

DISCIPLINARY ACTION REPORT

NASHVILLE, Tenn. -- Tennessee Code Annotated, Section 68-1-114 requires the Tennessee Department of Health to issue a monthly media release listing all disciplinary actions taken by the health-related boards during the prior month. Below is a list of actions taken in **September of 2023**. *Detailed information about disciplinary actions is available on our website at <https://apps.health.tn.gov/Licensure/default.aspx>. Enter the name of the person. When the license information comes up, click either "disciplinary action" or "adverse licensure action" in the right column. Abuse Registry information is available on our website at <https://apps.health.tn.gov/AbuseRegistry/default.aspx>. Facility information is available on our website at <https://apps.health.tn.gov/facilityListings/>*

BOARD OF MEDICAL EXAMINERS

Licensee: Delenya S. Allen, M.D. 58721, Memphis
 Violation: Unprofessional, dishonorable, or unethical conduct; gross health care liability or a pattern of continued or repeated health care liability, ignorance, negligence or incompetence in the course of medical practice.
 Action: License revoked. Respondent must undergo a Physician's Assessment by Center for Personalized Education for Physicians ("CPEP") and follow any and recommendations and reports and submit all to disciplinary coordinator within 30 days of assessment for review to be included with any reinstatement application. Respondent is assessed \$3,000 in civil penalties, and costs not to exceed \$5,000.

Licensee: Indu Bali, M.D., Lic. No. 31656, Columbia
 Violation: Unprofessional, dishonorable or unethical conduct; Violation or attempted violation, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of this part or any lawful order of the board issued pursuant thereto or any criminal statute of this state; Gross health care liability or a pattern of continued or repeated health care liability, ignorance, negligence or incompetence in the course of medical practice; Dispensing, prescribing or otherwise distributing any controlled substance or any other drug not in the course of professional practice, or not in good faith to relieve pain and suffering, or not to cure an ailment, physical infirmity or disease, or in amounts and/or for durations not medically necessary, advisable or justified for a diagnosed condition; Dispensing, prescribing or otherwise distributing to any person a controlled substance or other drug if such person is addicted to the habit of using controlled substances without making a bona fide effort to cure the habit of such patient; Dispensing, prescribing or otherwise distributing any controlled substance, controlled substance analogue or other drug to any person in violation of any law of the state or of the United States; prescribes, orders, administers or dispenses dangerous drugs or controlled substances without observing Board guidelines.
 Action: Suspension until Respondent has obtained a Tennessee Medical Foundation ("TMF") Evaluation and until TMF determines Respondent is fit for re-entry into the practice of medicine; shall not serve as a supervising/collaborating physician or substitute supervising/collaborating physician to any advanced practice registered nurse, physician assistant; Within sixty (60) days from effective date of

entry of this Order, Respondent must undergo an evaluation coordinated through the Tennessee Medical Foundation (“TMF”); shall not prescribe opioids for a period of at least one (1) year; If the TMF determines Respondent is fit for re-entry into the practice of medicine, Respondent must appear personally before the Board and petition the Board for an Order of Compliance for the suspension of Respondent’s license to be lifted and be placed on probation. Respondent must also show that she has complied with any and all recommendations of TMF following said evaluation; If the Board grants the petition for an Order of Compliance, then Respondent’s license will be taken off suspension and placed on probation for a period of no less than five (5) years, effective the date of entry of the Order of Compliance; At the expiration of the five (5) year probationary period, and upon completing all requirements stated herein, Respondent may file a Petition for Order of Compliance to petition the Tennessee Board of Medical Examiners to lift the probation on her license and the restrictions imposed by this Consent Order. As part of her petition, Respondent must personally appear before the Board; Coursework on Medical Documentation and Prescribing Controlled Substances; \$5,000 in civil penalties; costs of case, not to exceed \$20,000.

Licensee: Peter L. Clark, M.D., Lic. No. 18105, Morristown
Violation: Unprofessional Conduct
Action: License reprimanded. Respondent must enroll in and successfully complete thirty (30) hours of CME in general management of labor/delivery and intrapartum complications and emergencies, pre-approved by the Board’s Consultant, within one (1) year of order entry. Respondent is assessed \$1,000 in civil penalties. Respondent is assessed costs not to exceed \$2,500.

Licensee: Charles Cox, M.D., Lic. No. 18827, Athens
Violation: Unprofessional, dishonorable or unethical conduct; Each prescriber shall undertake adequate safeguards and security measures to ensure against loss, improper destruction, theft, or unauthorized use of the tamper-resistant prescriptions in the prescriber’s possession; Any handwritten prescription order for a drug prepared by a physician or surgeon who is authorized by law to prescribe a drug must be legible so that it is comprehensible by the pharmacist who fills the prescription. The handwritten prescription order must contain the name of the prescribing physician or surgeon, the name and strength of the drug prescribed, the quantity of the drug prescribed, handwritten in letters or in numerals, instructions for the proper use of the drug and the month and day that the prescription order was issued, recorded in letters or in numerals or a combination thereof. The prescribing physician or surgeon must sign the handwritten prescription order on the day it is issued, unless the prescription order is: (1) Issued as a standing order in a hospital, a nursing home or an assisted care living facility as defined in § 68-11-201; or (2) Prescribed by a physician or surgeon in the department of health or local health departments or dispensed by the department of health or a local health department as stipulated in § 63-10-205.
Action: Respondent’s license was reprimanded. Respondent was assessed \$400 in civil penalties plus costs.

Licensee: Dinia C. Cruz, MD Lic. No. 13580, Memphis

- Violation: Unprofessional, dishonorable or unethical conduct; gross health care liability or a pattern of continued or repeated health care liability, ignorance, negligence or incompetence in the course of medical practice; dispensing, prescribing or otherwise distributing any controlled substance or any other drug not in the course of professional practice, or not in good faith to relieve pain and suffering, or not to cure an ailment, physical infirmity or disease, or in amounts and/or for durations not medically necessary, advisable or justified for a diagnosed condition; Dispensing, prescribing or otherwise distributing to any person a controlled substance or other drug if such person is addicted to the habit of using controlled substances without making a bona fide effort to cure the habit of such patient; Dispensing, prescribing or otherwise distributing any controlled substance, controlled substance analogue or other drug to any person in violation of any law of the state or of the United States; Any prescription for buprenorphine mono or for buprenorphine without use of naloxone for the treatment of substance use disorder shall only be permitted to a patient who is: (A) Pregnant; (B) A nursing mother; (C) Has a documented history of an adverse reaction or hypersensitivity to naloxone; or; (D) Directly administered the buprenorphine mono or buprenorphine without use of naloxone by a healthcare provider, acting within the healthcare provider's scope of practice, for the treatment of substance use disorder pursuant to a medical order or prescription order from a physician licensed under title 63, chapter 6 or 9; provided, however, that this subdivision (b)(1)(D) does not permit buprenorphine mono or buprenorphine without use of naloxone to be dispensed to a patient in a manner that would permit it to be administered away from the premises on which it is dispensed; Tenn. Comp. R. & Reg. Rule 0940-05-35-.09, which states the requirements for patient's individualized treatment plans and best practices at a nonresidential office-based opiate treatment facilities; Tenn. Comp. R. & Reg. Rule 0940-05-35-.13, which states the requirements for patient's medication management at a nonresidential office-based opiate treatment facilities; Tenn. Comp. R. & Regs. Rule 0880-2-.14 (6)(e): which authorizes disciplinary action against a Respondent who prescribes, orders, administers or dispenses dangerous drugs or controlled substances without observing Board guidelines; Except as provided in subparagraph (b), it shall be a prima facie violation of T.C.A. 63-6-214 (b) (1), (4), and (12) for a physician to prescribe or dispense any drug to any individual, whether in person or by electronic means or over the Internet or over telephone lines, unless the physician, or his/her licensed supervisee pursuant to appropriate protocols or medical orders, has first done and appropriately documented, for the person to whom a prescription is to be issued or drugs dispensed, all of the following: 1. Performed an appropriate history and physical examination; and 2. Made a diagnosis based upon the examinations and all diagnostic and laboratory tests consistent with good medical care; and 3. Formulated a therapeutic plan, and discussed it, along with the basis for it and the risks and benefits of various treatments options, a part of which might be the prescription or dispensed drug, with the patient; and 4. Insured availability of the physician or coverage for the patient for appropriate follow-up care.
- Action: License placed on probation for a period of not less than one (1) year with terms, a permanent restriction against prescribing opioids, three continuing medical education courses, and payment of costs and civil penalties.

- Licensee: Leigh Anne Dunlap, MD, License No. 27903; Kingsport
Violation: Violation of a statute: Unprofessional, dishonorable, or unethical conduct.
Violation of a rule: Failure to develop clinical supervision requirements.
Action: Medical license of Respondent is placed on Probation for two (2) years, once reinstated (currently expired). Respondent is prohibited from prescribing opioids for two (2) years, upon her license being reinstated; Respondent cannot supervise mid-levels for purposes of prescribing, nor can she act as a medical director of a pain clinic, or a weight loss clinic, during that probation period. Coursework on Medical Ethics and Prescribing Controlled Substances; \$2,000 in civil penalties; costs of case, not to exceed \$5,000.
- Licensee: David M. Katz, MD, License No. 18803; Jacksonville Beach, FL
Violation: Violation of statutes: guilty of unprofessional, dishonorable, or unethical conduct; dispensing, prescribing, or distributing any controlled substance in amounts and/or durations not medically necessary, advisable, or justified; prescribing to any person a controlled substance if such person is addicted to the habit of using controlled substances without making a bona fide effort to cure the habit. Violation of rules: over-prescribing or prescribing in a manner inconsistent with board rules; prescribing any drug to any individual without a proper physical examination, failure to make a diagnosis based upon the examination and all diagnostic and laboratory tests; and failed to create and maintain medical records for any patient seen or treated by any licensed supervisees.
Action: Medical License No. 18803 voluntarily surrendered, same as revocation. Respondent must pay costs of case, not to exceed three thousand dollars (\$3,000).
- Licensee: Niansen Liu, MD Lic. No. 36406, Cleveland
Violation: Unprofessional conduct; Except as provided in subparagraph (b), it shall be a prima facie violation of T.C.A. § 63-6-214 (b) (1), (4), and (12) for a physician to prescribe or dispense any drug to any individual, whether in person or by electronic means or over the Internet or over telephone lines, unless the physician, or his/her licensed supervisee pursuant to appropriate protocols or medical orders, has first done and appropriately documented, for the person to whom a prescription is to be issued or drugs dispensed, all of the following: 1. Performed an appropriate history and physical examination; and 2. Made a diagnosis based upon the examinations and all diagnostic and laboratory tests consistent with good medical care; and 3. Formulated a therapeutic plan, and discussed it, along with the basis for it and the risks and benefits of various treatments options, a part of which might be the prescription or dispensed drug, with the patient; and 4. Insured availability of the physician or coverage for the patient for appropriate follow-up care; When prescribing a controlled substance, all healthcare practitioners, unless otherwise exempted under this part, shall check the controlled substance database prior to prescribing one (1) of the controlled substances identified in subdivision (e)(4) to a human patient at the beginning of a new episode of treatment and shall check the controlled substance database for that human patient at least annually when that prescribed controlled substance remains part of the treatment. An authorized healthcare practitioner's delegate may check the controlled substance database on behalf of the healthcare practitioner. A new episode of treatment means a prescription for a controlled substance that has not been prescribed by that healthcare practitioner within the previous twelve (12) months.

Action: License reprimanded, Submit proof of completion of CME course taken in August 2023, must pay civil penalties and costs.

Licensee: Bryan Merrick, M.D., Lic. No. #15682, McKenzie

Violation: Unprofessional, dishonorable or unethical conduct; violation or attempted violation, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of this chapter or any lawful order of the board issued pursuant thereto, or any criminal statute of the state of Tennessee; operation [of a med spa] without current registration constitutes unprofessional conduct on the part of the medical director or any supervising physician providing services, including supervision services, at such unregistered medical spa and is grounds for disciplinary action by the licensing board of such physician.

Action: License reprimanded; civil penalties in the amount of \$2,100 and costs not to exceed \$2,000.

Licensee: Troy Lane Potthoff, M.D., Lic. No. 59183, Honolulu, Hawaii

Violation: On or about May 26, 2023, the Washington Medical Commission entered an order of public discipline against Respondent's Washington medical license. The discipline by the Washington Medical Commission stemmed from incidents where Respondent was providing telehealth services to three patients. Here, Respondent referred each of these three patients for genetic testing they thought was free. However, each patient's insurance company was later billed more than \$10,000.00. Respondent did not meet with or examine any of these three patients, nor did he maintain any medical records. Further, Respondent was unable to provide any clinical rationale for the genetic testing of any of the three patients. The action for which Respondent was disciplined in Washington would be grounds for disciplinary action in Tennessee. Tenn. Code Ann. § 63-6-214(b)(1): Unprofessional, dishonorable or unethical conduct [.] Tenn. Code Ann. § 63-6-214(b)(20): Disciplinary action against a person licensed to practice medicine by another state or territory of the United States for any acts or omissions that would constitute grounds for discipline of a person licensed in this state. A certified copy of the initial or final order or other equivalent document memorializing the disciplinary action from the disciplining state or territory shall constitute prima facie evidence of violation of this section and be sufficient grounds upon which to deny, restrict or condition licensure or renewal and/or discipline a person licensed in this state[.] Tenn. Code Ann. § 63-6-402(10)(a): Any disciplinary action taken by any member board against a physician licensed through the Compact shall be deemed unprofessional conduct which may be subject to discipline by other member boards, in addition to any violation of the Medical Practice Act or regulations in that state. Tenn. Code Ann. § 63-6-402(10)(c): If disciplinary action is taken against a physician by a member board not in the state of principal license, any other member board may deem the action conclusive as to matter of law and fact decided, and: (i) impose the same or lesser sanction(s) against the physician so long as such sanctions are consistent with the Medical Practice Act of that state; or (ii) pursue separate disciplinary action against the physician under its respective Medical Practice Act, regardless of the action taken in other member states. Interstate Medical Licensure Compact Commission Rule 6.5: (a) Any disciplinary action by a disciplining Board shall be considered unprofessional conduct and may be a basis for discipline by other member Boards. This includes

any action that does not have a corresponding ground by the other member Board's Medical Practice Act or in addition to any other specific violation of the Medical Practice Act in the other member state. (b) Any member Board, including the state of principal license, may: Administratively take reciprocal action against a compact physician who was disciplined by a disciplining Board. The administrative reciprocal action of the disciplinary Board is deemed conclusive as to matters of law and fact, and a member Board may impose the same or lesser sanction that is consistent with the Medical Practice Act of that state; Pursue disciplinary action in accordance with the member Board's Medical Practice Act against a Compact physician who was disciplined by a disciplining Board. The action of the disciplinary Board is deemed conclusive as to matters of law and fact and a member Board may impose a more severe sanction...

Action: License is publicly reprimanded; assessed one (1) Type B Civil Penalty in the amount of five hundred dollars (\$500.00) to be paid within 30 days. Costs not to exceed five thousand dollars (\$5,000.00) to be paid within 60 days.

Licensee: Kenneth W. Sullivan, MD, License No. 27509; Joelton

Violation: Violation of a statute: Dispensing, prescribing, or distributing to any person a controlled substance if such person is addicted to the habit and without making an effort to cure the habit. Violation of rules: over-prescribing or prescribing in a manner inconsistent with board rules; prescribing controlled substances without a proper physical exam, without a diagnosis based on all diagnostic and laboratory tests, and without formulating a therapeutic plan; violation of the duty to create and maintain medical records.

Action: Medical license of Respondent is Reprimanded. Respondent is prohibited from prescribing opioids for six (6) months, starting November 1, 2023; Respondent cannot supervise mid-levels for purposes of prescribing, nor can he act as a medical director of a pain clinic during that 6-month period. Coursework on Medical Documentation and Prescribing Controlled Substances; \$7,000 in civil penalties; costs of case, not to exceed \$3,000.

Licensee: Gregory Stuart Uhl, M.D., Lic. No. 39008, Gallatin

Violation: Unprofessional, dishonorable or unethical conduct; prescribes, orders, administers or dispenses dangerous drugs or controlled substances without observing Board guidelines; A prescriber who treats a patient with more than sixteen milligrams (16 mg) per day of buprenorphine or its therapeutic equivalent for more than thirty (30) consecutive days for treatment of opioid dependence shall clearly document in the patient's medical record why the patient needs the higher dosage amounts of buprenorphine. A prescriber who does not meet the requirements established in the manner described in subdivision (d)(2) and treats a patient with more than twenty milligrams (20 mg) per day of buprenorphine or its therapeutic equivalent for more than thirty (30) consecutive days for treatment of opioid dependence shall, to the extent possible, either consult with an addiction specialist meeting the requirements established in the manner described in subdivision (d)(2) or refer the patient to the addiction specialist for management of the patient's treatment plan. If a prescribing physician cannot make the required consultation or referral as outlined in this subsection (d), the reasons shall be set out in the medical record; requirements for patient's individualized treatment plans and best practices at a nonresidential office-based opiate treatment facilities.

Action: Voluntary retirement, same as revocation; Respondent assessed costs not to exceed \$3,000.

Licensee: Allen S. Uhlik, M.D., Lic. No. 22149, Copperhill

Violation: Unprofessional, dishonorable or unethical conduct; Violation or attempted violation, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of this part or any lawful order of the board issued pursuant thereto or any criminal statute of this state; Gross health care liability or a pattern of continued or repeated health care liability, ignorance, negligence or incompetence in the course of medical practice; Dispensing, prescribing or otherwise distributing any controlled substance or any other drug not in the course of professional practice, or not in good faith to relieve pain and suffering, or not to cure an ailment, physical infirmity or disease, or in amounts and/or for durations not medically necessary, advisable or justified for a diagnosed condition; Dispensing, prescribing or otherwise distributing to any person a controlled substance or other drug if such person is addicted to the habit of using controlled substances without making a bona fide effort to cure the habit of such patient; Dispensing, prescribing or otherwise distributing any controlled substance, controlled substance analogue or other drug to any person in violation of any law of the state or of the United States; prescribes, orders, administers or dispenses dangerous drugs or controlled substances without observing Board guidelines; When prescribing a controlled substance, all healthcare practitioners, unless otherwise exempted under this part, shall check the controlled substance database prior to prescribing one (1) of the controlled substances identified in subdivision (e)(4) to a human patient at the beginning of a new episode of treatment, prior to the issuance of each new prescription for the controlled substance for the first ninety (90) days of a new episode of treatment, and shall check the controlled substance database for that human patient at least every six (6) months when that prescribed controlled substance remains part of the treatment. An authorized healthcare practitioner's delegate may check the controlled substance database on behalf of the healthcare practitioner. A 'new episode of treatment' means a prescription for a controlled substance that has not been prescribed by that healthcare practitioner within the previous six (6) months; When dispensing a controlled substance, all healthcare practitioners, unless otherwise exempted under this part, shall check the controlled substance database prior to dispensing one (1) of the controlled substances identified in subdivision (e)(4) to a human patient the first time that patient is dispensed a controlled substance at that practice site. The dispenser shall check the controlled substance database again at least once every six (6) months for that human patient after the initial dispensing for the duration of time the controlled substance is dispensed to that patient. The initial dispensing check fulfills the check requirement for the first six-month period. An authorized healthcare practitioner's delegate may check the controlled substance database on behalf of the healthcare practitioner; Before prescribing or dispensing, a healthcare practitioner shall have the professional responsibility to check the database or have a healthcare practitioner delegate check the database if the healthcare practitioner is aware or reasonably certain that a person is attempting to obtain a Schedule II-V controlled substance, identified by the committee or commissioner as demonstrating a potential for abuse for fraudulent, illegal, or medically inappropriate purposes, in violation of 53-11-402; The controlled substances that trigger a check of the controlled substance database pursuant to subdivisions (e)(1) and (2) include, but are not limited to, all opioids and benzodiazepines. By rule, the commissioner, pursuant to 53-10-311, may require a check of the

database for additional Schedule II-V controlled substances that are identified by the committee or commissioner as demonstrating a potential for abuse; Except as provided in subparagraph (b), it shall be a prima facie violation of T.C.A. 63-6-214 (b) (1), (4), and (12) for a physician to prescribe or dispense any drug to any individual, whether in person or by electronic means or over the Internet or over telephone lines, unless the physician, or his/her licensed supervisee pursuant to appropriate protocols or medical orders, has first done and appropriately documented, for the person to whom a prescription is to be issued or drugs dispensed, all of the following: Performed an appropriate history and physical examination, and made a diagnosis based upon the examinations and all diagnostic and laboratory tests consistent with good medical care, and formulated a therapeutic plan, and discussed it, along with the basis for it and the risks and benefits of various treatments options, a part of which might be the prescription or dispensed drug, with the patient, and insured availability of the physician or coverage for the patient for appropriate follow-up care; Code of Medical Ethics; Principles of Medical Ethics 8.19, Self-Treatment or Treatment of Immediate Family Members, of the Code of Medical Ethics of the American Medical Association, Physicians generally should not treat themselves or members of their immediate families; Tennessee Board of Medical Examiners Policy: Prescribing for Oneself and One's Family; All medical records, or summaries thereof, produced in the course of the practice of medicine for all patients shall include all information and documentation listed in Tenn. Code Ann. 63-2-101(c)(4) and such additional information that is necessary to ensure that a subsequent reviewing or treating physician can both ascertain the basis for the diagnosis, treatment plan and outcomes, and provide continuity of care for the patient; Medical records shall be retained for a period of not less than ten (10) years from the physician's or his supervisees' last professional contact with the patient. Violation of any provision of these rules is grounds for disciplinary action pursuant to Tenn. Code Ann. 63-6-214(b)(1) and/or (2); All prescribers or their designated healthcare practitioner's extenders, unless otherwise exempted by T.C.A. Title 53, Chapter 10, part 3, shall check the database prior to prescribing one of the controlled substances identified below in paragraph (3) to a human patient at the beginning of a new episode of treatment and shall check the database for the human patient at least annually when that prescribed controlled substance remains part of treatment; Before dispensing, a dispenser shall have the professional responsibility to check the database or have a healthcare practitioner extender check the database, if the dispenser is aware or reasonably certain, that a person is attempting to obtain a Schedule II-V controlled substance, identified by the Committee as demonstrating a potential for abuse for fraudulent, illegal, or medically inappropriate purposes, in violation of T.C.A. 53-11-402; The controlled substances which trigger a check of the database pursuant to paragraph (1) above include, but are not limited to, all opioids and benzodiazepines; Prescribers are not required to check the database before prescribing or dispensing one of the controlled substances identified in paragraph (3) above or added to that list by the Committee if one (1) or more of the following conditions is met: the controlled substance is prescribed or dispensed for a patient who is currently receiving hospice care, the Committee has determined that prescribers in a particular medical specialty shall not be required to check the database as a result of the low potential for abuse by patients receiving treatment in that medical specialty, the controlled substance is prescribed or dispensed to a patient as a non-refillable prescription as part of treatment for a surgical

procedure that occurred in a licensed healthcare facility, the quantity of the controlled substance which is prescribed or dispensed does not exceed an amount which is adequate for a single, seven-day treatment period and does not allow a refill

Action: Probation for a period of three (3) years effective the date of entry of this Consent Order by the Board; shall not prescribe opioids for a period of at least one (1) year from the date of entry of this Consent Order; ineligible to act as the medical director of a pain management clinic during the period that Respondent's license is on probation, and thus, encumbered; be ineligible to operate or participate in the ownership structure of a Nonresidential office-based opiate treatment facility ("OBOT"), during the period that Respondent's license is on probation, and thus, encumbered; shall submit proof to the licensee's board or committee that they have notified any physicians, podiatrists, advanced practice registered nurses, or physician assistants with whom they collaborate of the discipline. At the expiration of the one (1) year period, and after Respondent has provided proof to the Disciplinary Coordinator that he has complied with all requirements in this Consent Order, including proof of completion of the continuing education requirement, Respondent may petition the Board to lift the restriction on prescribing of opioids on his license imposed by this Consent Order. Prior to petitioning to lift the restriction on prescribing opioids described above, Respondent shall obtain practice monitoring through Affiliated Monitors or another practice monitoring program preapproved by the Board's Medical Consultant. At the expiration of the three (3) year probationary period, and upon completing all requirements stated herein, Respondent may file a Petition for Order of Compliance to petition the Tennessee Board of Medical Examiners to lift the probation on his license and the restrictions imposed by this Consent Order. As part of his petition, Respondent must personally appear before the Board; Coursework on Medical Documentation and Prescribing Controlled Substances; \$4,500 in civil penalties; costs of case, not to exceed \$15,000.

Licensee: Stephen Mark Watson, M.D., Lic. No. 28746, Nashville
Violation: Unprofessional, dishonorable or unethical conduct; Violation or attempted violation, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of this part or any lawful order of the board issued pursuant thereto or any criminal statute of this state; Gross health care liability or a pattern of continued or repeated health care liability, ignorance, negligence or incompetence in the course of medical practice; Dispensing, prescribing or otherwise distributing any controlled substance or any other drug not in the course of professional practice, or not in good faith to relieve pain and suffering, or not to cure an ailment, physical infirmity or disease, or in amounts and/or for durations not medically necessary, advisable or justified for a diagnosed condition; Dispensing, prescribing or otherwise distributing to any person a controlled substance or other drug if such person is addicted to the habit of using controlled substances without making a bona fide effort to cure the habit of such patient; Dispensing, prescribing or otherwise distributing any controlled substance, controlled substance analogue or other drug to any person in violation of any law of the state or of the United States; prescribes, orders, administers or dispenses dangerous drugs or controlled substances without observing Board guidelines; Except as provided in subparagraph (b), it shall be a prima facie violation of T.C.A. 63-6-214 (b) (1), (4), and (12) for a physician to prescribe or dispense any drug to any individual, whether in person or by electronic means or

over the Internet or over telephone lines, unless the physician, or his/her licensed supervisee pursuant to appropriate protocols or medical orders, has first done and appropriately documented, for the person to whom a prescription is to be issued or drugs dispensed, all of the following: Performed an appropriate history and physical examination; and made a diagnosis based upon the examinations and all diagnostic and laboratory tests consistent with good medical care; and formulated a therapeutic plan, and discussed it, along with the basis for it and the risks and benefits of various treatments options, a part of which might be the prescription or dispensed drug, with the patient; and insured availability of the physician or coverage for the patient for appropriate follow-up care; Code of Medical Ethics; Any prescription for buprenorphine mono or for buprenorphine without use of naloxone for the treatment of substance use disorder shall only be permitted to a patient who is: Pregnant, A nursing mother, Has a documented history of an adverse reaction or hypersensitivity to naloxone, or Directly administered the buprenorphine mono or buprenorphine without use of naloxone by a healthcare provider, acting within the healthcare provider's scope of practice, for the treatment of substance use disorder pursuant to a medical order or prescription order from a physician licensed under title 63, chapter 6 or 9; provided, however, that this subdivision (b)(1)(D) does not permit buprenorphine mono or buprenorphine without use of naloxone to be dispensed to a patient in a manner that would permit it to be administered away from the premises on which it is dispensed; A prescriber who treats a patient with more than sixteen milligrams (16 mg) per day of buprenorphine or its therapeutic equivalent for more than thirty (30) consecutive days for treatment of opioid dependence shall clearly document in the patient's medical record why the patient needs the higher dosage amounts of buprenorphine. A prescriber who does not meet the requirements established in the manner described in subdivision (d)(2) and treats a patient with more than twenty milligrams (20 mg) per day of buprenorphine or its therapeutic equivalent for more than thirty (30) consecutive days for treatment of opioid dependence shall, to the extent possible, either consult with an addiction specialist meeting the requirements established in the manner described in subdivision (d)(2) or refer the patient to the addiction specialist for management of the patient's treatment plan. If a prescribing physician cannot make the required consultation or referral as outlined in this subsection (d), the reasons shall be set out in the medical record; By January 1, 2018, the commissioner of mental health and substance abuse services, in collaboration with the commissioner of health, shall develop recommended nonresidential treatment guidelines for the use of buprenorphine that can be used by prescribers in this state as a guide for caring for patients. This subsection (b) shall only apply to practitioners prescribing buprenorphine-containing products for the treatment of opioid use disorder in a nonresidential setting. The guidelines must be consistent with applicable state and federal laws; By January 1, 2019, the commissioner of mental health and substance abuse services shall revise rules for nonresidential office-based opiate treatment facilities to be consistent with state and federal law and to establish: Standards for determining what constitutes a high dose of the opioid employed in treatment at a nonresidential office-based opiate treatment facility, Protocols for initiating or switching a patient at a nonresidential office-based treatment facility to a high dose of the opioids employed in treatment; and Protocols for initiating periodic prescriber-initiated-and-led discussions with patients regarding patient readiness to taper down or taper off the opioids employed in treatment. A violation of a rule described in subsection (h) and (j) is grounds for disciplinary action

against a practitioner licensed under title 63 by the board that licensed that practitioner. The requirements for patient's individualized treatment plans and best practices at a nonresidential office-based opiate treatment facilities. The requirements for patient's medication management at a nonresidential office-based opiate treatment facilities. As a component of the standard of care and of minimal competency a physician must cause to be created and cause to be maintained a medical record for every patient for whom he or she, and/or any of his or her professionally licensed supervisees, performs services or provides professional consultation. All medical records, or summaries thereof, produced in the course of the practice of medicine for all patients shall include all information and documentation listed in Tenn. Code Ann. 63-2-101(c)(4) and such additional information that is necessary to insure that a subsequent reviewing or treating physician can both ascertain the basis for the diagnosis, treatment plan and outcomes, and provide continuity of care for the patient. Medical records shall be retained for a period of not less than ten (10) years from the physician's or his supervisees' last professional contact with the patient. Violation of any provision of these rules is grounds for disciplinary action pursuant to Tenn. Code Ann. 63-6-214(b)(1) and/or (2).

Action: Probation for a period of three (3) years effective the date of entry of this Consent Order by the Board; shall not serve as a supervising/collaborating physician or substitute supervising/collaborating physician to any advanced practice registered nurse, physician assistant; The period of probation shall act as an encumbrance on Respondent's medical license; Respondent shall be ineligible to act as the medical director of a pain management clinic while his license is on probation. Respondent shall be ineligible to operate or participate in the ownership structure of a Nonresidential office-based opiate treatment facility ("OBOT"), while his license is on probation. During the probationary period, Respondent shall maintain good and lawful conduct, and any violation of law that relates to the practice of medicine or Respondent's ability to safely and competently practice medicine will be a violation of the terms of this Consent Order. Respondent shall not prescribe controlled substances for a period of at least two (2) years from the date of entry of this Consent Order. Respondent shall submit proof to the licensee's board or committee that they have notified any physicians, podiatrists, advanced practice registered nurses, or physician assistants with whom they collaborate of the discipline. At the expiration of the two (2) year period, and after Respondent has provided proof to the Disciplinary Coordinator that he has complied with all requirements in this Consent Order, Respondent may petition the Board to lift the restriction on prescribing of controlled substances on his license imposed by this Consent Order. The Board shall lift the restriction on prescribing controlled substances provided that Respondent has provided proof of his compliance with the restriction on prescribing controlled substances and successful completion of the coursework described below in this Consent Order. Within six (6) months of the date this Consent Order is approved by the Board, Respondent must complete coursework on Medical Documentation, Prescribing Controlled Substances, and ASAM treatment of opioid use disorder. Pay Five Thousand Seven Hundred Fifty Dollars (\$5,750.00) in civil penalties; costs of case, not to exceed \$15,000. Following the expiration of the three (3) year probationary period, and Respondent's full compliance with the other terms and conditions contained herein, Respondent becomes eligible to petition the Board for an Order of Compliance lifting the restrictions imposed by this Order. As part of the petition, Respondent shall personally appear before the Board.

Licensee: Scott L. Wilhoite, MD 18257, Knoxville
Violation: Failure to properly maintain sufficient continuing education credits.
Action: Agreed citation issued; assessed civil penalty in the amount of \$3,800.00

Licensee: Fred P. Wilson, Jr., M.D., Lic. No. 21882, Bartlett
Violation: Unprofessional, dishonorable or unethical conduct; Violation or attempted violation, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of this part or any lawful order of the board issued pursuant thereto or any criminal statute of this state; Gross health care liability or a pattern of continued or repeated health care liability, ignorance, negligence or incompetence in the course of medical practice; Dispensing, prescribing or otherwise distributing any controlled substance or any other drug not in the course of professional practice, or not in good faith to relieve pain and suffering, or not to cure an ailment, physical infirmity or disease, or in amounts and/or for durations not medically necessary, advisable or justified for a diagnosed condition; Dispensing, prescribing or otherwise distributing to any person a controlled substance or other drug if such person is addicted to the habit of using controlled substances without making a bona fide effort to cure the habit of such patient; Dispensing, prescribing or otherwise distributing any controlled substance, controlled substance analogue or other drug to any person in violation of any law of the state or of the United States; prescribes, orders, administers or dispenses dangerous drugs or controlled substances without observing Board guidelines; When prescribing a controlled substance, all healthcare practitioners, unless otherwise exempted under this part, shall check the controlled substance database prior to prescribing one (1) of the controlled substances identified in subdivision (e)(4) to a human patient at the beginning of a new episode of treatment, prior to the issuance of each new prescription for the controlled substance for the first ninety (90) days of a new episode of treatment, and shall check the controlled substance database for that human patient at least every six (6) months when that prescribed controlled substance remains part of the treatment. An authorized healthcare practitioner's delegate may check the controlled substance database on behalf of the healthcare practitioner. A 'new episode of treatment' means a prescription for a controlled substance that has not been prescribed by that healthcare practitioner within the previous six (6) months; When dispensing a controlled substance, all healthcare practitioners, unless otherwise exempted under this part, shall check the controlled substance database prior to dispensing one (1) of the controlled substances identified in subdivision (e)(4) to a human patient the first time that patient is dispensed a controlled substance at that practice site. The dispenser shall check the controlled substance database again at least once every six (6) months for that human patient after the initial dispensing for the duration of time the controlled substance is dispensed to that patient. The initial dispensing check fulfills the check requirement for the first six-month period. An authorized healthcare practitioner's delegate may check the controlled substance database on behalf of the healthcare practitioner; Before prescribing or dispensing, a healthcare practitioner shall have the professional responsibility to check the database or have a healthcare practitioner delegate check the database if the healthcare practitioner is aware or reasonably certain that a person is attempting to obtain a Schedule II-V controlled substance, identified by the committee or commissioner as demonstrating a potential for abuse for fraudulent, illegal, or medically inappropriate purposes, in violation of 53-11-402;

The controlled substances that trigger a check of the controlled substance database pursuant to subdivisions (e)(1) and (2) include, but are not limited to, all opioids and benzodiazepines. By rule, the commissioner, pursuant to 53-10-311, may require a check of the database for additional Schedule II-V controlled substances that are identified by the committee or commissioner as demonstrating a potential for abuse; Except as provided in subparagraph (b), it shall be a prima facie violation of T.C.A. 63- 6-214 (b) (1), (4), and (12) for a physician to prescribe or dispense any drug to any individual, whether in person or by electronic means or over the Internet or over telephone lines, unless the physician, or his/her licensed supervisee pursuant to appropriate protocols or medical orders, has first done and appropriately documented, for the person to whom a prescription is to be issued or drugs dispensed, all of the following: Performed an appropriate history and physical examination, and made a diagnosis based upon the examinations and all diagnostic and laboratory tests consistent with good medical care, and formulated a therapeutic plan, and discussed it, along with the basis for it and the risks and benefits of various treatments options, a part of which might be the prescription or dispensed drug, with the patient, and insured availability of the physician or coverage for the patient for appropriate follow-up care; Code of Medical Ethics; As a component of the standard of care and of minimal competency a physician must cause to be created and cause to be maintained a medical record for every patient for whom he or she, and/or any of his or her professionally licensed supervisees, performs services or provides professional consultation; All medical records, or summaries thereof, produced in the course of the practice of medicine for all patients shall include all information and documentation listed in Tenn. Code Ann. 63-2-101(c)(4) and such additional information that is necessary to insure that a subsequent reviewing or treating physician can both ascertain the basis for the diagnosis, treatment plan and outcomes, and provide continuity of care for the patient; Medical records shall be retained for a period of not less than ten (10) years from the physician's or his supervisees' last professional contact with the patient. Violation of any provision of these rules is grounds for disciplinary action pursuant to Tenn. Code Ann. 63-6-214(b)(1) and/or (2); A covered entity must have in place appropriate administrative, technical, and physical safeguards to protect the privacy of protected health information; A covered entity must reasonably safeguard protected health information from any intentional or unintentional use or disclosure that is in violation of the standards, implementation specifications or other requirements of this subpart.

Action: Voluntarily retired same as Revocation. Respondent assessed costs not to exceed \$15,000.

BOARD OF MEDICAL EXAMINERS ADVISORY COMMITTEE FOR ACUPUNCTURE

Licensee: Raymond Ahles, L.Ac., Lic. No. 427, Kingsport
 Violation: Practiced on an expired/lapsed license
 Action: License reprimanded; assessed civil penalties in the amount of \$960.00; plus costs not to exceed \$100.00

Licensee: Penelope Fattebert, L.Ac., Lic. No. 356, Oak Ridge
 Violation: Failure to maintain continuing education requirements

Action: Agreed Citation; Must submit continuing education; Assessed civil penalties in the amount of \$600.00

Licensee: Traci L. Matthews, ADS 144, Memphis

Violation: Practiced on an expired/lapsed license

Action: License reprimanded; assessed civil penalties in the amount of \$240.00; plus costs not to exceed \$200.00

Licensee: Jessica Lynn Puckett, L.Ac., Lic. No. 145, Germantown

Violation: Failure to maintain continuing education requirements

Action: Agreed Citation; Must submit continuing education; Assessed civil penalties in the amount of \$120.00

Licensee: Christina Theresa Arbogast Woolard, L.Ac., Lic. No. 191, Nolensville

Violation: Failure to maintain continuing education requirements

Action: Agreed Citation; Must submit continuing education; Assessed civil penalties in the amount of \$440.00

BOARD OF ALCOHOL AND DRUG ABUSE COUNSELORS

Licensee: Angela Shankle, ADC 1245, Nashville (*April 2023 discipline*)

Violation: Unprofessional/Unethical conduct

Action: License on Probation for 1 year; Must submit continuing education

EMERGENCY MEDICAL SERVICES BOARD

Licensee: Michael James Cronan, PACC 19561, Riceville

Violation: Guilty of DUI and Evading Arrest

Action: License suspended; must undergo an evaluation by TNPAP; If TNPAP submits an approved evaluation with no monitoring recommended license can be placed on Probation for 3 years

Licensee: Nicholas Felker, EMT 214916, Seymour

Violation: Practiced on an expired license

Action: License suspended for 90 days; Followed by a 3-year Probation; must submit continuing education

Licensee: Kynan R. Kreidel, PARA 209119, Clarksville

Violation: Criminal conviction

Action: License suspended; must undergo an evaluation by TNPAP; If TNPAP submits an approved evaluation with no monitoring recommended license can be placed on Probation for 3 years

Licensee: Bobbie M. McCracken, PARA 24336, Madisonville

Violation: Criminal conviction

Action: License suspended for 18 months, which may be stayed after 9 months with completion of continuing education and not having any other disciplinary actions; must successfully complete her current TNPAP program; upon completion of TNPAP program, license can be placed on probation for 2 years

Licensee: Chase Montgomery, PARA Applicant, Nashville
Violation: Applied for a paramedic license while applicant's AEMT license is under probation.
Action: Conditional license granted for a paramedic license.

Licensee: Jonathan Blake Norris, AEMT 213766, Pioneer
Violation: Failure to report patient care which accurately reflects the evaluation and treatment of each patient
Action: License placed on Probation for 3 years; must submit continuing education

Licensee: Jaime Quezada, EMT 212896, Spring Hill
Violation: Guilty of unethical practices or conduct
Action: License placed on Probation for 3 years; must submit continuing education

Licensee: Jillian Nicole Simmons, AEMT Applicant, Nashville
Violation: Applied for a AEMT license while applicant's EMT license is under probation.
Action: Conditional license granted for the AEMT.

Licensee: Michael Brent Work, PACC 40153, Newbern
Violation: Failure to report patient care which accurately reflects the evaluation and treatment of each patient; Engaging in acts of dishonesty which relate to the practice of emergency medical care
Action: License voluntary surrendered

BOARD OF PHYSICAL THERAPY

Licensee: William Burrus, PTA 4013, Smyrna
Violation: Failure to maintain continuing education requirements
Action: Agreed Citation; Must submit continuing education; Assessed civil penalties in the amount of \$200.00

Licensee: Kerri Dayton, PT 7846, Limestone
Violation: Failure to maintain continuing education requirements
Action: Agreed Citation; Must submit continuing education; Assessed civil penalties in the amount of \$625.00

Licensee: Angela Fewell, PTA 3041, Powell
Violation: Failure to maintain continuing education requirements
Action: Agreed Citation; Must submit continuing education; Assessed civil penalties in the amount of \$400.00

Licensee: April Miller, PT 5899, Murfreesboro
Violation: Failure to maintain continuing education requirements
Action: Agreed Citation; Must submit continuing education; Assessed civil penalties in the amount of \$1,350.00

Licensee: Lyndsey Rollins, PT 8756, Nashville
Violation: Failure to maintain continuing education requirements

Action: Agreed Citation; Must submit continuing education; Assessed civil penalties in the amount of \$500.00

Licensee: Jeffrey Weir, PT 12066, Chattanooga

Violation: Failure to maintain continuing education requirements

Action: Agreed Citation; Must submit continuing education; Assessed civil penalties in the amount of \$575.00

BOARD OF PHYSICIAN ASSISTANTS

Licensee: Logan Curran Martin, PA 4357, Manchester

Violation: Guilty of unprofessional/unethical conduct

Action: License suspended; when terms met License will be placed on Probation, which will run concurrent with TMF contract; Must undergo an evaluation; Must obtain and maintain a monitoring contract with TMF; assessed civil penalties in the amount of \$1,250.00; plus costs not to exceed \$2,000.00.

BOARD OF MEDICAL EXAMINERS' POLYSOMNOGRAPHY

Licensee: McKinzie Topper, PT 1344, Springfield (*May 2023 discipline*)

Violation: Guilty of unlicensed practice

Action: Agreed Citation; Assessed civil penalties in the amount of \$100.00