed effective July 1, 2006; and Licensee does hereby agree never to seek reinstatement of said licensee at anytime in the future.

Pursuant to Miss. Code Ann., Section 73-25-30, Licensee agrees to pay all costs associated with the investigation and conduct of the disciplinary proceeding herein. Licensee shall be advised of the total assessment by separate written notification, and shall have a certified check or money order made payable to the Mississippi State Board of Medical Licensure on or before forty (40) days from the day of acceptance and approval of this Consent Order by the Board.

Recognizing his right to notice of charges specified against him, to have such charges adjudicated pursuant to Miss. Code (1972) Annotated, Sections 73-25-1 et seq., to be represented therein by legal counsel of his choice, and to a final decision based upon written findings of fact and conclusions of law, ANDREW HARRON, D.O., nonetheless hereby waives his right to notice and a formal adjudication of charges, and authorizes the

Board to enter this Agreed Order, thereby prohibiting Licensee from ever seeking reinstatement of his lapsed license.

EXECUTED this the 315 day of October, 2007.

Andrew Harron, D.O.

ACCEPTED, this the 8th day of November, 2007.

Mississippi State Board of Medical Licensure

By. Philip Merideth, M.D., President

IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

STANLEY CLAY RUSSELL, M.D.

ORDER OF CONTINUANCE

THIS MATTER came on regularly for hearing on November 8, 2007, before the Mississippi State Board of Medical Licensure, in response to a request for continuance of the hearing set for this date made by Stan T. Ingram, Complaint Counsel for the Board and by Stanley Clay Russell, M.D. (hereinafter "Licensee"), through his attorney, Dennis Horne. After consideration of the matter, the Board finds the motion to be well taken.

IT IS, THEREFORE, ORDERED, that this matter is continued until 10:00 am, January 24, 2008.

SO ORDERED, this the 8th day of November, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH, M.D., J.D.

PRESIDENT

IN THE MATTER OF THE PHYSICIAN'S LICENSE

OF

NEIL BURTON SLOAN, M.D.

ORDER OF CONTINUANCE

THIS MATTER came on regularly for hearing on November 8, 2007, before the Mississippi State Board of Medical Licensure, in response to a request for continuance of the hearing set for this date made by Neil Burton Sloan, M.D. (hereinafter "Licensee"). After consideration of the matter, the Board finds Licensee's motion to be well taken.

IT IS, THEREFORE, ORDERED, that this matter is continued until 10:00 am, January 24, 2008.

SO ORDERED, this the 8th day of November, 2007.

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

BY:

PHILIP T. MERIDETH, M.D., J.D.

PRESIDENT



SECRETARY OF STATE

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure

NOTICE OF PROPOSED RULE ADOPTION

Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive. Suite 200-B Jac

Specific Legal Authority authorizing the promulgation of Rule: (Insert citation to state or federal statute, or rule Section 73-43-11

Reference to Rules repealed, amended or suspended by the

Jackson, MS 39216	Proposed Rule: { Insert citation to specific rule(s) repealed, amended or suspended Chapter 02, Section 100, Licensure Requirements for the Practice of Medical Doctors and Osteopathic Physicians							
(601) 987-3079								
rhonda@msbml.state.ms.us								
Explanation of the Purpose of the Proposed Rule and th This amendment to the current regulation clarifies the graduation.	e reason(s) for proposing the rule: {Insert here} at a medical college must be accredited at the time of							
This rule is proposed as a Final Rule, and/or a Temporary Rule (Check one or both boxers as applicable.)								
	y addressing written comments to the agency at the above r name and address, as well as other contact information, and elephone number of the party or parties you represent.							
Oral Proceeding: Check one box below:								
An oral proceeding is scheduled on this rule on Place:	Date: Time:							
If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at the above address at least day(s) prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent.								
will be held if a written request for an oral proceed persons. The written request should be submitted t (20) days after the filing of this notice of proposed	An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent.							
Economic Impact Statement: Check one box below:								
	spact statement is not required for this rule, or							
The concise summary of the economic impact st	atement required is attached.							
The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.								

Date Rule Proposed: November 8, 2007 Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman, Bureau Director

Proposed Effective Date of Rule: 30 days from final filing.

SOS FORM APA 001 Effective Date 07/29/2005

TELEPHONE: (601) 987-3079 FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: November 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This is an amendment to Board regulation, "Licensure Requirements for the Practice of Medical Doctors and Osteopathic Physicians", Chapter 02, Section 100. It amends the current regulation to include that in order for a medical college to be approved for licensure, the college must have been accredited at the time of graduation.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

Chapter 02 Licensure Requirements for the Practice of Medical Doctors and Osteopathic Physicians

Licensure by Examination

- To qualify for admission by examination, an individual shall meet the following requirements, provided that the Board may admit any individual to the examination while reserving its right to deny licensure if that individual fails to meet all requirements for licensure subsequent to success or completion of the examination:
 - 1. Applicant must satisfy the Board that he or she is at least twenty-one (21) years of age and of good moral character.
 - 2. Present a diploma from a reputable medical college or college of osteopathic medicine, subject to the following conditions:
 - a. If the degree is from a medical college or a college of osteopathic medicine in the United States or Puerto Rico, the medical college must be accredited at the time of graduation by the Liaison Committee on Medical Education (LCME), a Joint Committee of the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA), or if a college of osteopathic medicine, must be accredited by the Professional Education Committee of the American Osteopathic Association (AOA).
 - b. If the degree is from a Canadian medical school, the school must be accredited at the time of graduation by the Liaison Committee on Medical Education (LCME) and by the Committee on Accreditation for Canadian Medical Schools, as sponsored by the Canadian Medical Association and Association of Canadian Medical Colleges.
 - c. If the degree is from a foreign medical school, applicant must either (i) possess a valid certificate from the ECFMG or (ii) document successful completion of a Fifth Pathway program, as described in Section 101.
 - d. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - 3. Applicants for licensure by examination must present documentation of having completed at least one (1) year of postgraduate training in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or by the AOA; or training in Canada accredited by the Royal College of Physicians and Surgeons.
 - 4. Present certified copy of birth certificate or valid passport.
 - 5. Subject to the provisions of Section 300.1 and 300.2, an applicant must successfully complete and pass all parts/steps of the FLEX or USMLE.
 - 6. Complete an application for medical license and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph.
 - 7. Submit fee prescribed by the Board; however, any fees related to permanent licensure may be deferred for applicants indicating a desire to practice medicine under a Temporary License or Limited License within the confines of an ACGME

- or AOA approved postgraduate training program pursuant to Chapter 04 of these regulations.
- Appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.
- A Fifth Pathway Program, as a prerequisite for licensure by examination pursuant to Section 100.2.d, will be considered on an individual basis. Students who have completed the academic curriculum in a foreign medical school and who have fulfilled the conditions set forth, may be offered the opportunity to substitute for an internship required by the foreign medical school, an academic year of supervised clinical training prior to entrance into the first year of ACGME or AOA approved postgraduate medical education. The supervised clinical training (Fifth Pathway) must be under the direction of a medical school accredited by the LCME. Fifth Pathway will be available to students who have fulfilled the following conditions:
 - Completed, in an accredited American college or university, undergraduate premedical work of the quality acceptable for matriculation in an accredited U.S. medical school.
 - 2. Studied medicine at a medical school located outside the United States, Puerto Rico and Canada but which is recognized by the World Health Organization.
 - 3. Completed all of the formal requirements of the foreign medical school except internship and/or social service.
- Prior to issuance of a permanent Mississippi medical license, a graduate of a foreign medical school who has successfully completed all other requirements of application for licensure by examination must present documentation of having completed at least three (3) years of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of Physicians and Surgeons.

Licensure by Reciprocity or Endorsement

- The Board endorses, for the purpose of reciprocity, licenses to practice medicine obtained in most states by written examination prior to March 8, 1973. Subject to the provisions of Section 300 below, all applicants for medical licensure by reciprocity who took the FLEX between March 8, 1973, and January 24, 1985, must have passed the FLEX taken in one three-day sitting with a weighted average of 75 or higher in order to obtain licensure in Mississippi. The Board will not accept scores of more than one administration of the FLEX which have been combined (factored) to provide a FLEX weighted average of 75 or higher. From and after January 24, 1985, an applicant for medical licensure by reciprocity must have passed both Components I and II of the FLEX with a score of 75 to be considered the passing grade for each component. From and after June 1994, the Board shall endorse, for the purpose of reciprocity, licenses to practice medicine from applicants who have successfully taken Steps 1, 2 and 3 of the USMLE.
- Those doctors of osteopathic medicine who graduated prior to June 1, 1973, and who

make application for licensure by reciprocity with another state will be considered only if they took and passed the same written licensure examination given in that state at that time to graduates of medical schools. A statement to this effect will be obtained by this Board from that licensing board.

- The Board may affiliate with and recognize for the purpose of waiving examination and may grant licenses to Diplomates of the NBME; on or after February 13, 1973, to Diplomates of the NBOME and licentiates of the Medical Council of Canada. If a Diplomate of the NBME or NBOME, the applicant must have a Certification of Endorsement from that Board submitted directly to the Board. If seeking endorsement with the Medical Council of Canada, the applicant must have a Certificate of Standing submitted directly to the Board.
- The applicant must have the state board where the original license was obtained by examination submit a certified copy of the examination to the Board.
- The Board may grant a license by reciprocity to a graduate of a foreign medical school who was licensed in another state by written examination prior to March 8, 1973, if he or she is certified by a board recognized by the American Board of Medical Specialties. A statement verifying that the applicant is currently certified must be submitted directly to the Board by the American Board of Medical Specialties Board. The applicant must comply with all other licensure requirements for foreign medical graduates.
- In addition to the above requirements for licensure by reciprocity and/or endorsement, an individual shall meet the following requirements:
 - 1. Applicant must be twenty-one (21) years of age and of good moral character.
 - 2. Present a diploma from a reputable medical college or college of osteopathic medicine, subject to the following conditions:
 - a. If the degree is from a medical college or a college of osteopathic medicine in the United States or Puerto Rico, the medical college must be accredited at the time of graduation by the Liaison Committee on Medical Education (LCME), a Joint Committee of the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA) or the College of Osteopathic Medicine must be accredited by the American Osteopathic Association (AOA).
 - b. If the degree is from a Canadian medical school, the school must be accredited at the time of graduation by the Liaison Committee on Medical Education (LCME) and by the Committee on Accreditation for Canadian Medical Schools, as sponsored by the Canadian Medical Association and Association of Canadian Medical Colleges.
 - c. If the degree is from a foreign medical school, applicant must either (i) possess a valid certificate from the ECFMG or (ii) document successful completion of a Fifth Pathway program, as described in Section 101, and be currently board certified by a specialty board recognized by the American Board of Medical Specialties or the American Osteopathic Association.

- d. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
- 3. If a graduate from a medical college or college of osteopathic medicine in the United States, Canada or Puerto Rico, applicant must present documentation of having completed at least one (1) year of postgraduate training in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or by the AOA; or training in Canada accredited by the Royal College of Physicians and Surgeons.
- 4. If a graduate from a foreign medical school, applicant must present documentation of having completed either:
 - a. three (3) or more years of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of Physicians and Surgeons; or
 - b. at least one (1) year of ACGME-approved postgraduate training in the United States or training in Canada approved by the Royal College of Physicians and Surgeons, be currently board certified by a specialty board recognized by the American Board of Medical Specialties or the American Osteopathic Association and must have approval by the Mississippi State Board of Medical Licensure.
- 5. An applicant who otherwise possesses all of the qualifications for licensure by reciprocity/endorsement, but has not taken a medical proficiency examination or licensure examination within ten (10) years prior to filing his or her application, must pass the Special Purpose Examination (SPEX)* as administered by and under auspices of the Board, unless the applicant:
 - a. Submits satisfactory proof of current certification by an American Board of Medical Specialties or American Osteopathic Association approved specialty board; or
 - b. Submits proof that the applicant's sole purpose for seeking licensure is to serve as the Dean, Chairman of the Department or Faculty of the University of Mississippi School of Medicine. In such case, a license shall remain in effect so long as Licensee is a member of the faculty of the University School of Medicine.
- 6. Present certified copy of birth certificate or valid passport.
- 7. Complete an application for medical license and submit it to the Board in a manner prescribed by the Board with a recent passport type photograph.
- 8. Submit fee prescribed by the Board.
- Appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.

SPEX (SPECIAL PURPOSE EXAMINATION) is a cognitive examination assisting licensing jurisdictions in their assessment of current competence requisite for general, undifferentiated medical practice by physicians who hold or have held a valid license in a U.S. jurisdiction. SPEX is made available through the Federation of State Medical Boards of the United States, Incorporated.

Graduates of foreign medical schools seeking licensure by reciprocity or endorsement via Fifth Pathway Programs will be considered on an individual basis subject to those requirements set forth in Section 101.





NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

MISSISSIPPI SECRETARY OF STATE

Specific Legal Authority authorizing the promulgation of Mississippi State Board of Medical Rule: {Insert citation to state or federal statute, or rule Section 73-43-11 Licensure c/o Rhonda Freeman Reference to Rules repealed, amended or suspended by the 1867 Crane Ridge Drive, Suite 200-B **Proposed Rule**: { Insert citation to specific rule(s) repealed. Jackson, MS 39216 amended or suspended Chapter 03, Section 100, Licensure Regulations Governing the Practice of Podiatrists (601) 987-3079 rhonda@msbml.state.ms.us Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: {Insert here} This amendment to the current regulation clarifies that a podiatric medical school must be accredited at the time of graduation. This rule is proposed as a Final Rule, and/or a Temporary Rule (Check one or both boxers as applicable.) Persons may present their views on the proposed rule by addressing written comments to the agency at the above address. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Oral Proceeding:** Check one box below: An oral proceeding is scheduled on this rule on Date: Time: If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at the above address at least day(s) prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Economic Impact Statement:** Check one box below: The agency has determined that an economic impact statement is not required for this rule, or The concise summary of the economic impact statement required is attached. The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman, Bureau Director

pate Rule Proposed: November 8, 2007

SOS FORM APA 001 Effective Date 07/29/2005

Proposed Effective Date of Rule: 30 days from final filing.

TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

November 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This is an amendment to Board regulation, "Licensure Regulations Governing the Practice of Podiatrists", Chapter 03, Section 100. It amends the current regulation to include that in order for a podiatric medical college to be approved for licensure, the college must have been accredited at the time of graduation.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

Chapter 03 Licensure Regulations Governing the Practice of Podiatrists

Licensure by Examination

- To qualify for admission by examination, an individual shall meet the following requirements, provided that the Board may admit any individual to the examination while reserving its right to deny licensure if that individual fails to meet all requirements for licensure subsequent to success or completion of the examination:
 - 1. Applicant must satisfy the Board that he or she is at least twenty-one (21) years of age and of good moral character.
 - 2. Applicant must have had at least four (4) years of high school and be graduate of same; he or she shall have at least one (1) year pre-podiatry college education.
 - 3. Present a diploma from a college of podiatric medicine recognized by the Board as being in good standing, subject to the following conditions:
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. No college of podiatry or chiropody shall be accredited by the Board as a college of good standing which does not require for graduation a course of study of at least four (4) years (eight and one-half [8½] months each) and be recognized by the Council on Education of the American Podiatry Association at the time of graduation.
 - 4. Present certified copy of birth certificate or valid passport.
 - 5. Successfully take an examination for podiatrists. The applicant shall be examined in the following subjects: anatomy, histology, physiology, chemistry, pharmacy, materia medica, therapeutics, bacteriology, pathology, surgery, dermatology, neurology, physical therapy, diagnosis and roentgenology, orthopedics, chiropody and chiropodial surgery, limited in their scope to the treatment of the human foot and leg, and if found qualified shall receive a license. The minimum of requirements for license shall be a general average of seventy-five percent (75%) of all the subjects involved, provided that a grade of not less than sixty percent (60%) be made on any one (1) subject or branch given in the examination held. However, applicants are encouraged to take the examinations given by the National Board of Podiatry Examiners.
 - 6. Complete an application for podiatry license and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph.
 - 7. Submit fee prescribed by the Board.
 - 8. Appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.

Licensure by Reciprocity or Endorsement

If the original license of an applicant was obtained by state board examination, the applicant must have the state board where original license was obtained by written examination submit a certified copy of the examination directly to the Board.

- The Board may affiliate with and recognize for the purpose of waiving examination and may grant licenses to Diplomates of the National Board of Podiatric Examiners. If a Diplomate of the National Board of Podiatric Examiners, the applicant must have certification of endorsement from that Board submitted directly to the Board.
- In addition to the above requirements for licensure by reciprocity and/or endorsement, an individual shall meet the following requirements:
 - 1. Applicant must be twenty-one (21) years of age, and of good moral character.
 - 2. Applicant must have had at least four (4) years high school and be graduate of same; he or she shall have at least one (1) year pre-podiatry college education.
 - 3. Present a diploma from a college of podiatric medicine recognized by the Board as being in good standing, subject to the following conditions.
 - a. Any diploma or other document required to be submitted to the Board by an applicant which is not in the English language must be accompanied by a certified translation thereof into English.
 - b. No college of podiatry or chiropody shall be accredited by the Board as a college of good standing which does not require for graduation a course of study of at least four (4) years (eight and one-half [8½] months each) and be recognized by the Council on Education of the American Podiatry Association at the time of graduation.
 - 4. Present proof of completion of one (1) year of APMA-approved postgraduate training in the U.S. or Canada.
 - 5. Present certified copy of birth certificate or valid passport.
 - 6. Complete an application for podiatry license and submit it to the Board in the manner prescribed by the Board with a recent passport type photograph.
 - 7. Submit fee prescribed by the Board.
 - 8. Appear for a personal interview in the office of the Mississippi State Board of Medical Licensure and successfully pass the Jurisprudence Examination as administered by the Board.





MISSISSIPPI SECRETARY OF STATE

NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Specific Legal Authority authorizing the promulgation of Mississippi State Board of Medical Rule: {Insert citation to state or federal statute, or Licensure rule_Section 73-43-11 c/o Rhonda Freeman Reference to Rules repealed, amended or suspended by the 1867 Crane Ridge Drive, Suite 200-B Proposed Rule: { Insert citation to specific rule(s) repealed, Jackson, MS 39216 amended or suspended Chapter 07, Section 300, CME Requirements (601) 987-3079 rhonda@msbml.state.ms.us Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: {Insert here} This amendment to the current regulation clarifies that initial board certification must be by a specialty board recognized by the American Board of Medical Specialties or the American Osteopathic Association. This rule is proposed as a Final Rule, and/or a Temporary Rule (Check one or both boxers as applicable.) Persons may present their views on the proposed rule by addressing written comments to the agency at the above address. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. Oral Proceeding: Check one box below: Time: An oral proceeding is scheduled on this rule on Date: If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at _ day(s) prior to the proceeding to be placed on the agenda. The request should the above address at least ____ include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. [An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Economic Impact Statement:** Check one box below: The agency has determined that an economic impact statement is not required for this rule, or The concise summary of the economic impact statement required is attached. The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman, Bureau Director

Date Rule Proposed: November 8, 2007

SOS FORM APA 001 Effective Date 07/29/2005

Proposed Effective Date of Rule: 30 days from final filing.



TELEPHONE: (601) 987-3079 FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: November 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This is an amendment to Board regulation, "CME Requirements", Chapter 07, Section 300. It amends the current regulation to mandate that board certification must be from a specialty board recognized by the American Board of Medical Specialties or the American Osteopathic Association.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

Chapter 07 CME Requirements

Basic Requirement

- 100 Every Mississippi licensee must earn or receive not less than forty (40) hours of Category 1 continuing medical education in a two-year cycle as a condition precedent to renewing his or her license for the next fiscal year. Excess hours may not be carried over to another two-year cycle. For the purpose of this regulation, the two-year period begins July 1, 2000, and every two years thereafter.
 - Category 1 continuing medical education shall mean those programs of
 continuing medical education designated as Category 1 which are sponsored or
 conducted by those organizations approved by the Mississippi State Medical
 Association, American Medical Association or by the Accreditation Council for
 Continuing Medical Education (ACCME) to sponsor or conduct Category 1
 continuing medical education programs.
 - 2. Programs of continuing medical education designated as Category 1-A which are sponsored or conducted by organizations or entities accredited by the American Osteopathic Association to sponsor or conduct Category 1-A continuing medical education for osteopathic physicians.
 - 3. Programs of continuing medical education designated as a "prescribed hour" which are sponsored or conducted by organizations or entities accredited by the American Academy of Family Physicians to sponsor or conduct "prescribed hours" of continuing medical education.
 - 4. Programs of continuing medical education designated as "cognates" which are sponsored or conducted by organizations or entities which are accredited by the American College of Obstetrics and Gynecology to sponsor or conduct approved cognates on obstetrical and gynecological related subjects.
 - Programs of continuing medical education designated as Category 1-A which are sponsored or conducted by organizations or entities accredited by the Council on Podiatric Medical Education to sponsor or conduct Category 1-A continuing medical education for podiatrists.

Persons Affected

200 Every Mississippi licensee is required to comply with the minimum requirement for continuing medical education established by these rules and regulations.

Exemption for Initial Licenses

Physicians, osteopaths or podiatrists receiving their initial license to practice medicine in Mississippi after June 30, or receiving their initial board certification by a specialty board recognized by the American Board of Medical Specialties or the American Osteopathic Association after June 30, are exempt from the minimum continuing medical education requirement for the two-year period following their receiving a license or board certification. The forty (40) hour continuing education certification will be due within

the next two-year cycle.

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July 1, 2000 through June 30, 2002 (1<sup>st</sup> cycle)
July 1, 2002 through June 30, 2004 (2<sup>nd</sup> cycle)
July 1, 2004 through June 30, 2006 (3<sup>rd</sup> cycle)
July 1, 2006 through June 30, 2008 (4<sup>th</sup> cycle)
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For instance, a physician receiving an initial license August 3, 2001, will not have to complete forty (40) hours of CME until July 1, 2002, through June 30, 2004. All CME's must be acquired within the two-year cycle.

Effective Date

400 The first time for reporting continuing medical education activity will be the renewal period for the fiscal year beginning July 1, 2002, when reporting on continuing medical education work earned during the two-year period of July 1, 2000, to June 30, 2002.

Record Keeping Requirement

- Every licensee shall maintain records of attendance or certificates of completion demonstrating compliance with the minimum continuing medical education requirement. Documentation adequate to demonstrate compliance with the minimum continuing medical education requirements of this regulation shall consist of certificates of attendance, completion certificates, proof of registration, or similar documentation issued by the organization or entity sponsoring or conducting the continuing medical education program. These records must be maintained by the physician for a period of three (3) years following the year in which the continuing medical education credits were earned and are subject to examination by representatives of the State Board of Medical Licensure upon request. If a physician is on a hospital medical staff, it is recommended these certificates and hours be recorded with the primary hospital medical staff records.
- With his or her annual renewal application, every licensee must certify the completion of the minimum continuing medical education requirement established under these regulations. Failure to maintain records documenting that a physician has met the minimum continuing medical education requirement, and/or failure to provide such records upon request to the Mississippi State Board of Medical Licensure, is hereby declared to be unprofessional conduct and may constitute grounds, within the discretion of the Mississippi State Board of Medical Licensure, for the suspension of the physician's license to practice medicine.

Annual Renewal

As a condition for annual renewal of license, beginning with the fiscal year July 1, 2002, through June 30, 2003, every physician, osteopath or podiatrist will be required to biennially certify on his or her annual renewal form that he or she has earned the required

- 40 hours of approved Category 1 continuing medical education requirement. The Board will randomly select physicians to ensure complete compliance with this requirement. If deficiencies are identified, licensee must complete deficiencies within six (6) months of date of notification. Failure to comply may result in the suspension of licensee's license.
- Any physician, osteopath or podiatrist practicing during the time of a suspended license shall be considered an illegal practitioner and shall be subject to penalties provided for violation of the Medical Practice Act, and for costs incurred in the enforcement of this regulation.

<u>Waiver</u>

A physician, osteopath or podiatrist who is unable to meet the minimum continuing medical education requirement for legitimate cause may apply to the Mississippi State Board of Medical Licensure for a waiver of the requirement prior to April 1 of the last year of the two-year cycle. Such waiver may be granted or denied within the sole discretion of the Mississippi State Board of Medical Licensure.

Compliance Review

It shall be the responsibility of the Mississippi State Board of Medical Licensure to enforce the provisions of this regulation by review of the records maintained by physicians subject to this rule which demonstrate compliance with the program for continuing medical education. This compliance review may be conducted by the Board by random or designated sample, by mail or in person, or otherwise at the discretion of the Board. Non-compliance may result in the suspension of the physician's license to practice medicine under the Medical Practice Act.

Effective Date of Regulation

The above rules and regulations pertaining to continuing medical education shall become effective February 16, 2000.

Amended May 17, 2007.



NOTICE OF PROPOSED RULE ADOPTION

COPY

STATE OF MISSISSIPPI Mississippi State Board of Medical Licensure

Specific Legal Authority authorizing the promulgation of Mississippi State Board of Medical Rule: (Insert citation to state or federal statute, or rule Section 73-43-11 Licensure c/o Rhonda Freeman Reference to Rules repealed, amended or suspended by the 1867 Crane Ridge Drive, Suite 200-B Proposed Rule: { Insert citation to specific rule(s) repealed, Jackson, MS 39216 amended or suspended Chapter 24, Section 304, Physician Advertising (601) 987-3079 rhonda@msbml.state.ms.us Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: {Insert here} This amendment to the current regulation clarifies that board certification must be by a specialty board recognized by the American Board of Medical Specialties or the American Osteopathic Association. This rule is proposed as a Final Rule, and/or a Temporary Rule (Check one or both boxers as applicable.) Persons may present their views on the proposed rule by addressing written comments to the agency at the above address. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Oral Proceeding:** Check one box below: An oral proceeding is scheduled on this rule on Date: Time:

the above address at least _____ day(s) prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent.

An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent.

If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at

Economic Impact Statement: Check one box below:

Place:

The agency has determined that an economic impact statement is not required for this rule, or

The concise summary of the economic impact statement required is attached.

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

-Date Rule Proposed: November 8, 2007

Proposed Effective Date of Rule: 30 days from final filing.

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman, Bureau Director

SOS FORM APA 001 Effective Date 07/29/2005

TELEPHONE: (601) 987-3079 FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: November 9, 2007

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

This is an amendment to Board regulation, "Physician Advertising", Chapter 24, Section 304. It amends the current regulation to mandate that board certification must be from a specialty board recognized by the American Board of Medical Specialties or the American Osteopathic Association.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

Chapter 24 Physician Advertising

Scope

The following rule on physician advertising applies to all individuals licensed to practice medicine, osteopathic medicine or podiatric medicine in the state of Mississippi.

Definitions

- 200 For the purpose of Chapter 24 only, the following terms have the meanings indicated:
 - 1. "Board" means the Mississippi State Board of Medical Licensure.
 - 2. <u>"Physician"</u> means any individual licensed to practice medicine, osteopathic medicine or podiatric medicine in the state of Mississippi.
 - 3. "Advertisement" or "Advertising" means any form of public communication, such as newspaper, magazine, telephone directory, medical directory, radio, television, direct mail, billboard, sign, computer, business card, billing statement, letterhead or any other means by which physicians may communicate with the public or patients.

Requirements

- 300 Subject to the requirements set forth herein below, any advertisement by a physician may include:
 - 1. The educational background or specialty of the physician.
 - 2. The basis on which fees are determined, including charges for specific services.
 - 3. Available credit or other methods of payment.
 - 4. Any other non-deceptive information.
- 301 A physician may publicize himself or herself as a physician through any form of advertisement, provided the communication, (i) shall not be misleading because of the omission of necessary information, (ii) shall not contain any false or misleading statement, or (iii) shall not otherwise operate to deceive.
- 302 Because the public can sometimes be deceived by the use of medical terms or illustrations that are difficult to understand, physicians should design the advertisement to communicate the information contained therein to the public in a readily comprehensible manner.
- 303 It is unethical to advertise in such a manner as to create unjustified medical expectations by the public. The key issue is whether advertising or publicity, regardless of format or content, is true and not materially misleading.
- In addition to the above general requirements, any advertisement or other form of public communication shall comply with the following specific requirements:
 - 1. All advertisements and written communications pursuant to these rules shall include the name of at least one (1) physician responsible for its content.

- 2. Whenever a physician is identified in an advertisement or other written communication, the physician should not be identified solely as "Doctor" or "Dr." but shall be identified as M.D. for medical doctors, D.O. for osteopathic physicians and D.P.M. for podiatric physicians.
- 3. A physician who advertises a specific fee for a particular service or procedure shall honor the advertised fee for at least ninety (90) days unless the advertisement specifies a longer period; provided that for advertisements in the yellow pages of a telephone directory or other media not published more frequently than annually, the advertised fee shall be honored for no less than one (1) year following publication.
- 4. A physician shall not make statements which are merely self-laudatory or statements describing or characterizing the quality of the physician's services.
- 5. No physician shall advertise or otherwise hold himself or herself out to the public as being "Board Certified" without, (i) a complete disclosure in the advertisement of the specialty board by which the physician was certified, and (ii) can submit proof of current certification by a specialty board recognized by the American Board of Medical Specialties or the American Osteopathic Association. The term "Board Certified" frequently appears in conjunction with a list of services that the physician or clinic provides. The general public could easily be misled into thinking that the physician is certified in all of those services.
- 6. No physician shall hold himself or herself out as a specialist in a particular field unless that physician has either, (i) completed a "board approved" residency program, which provides specific training in the specialized field and can submit proof that such training was completed, or (ii) can submit proof that while not completing a residency, was "grandfathered" into a specialty by successful completion of board examinations followed by board certification by the American Board of Medical Specialties or the American Osteopathic Association. A "board approved" residency program shall be limited to residency programs recognized by the American Medical Association for medical doctors (M.D.), by the American Osteopathic Association for osteopathic physicians (D.O.), and by the American Podiatric Medical Association for doctors of podiatric medicine (D.P.M.).
- 7. No physician shall compare his or her service with other physicians' services, unless the comparison can be factually substantiated; this precludes the use of terms such as "the best," "one of the best," or "one of the most experienced" or the like.
- 8. Where an advertisement includes a consumer-endorser's experience (i.e., patient testimonials), the advertisement must contain an appropriately worded, clear and prominent disclosure of (a) what the generally expected performance would be in the depicted circumstances, and (b) the limited applicability of the endorser's experience. Although testimonials and endorsements are authorized under this rule, compliance will be strictly monitored as endorsements and testimonials are inherently misleading to the lay public and to those untrained in medicine.
- 9. Any claims of success, efficacy or result (i.e., cure) must have scientific evidence in substantiation of such claims.
- 10. Any claims that purport to represent "typical" results (results that consumers will

- generally achieve) must be based on a study of a sample of all patients who entered the program, or, if the claim refers to a subset of those patients, a sample of that subset.
- 11. Any claim made regarding the safety of a medical procedure or drug must also disclose the risk of adverse medical complications.
- 12. No physician shall claim to have any new drug or medication or new use of a drug or medication for a specific ailment or condition unless such drug or medication has an F.D.A. approved indication for such purpose.
- 13. Any claim that improvements can be achieved through surgery in a specified time period must also include disclosure of the typical recovery time.
- Consistent with federal regulatory standards which apply to commercial advertising, a physician who is considering the placement of an advertisement or publicity release, whether in print, radio or television, should determine in advance that the communication or message is explicitly and implicitly truthful and not misleading. These standards require the advertiser to have a reasonable basis for claims before they are used in advertising. The reasonable basis must be established by those facts known to the advertiser, and those which a reasonable, prudent advertiser should have discovered.
- The above rules do not prohibit physicians or clinics from authorizing the use of the physician's name or clinic name in medical directories, HMO directories, preferred provider agreements or other communications intended primarily for referral purposes.

Violation of Rules

- 400 The above rules on physician advertising shall not be interpreted to alter or amend that which is otherwise provided by Mississippi statutory law or the rules on advertising adopted by the Federal Trade Commission.
- If any physician subject to this rule advertises or enters into any communication in violation of the above rules and regulations, such act shall constitute unprofessional conduct, which includes dishonorable or unethical conduct likely to deceive, defraud or harm the public, in violation of Mississippi Code, Sections 73-25-29(8)(d) and 73-27-13(h)(iv).

Effective Date of Regulations

The above rules and regulations pertaining to physician advertising shall become effective November 2, 1995.



NOTICE OF RULE ADOPTION—FINAL RULE

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure



Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216

(601) 987-3079

Specific Legal Authority A	
rule Section 73-43-11	
Reference to Rules repealed, an	ended or suspended by the
Proposed Rule: {Insert citation to mended or suspended Chapter 25, Se	specific rule(s) repealed, ction 1000, Regulations Pertaining

rhonda@msbml.state.ms.us	to Prescribing, Administering and Dispensing of Medication
Date Rule Proposed:	
• •	Rule and the reason(s) for proposing the rule:
This regulation amends the Board's current regulation	to allow electronic transmission of prescriptions.
	}
	e including any written comments received during the comment period lable for public inspection by contacting the Agency at the above address
An oral proceeding was held on this	rule:
Date:	
Time: Place:	
An oral proceeding was not held on	this rule.
The Agency has considered the written comm	nents and the presentations made in any oral proceedings, and
This rule as adopted is without varia	ince from the proposed rule.
This rule as adopted differs from the rather than the substance of the rule.	e proposed rule as there are minor editorial changes which affect the form
Within the scope of the matters in the Notice of Proposed Rule Adoption	proposed rule. The differences however are: Notice of Proposed Rule Adoption, the logical outgrowth of the contents of and the comments submitted in response thereto, and a provided fair warning that the outcome of the proposed rule adoption could

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

November 8, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Bureau Director

TELEPHONE: (601) 987-3079 FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: November 9, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This is an amendment to Board regulation, "Regulations Pertaining to Prescribing, Administering and Dispensing of Medication", Chapter 25, Section 1000. It amends the current regulation to allow for the electronic transmission of prescriptions.

Chapter 25 Regulations Pertaining to Prescribing, Administering and Dispensing of Medication

Prescription Guidelines - All Medications

- In addition to any other requirements set forth in these regulations pertaining to the issuance of prescriptions of controlled substances, the following additional requirements apply to all prescriptions, whether or not said prescriptions are for controlled substances, legend drugs or any other medication:
 - 1. Electronic prescription transmissions are allowed using standards established and approved by the United States Department of Health and Human Services Agency for Healthcare Research and Quality (HHS-AHRQ). E-prescribing is the electronic entry of a prescription by a practitioner, the secure electronic transmission of the prescription to a pharmacy, the receipt of an electronic message by the pharmacy and E-prescription renewal requests sent electronically by the pharmacy to the practitioner. Electronic transmissions may be computer to computer or computer to facsimile.
 - 2. Every written prescription delivered to a patient, or delivered to any other person on behalf of a patient, must be manually signed on the date of issuance by the physician. This does not prohibit, however, the transmission of electronically telefaxed (but not e-mail) prescriptions for non-controlled drugs to the pharmacy of the patient's choice. Such telefaxed or electronic prescriptions shall bear the signature of the prescribing physician and shall be issued in accordance with all other provisions of this section. No prescriptions for brand name or generic equivalents of Nalbuphine Hcl, Carisoprodol, Butalbital compounds, or Tramadol Hcl shall be telefaxed or electronically transmitted.
 - 3. All prescriptions shall be on forms containing two lines for the physician's signature. There shall be a signature line in the lower right-hand corner of the prescription form beneath which shall be clearly imprinted the words "substitution permissible." There shall be a signature line in the lower left corner of the prescription form beneath which shall be clearly imprinted the words "dispense as written." The physician's signature on either signature line shall validate the prescription and designate approval or disapproval of product selection. The prescription form shall bear the pre-printed name of the physician, or the physician shall clearly print his or her name on the prescription form, in addition to the physician's original signature. In the event that the prescription form bears the pre-printed name of more than one physician, the physician shall clearly indicate the name of the physician writing the prescription.
 - 4. If a prescription form which does not contain two signature lines required in Section 1000.2 of this Chapter is utilized by the physician, he or she shall write in his or her own handwriting the words "dispense as written" thereupon to prevent product selection.
 - 5. Every written prescription issued by a physician for a legend drug should clearly state whether or not the prescription should be refilled, and if so, the number of authorized refills and/or the duration of therapy. Physicians should avoid issuing

prescriptions refillable on "prn" basis. If a physician chooses to issue a prescription refillable "prn", the life of the prescription or time limitation must clearly be set forth on the prescription. In no case shall a prescription which is refillable on a "prn" basis be refilled after the expiration of one (1) year. Regardless of whether a prescription is refillable on a "prn" basis or the prescription expressly states the number of authorized refills, the use of said medication should be re-evaluated on at least an annual basis. Upon the expiration of one (1) year, a prescription becomes invalid, regardless of the number of refills indicated or "prn" designation. Thereafter, a new prescription, if indicated, must be issued.

Every written prescription issued by a physician, bearing more than one non-controlled medication, shall clearly indicate the intended refill instructions for each medication. Lack of clearly indicated refill instructions prohibit the refilling of the medications. All unused lines on a multi-line prescription blank shall be clearly voided by the issuing physician.

- 6. A prescription shall no longer be valid after the occurrence of any one of the following events:
 - a. Thirty (30) days after the death of the issuing physician.
 - b. Thirty (30) days after the issuing physician has moved or otherwise changed the location of his or her practice so as to terminate the doctor/patient relationship. Termination of the doctor/patient relationship results when a patient is no longer able to seek personal consultation or treatment from the issuing physician.
 - c. Insofar as controlled substances are concerned, immediately after loss of DEA Controlled Substances Privilege by the issuing physician.
 - d. Immediately after revocation, suspension or surrender of the physician's license.







MISSISSIPPI SECRETARY OF STATE

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure

Mississippi State Board of Medical Licensure c/o Rhonda Freeman 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216 (601) 987-3079 rhonda@msbml.state.ms.us	Specific Legal Authority Authorizing the promulgation of Rule: {Insert citation to state or federal statute, or rule_Section 73-43-11 Reference to Rules repealed, amended or suspended by the Proposed Rule: {Insert citation to specific rule(s) repealed, amended or suspended Chapter 12, Section 400. The Practice of Radiologist Assistants			
			Date Rule Proposed:	
			Explanation of the Purpose of the Proposed Rule and This regulation amends the Board's current regulation to require assistant to appear prior to getting practice approval.	
	1			
Date: Time: Place:	public inspection by contacting the Agency at the above address			
An oral proceeding was not held on this rule.	·			
The Agency has considered the written comments and	the presentations made in any oral proceedings, and			
This rule as adopted is without variance from	the proposed rule.			
This rule as adopted differs from the proposed rather than the substance of the rule.	d rule as there are minor editorial changes which affect the form			
The rule as adopted differs from the proposed Within the scope of the matters in the Notice of I the Notice of Proposed Rule Adoption and the countries The Notice of Proposed Rule Adoption provided be the rule in question.	Proposed Rule Adoption, the logical outgrowth of the contents of			

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Effective Date of Rule:

November 8, 2007

Signature and Title of Person Submitting Rule for Filing

Rhonda Freeman Bureau Director TELEPHONE: (601) 987-3079



FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

TO:

Mississippi Secretary of State

From:

Mississippi State Board of Medical Licensure

Date:

November 9, 2007

Subject: Notice of Proposed Rule Adoption - Final Rule

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the power to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine.

This rule as adopted does not differ from the proposed rule.

This is an amendment to Board regulation, "The Practice of Radiologist Assistants", Chapter 12, Section 400. It amends the current regulation to require the supervising radiologist and radiologist assistant to appear prior to getting practice approval.

Chapter 12 The Practice of Radiologist Assistants

Scope

- The following regulations pertain to radiologist assistants performing any x-ray procedure or operating any x-ray equipment in a physician's office, hospital or clinical setting.
- The radiologist assistant shall evaluate the day's schedule of procedures with the supervising radiologist and determine where the radiologist assistant's skills will be best utilized.
- After demonstrating competency, the radiologist assistant when ordered to do so by the supervising radiologist may:
 - 1. Perform selected procedures under the direct supervision of a radiologist including static and dynamic fluoroscopic procedures.
 - Assess and evaluate the physiologic and psychological responsiveness of patients undergoing radiologic procedures.
 - 3. Evaluate image quality, make initial image observations and communicate observations of image quality to the supervising radiologist.
 - 4. Administer intravenous contrast media or other prescribed medications.
- The radiologist assistant may not interpret images, make diagnoses, or prescribe medications or therapies.
- The radiologist assistant shall adhere to the Code of Ethics of the American Registry of Radiologic Technologists and to national, institutional and/or departmental standards, policies and procedures regarding the standards of care for patients.

Definitions

- For the purpose of Chapter 12 only, the following terms have the meanings indicated:
 - 1. "A.R.R.T." American Registry of Radiologic Technologists.
 - 2. <u>"Full Certification"</u> Certification obtained by submitting certification issued by the A.R.R.T.
 - 3. "Radiologist" A physician licensed by the Mississippi State Board of Medical Licensure who is certified or eligible to be certified by the American Board of Radiology or the American Osteopathic Board of Radiology.
 - 4. "Radiologist Assistant Certification" Certification obtained by submitting proof of A.R.R.T. certification as a radiologist assistant which will enable the holder to perform any and all radiologist assistant procedures or functions as defined in Section 300 below in a radiology practice or radiologist's office.
 - 5. "Direct Supervision" The radiologist must be present in the office suite and immediately available to furnish assistance and direction throughout the performance of all procedures. "Direct supervision" does not mean that the supervising radiologist must be present in the room when the procedure is

performed.

Qualifications for Licensure

- Applicants for radiologist assistant licensure must be graduates of a radiologist assistant education program accredited by the American Registry of Radiologic Technologists or graduates of an RPA school holding an RA certification from the A.R.R.T., must have passed the radiologist assistant examination provided by the A.R.R.T., must have current and unencumbered registration as a radiologic technologist with the Mississippi State Department of Health, must have current certification in advanced cardiac life support (ACLS), and must meet the following additional requirements:
 - 1. Satisfy the Board that he or she is at least twenty-one (21) years of age and of good moral character.
 - 2. Submit an application for license on a form supplied by the Board, completed in every detail with a recent passport type photograph.
 - 3. Pay the appropriate fee as determined by the Board.
 - 4. Present a certified copy of birth certificate or valid passport.
 - 5. Submit proof of legal change of name if applicable (notarized or certified copy of marriage license or other legal proceeding).
 - 6. Provide information on registration or licensure in all other states where the applicant is or has been registered or licensed as a radiologist assistant.
 - 7. Must have favorable references from two (2) physicians licensed in the United States with whom the applicant has worked or trained.
 - 8. No basis or grounds exist for the denial of licensure as provided at Section 1000 below.

Radiologist assistants meeting these licensure requirements will be eligible for license renewal so long as they meet standard renewal requirements.

Supervision

- Before any radiologist shall supervise a radiologist assistant, the radiologist must first (a) present to the Board's Executive Director a duly executed protocol, (b) appear personally before the Board or its Executive Director, and (c) obtain written approval to act as a supervising radiologist. The facts and matters to be considered by the Board when approving or disapproving a protocol or supervision arrangement shall include, but are not limited to, how the supervising radiologist and radiologist assistant plan to implement the protocol, the method and manner of supervision, consultation, referral and liability.
- Where two or more radiologists anticipate executing a protocol to supervise a radiologist assistant, it shall not be necessary that all of the radiologists personally appear before the Board or Executive Director as required in Section 400. In this situation, the radiologist who will bear the primary responsibility for the supervision of the radiologist assistant shall make the required personal appearance.

Supervising Physician Limited

- No radiologist shall be authorized to supervise a radiologist assistant unless that radiologist holds an unrestricted license to practice medicine in the state of Mississippi.
- The employing radiologist(s) shall exercise supervision and assume full control and responsibility for the services provided by any person practicing as a radiologist assistant employed in the radiologist's practice. Any services being provided by a radiologist assistant must be performed at either the physical location of the radiologist's primary medical practice or any healthcare facility where the supervising radiologist holds staff privileges.

Termination

The radiologist assistant and supervising radiologist shall notify the Board in writing immediately upon the radiologist assistant's termination; radiologist retirement; withdrawal from active practice; or any other change in employment, functions or activities. Failure to notify can result in disciplinary action.

Duty to Notify Board of Change of Address

Any radiologist assistant who is licensed or receives a license to practice as a radiologist assistant in this state and thereafter changes his or her practice location from what was noted in the application upon which he or she received a license, shall immediately notify the Board in writing of the change of location. Failure to notify within 30 days could result in disciplinary action.

Continuing Education

- Biennially attend and complete at least twenty-four (24) hours of radiological related continuing education courses sponsored or approved by any of the following organizations:
 - 1. Mississippi Society of Radiologic Technologists
 - 2. Mississippi Radiological Society
 - 3. Mississippi Medical Association or Mississippi Osteopathic Medical Association
 - 4. American Medical Association or American Osteopathic Association
 - 5. American Society of Radiologic Technologists
 - 6. American Registry of Radiologic Technologists
 - 7. American College of Radiology or American Osteopathic College of Radiology

Identification

The supervising physician shall be responsible to ensure that any radiologist assistant under his or her supervision does not advertise or otherwise hold himself or herself out in any manner which would tend to mislead the general public or patients. Radiologist assistants shall at all times when on duty wear a name tag, placard or plate identifying

- themselves as radiologist assistants.
- Radiologist assistants may not advertise in any manner which implies that the radiologist assistant is an independent practitioner.
- A person not licensed as a radiologist assistant by the Board who holds himself or herself out as a radiologist assistant is subject to the penalties applicable to the unlicensed practice of medicine.

Physician Liability

1000 Prior to the supervision of a radiologist assistant, the physician's and/or radiologist assistant's insurance carrier must forward to the Board a Certificate of Insurance.

Renewal Schedule

- The license of every person licensed to practice as a radiologist assistant in the state of Mississippi shall be renewed annually.
- On or before May 1 of each year, the State Board of Medical Licensure shall mail an application for renewal of license to every radiologist assistant to whom a license was issued or renewed during the current licensing year. The applicant shall complete the application and return it to the Board before June 30 and the renewal fee of an amount established by the Board. The payment of the annual license renewal fee shall be optional with all radiologist assistants over the age of seventy (70) years. Upon receipt of the application and fee, the Board shall verify the accuracy of the application and issue to applicant a certificate of renewal for the ensuing year, beginning July 1 and expiring June 30 of the succeeding calendar year. Such renewal shall render the holder thereof a licensed radiologist assistant as stated on the renewal form.
- A radiologist assistant practicing in Mississippi who allows his or her license to lapse by failing to renew the license as provided in Section 901 may be reinstated by the Board on satisfactory explanation for such failure to renew, by completion of a reinstatement form, and upon payment of the renewal fee for the current year, and shall be assessed a fine of Twenty-five Dollars (\$25.00) plus an additional fine of Five Dollars (\$5.00) for each month thereafter that the license renewal remains delinquent.
- Any radiologist assistant not practicing in Mississippi who allows his or her license to lapse by failing to renew the license as provided in Section 901 may be reinstated by the Board on satisfactory explanation for such failure to renew, by completion of a reinstatement form, and upon payment of the arrearage for the previous five (5) years and the renewal fee for the current year.
- Any radiologist assistant who allows his or her license to lapse shall be notified by the Board within thirty (30) days of such lapse.

Any person practicing as a radiologist assistant during the time his or her license has lapsed shall be considered an illegal practitioner and shall be subject to the same penalties as provided at Mississippi Code, Section 73-25-14.

Disciplinary Proceedings

Grounds for Disciplinary Action Against Radiologist Assistants

For the purpose of conducting disciplinary actions against individuals licensed to practice as radiologist assistants, the Board hereby incorporates those grounds for the non-issuance, suspension, revocation, or restriction of a license or the denial of reinstatement or renewal of a license, as set forth in Mississippi Code, Sections 73-25-29 and 73-25-83. As a basis for denial, suspension, revocation or other restriction, the Board may initiate disciplinary proceedings based upon any one or more of those grounds as set forth in Sections 73-25-29 and 73-25-83, and may make provision for the assessment of costs as provided therein.

1201 Hearing Procedure and Appeals

No individual shall be denied a license or have his or her license suspended, revoked or restriction placed thereon, unless the individual licensed as a radiologist assistant has been given notice and opportunity to be heard. For the purpose of notice, disciplinary hearings and appeals, the Board hereby adopts and incorporates by reference all provisions of the "Rules of Procedure" now utilized by the Board for those individuals licensed to practice medicine, osteopathic medicine, and podiatric medicine in the state of Mississippi.

1202 Reinstatement of License

- A person whose license to practice as a radiologist assistant has been revoked, suspended, or otherwise restricted may petition the Mississippi State Board of Medical Licensure to reinstate his or her license after a period of not less than one (1) year has elapsed from the date of the revocation or suspension. The procedure for the reinstatement of a license that is suspended for being out of compliance with an order for support, as defined in Section 93-11-153, shall be governed by Sections 93-11-157 or 93-11-163, as the case may be.
- 2. The petition shall be accompanied by two (2) or more verified recommendations from physicians (M.D. or D.O.) licensed by the Board of Medical Licensure to which the petition is addressed and by two (2) or more recommendations from citizens each having personal knowledge of the activities of the petitioner since the disciplinary penalty was imposed and such facts as may be required by the Board of Medical Licensure.

The petition may be heard at the next regular meeting of the Board of Medical Licensure but not earlier than thirty (30) days after the petition was filed. No petition shall be considered while the petitioner is under sentence for any criminal offense, including any period during which he or she is under probation or parole. The hearing may be continued from time to time as the Board of Medical Licensure finds necessary.

3. In determining whether the disciplinary penalty should be set aside and the terms and conditions, if any, which should be imposed if the disciplinary penalty is set aside, the Board of Medical Licensure may investigate and consider all activities of the petitioner since the disciplinary action was taken against him or her, the offense for which he or she was disciplined, his or her activity during the time his or her certificate was in good standing, his or her general reputation for truth, professional ability and good character; and it may require the petitioner to pass an oral examination.

Impaired Radiologist Assistants

1300 For the purpose of the Mississippi Disabled Physician Law, Mississippi Code, Sections 73-25-51 to 73-25-67, any individual licensed to practice as a radiologist assistant shall be subject to restriction, suspension, or revocation in the case of disability by reason of one or more of the following:

Mental illness

Physical illness, including but not limited to deterioration through the aging process, or loss of motor skills

Excessive use or abuse of drugs, including alcohol

1301 If the Board has reasonable cause to believe that a radiologist assistant is unable to practice with reasonable skill and safety to patients because of one or more of the conditions described above, referral of the radiologist assistant shall be made, and action taken, if any, in the manner as provided in Sections 73-25-55 through 73-25-65, including referral to the Mississippi Professionals Health Program, sponsored by the Mississippi State Medical Association.

Effective Date of Regulations

1400 The above rules and regulations pertaining to the practice of radiologist assistants shall become effective upon adoption.

Adopted November 16, 2005. Amended July 20, 2006. Amended November 8, 2007.

PROPOSED POLICY

Policy for the Sale of Goods from Physician Offices

- 1. Due to the potential for patient exploitation in the sale of goods, physicians should be mindful of appropriate boundaries with patients, should avoid coercion in the sale of goods in their offices, and should not engage in exclusive distributorship and/or personal branding;
- 2. Physicians should make available disclosure information with the sale of any goods in order to inform patients of their financial interests;
- 3. Physicians may distribute goods free of charge or at cost in order to make such goods readily available; and
- 4. Physicians may make available for sale in their offices durable medical goods essential to the patient's care and non-health related goods associated with a charitable organization.