

STATE OF IOWA

TERRY BRANSTAD, GOVERNOR KIM REYNOLDS, LT. GOVERNOR

IOWA BOARD OF MEDICINE
MARK BOWDEN, M.P.A., EXECUTIVE DIRECTOR

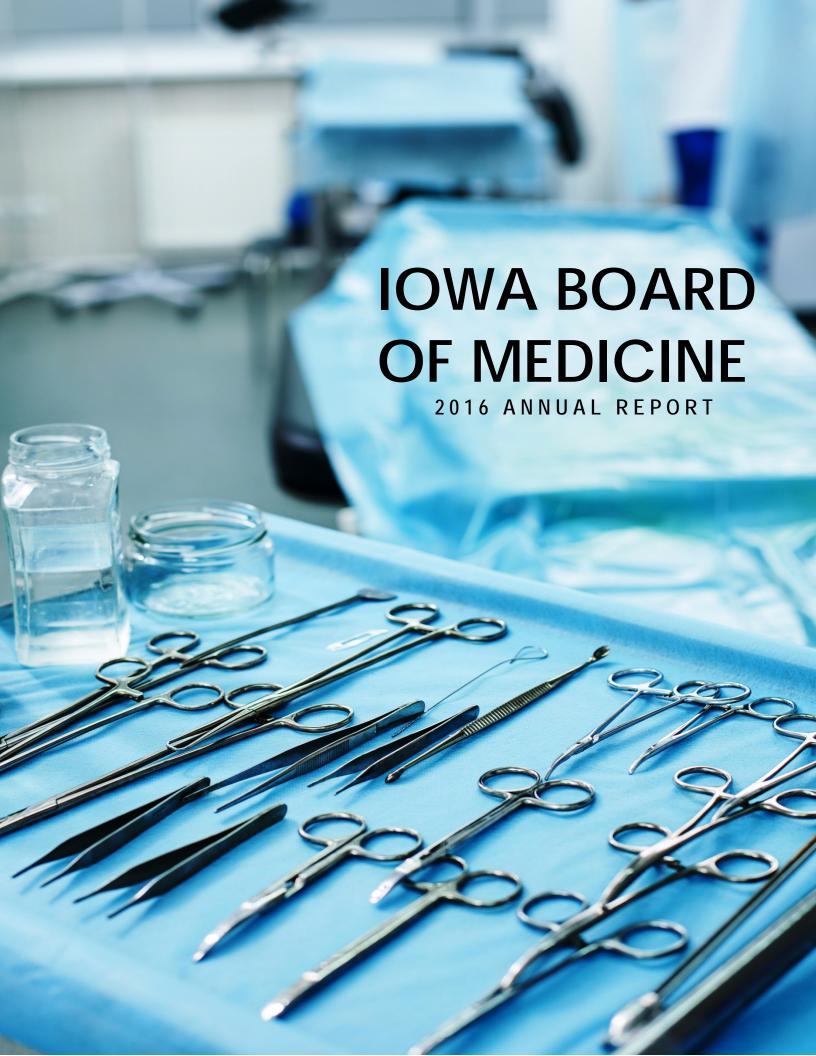
FOR IMMEDIATE RELEASE: April 27, 2017 CONTACT: Mark Bowden, (515) 242-3268 or mark.bowden@iowa.gov

Board issues 2016 annual report on licensure, regulatory activities

DES MOINES, IA – The Iowa Board of Medicine has issued its 2016 annual report on the agency's licensure and regulatory activities. In 2016, the Board:

- Administered active licenses for 12,236 physicians and 66 licensed acupuncturists, and issued 11 new licenses for non-clinical administrative medicine practices.
- Received 645 complaints and mandatory reports and completed reviews or investigations of 661 case files.
- Took 62 public disciplinary actions and voted to issue 89 confidential letters of concerns about licensees' conduct or practice.
- Filed charges against 21 physicians and issued three public consent agreements as a condition for medical licensure.
- Assessed civil penalties totaling \$78,500 involving 17 cases.
- Initiated action to amend three administrative rules concerning the practice of licensed acupuncturists, new guidance for physicians who treat chronic pain patients, and the composition of Board panels that hear disciplinary cases.
- Held seven two-day administrative meetings, 10 teleconferences, one disciplinary hearing, and numerous subcommittee meetings on issues and topics before the Board.
- Continued a robust educational outreach program to the public and licensees, health care stakeholders, and state and federal government officials.
- Participated in training activities and regulatory discussions offered by the Federation of State Medical Boards, the Administrators in Medicine, and the Citizen Advocacy Center.
- Participated in the Interstate Medical Licensure Compact, which creates an expedited process for multi-state medical licensure.
- Elected the first non-physician public member to chair the 130-year-old Board.

The full report, which includes a summary of all Board actions issued in 2016, is attached. See previous years' reports at http://www.medicalboard.iowa.gov/about_the_board/data.html



ABOUT THE BOARD

The 21st General Assembly created the State Board of Medical Examiners in 1886 to license physicians and regulate the practice of medicine. Initially, the Board issued licenses to several classes of physicians, including medical (M.D.), homeopaths, and eclectics.

The Board did not issue licenses for osteopathic physicians until 1902. In 1921, the Legislature created a separate board to license and regulate osteopaths. In 1963, the Legislature abolished the osteopathic board and redefined the State Board of Medical Examiners, making it a composite board to license allopathic physicians (M.D.s) and osteopathic physicians (D.O.s). In 2007, the board was renamed the Board of Medicine.

Since 1994, the Board has regulated acupuncturists, first registering them, then licensing them. Over the past 130 years, the Board has directly or indirectly been responsible for licensure or regulation of other health care providers, including nurses, advanced emergency medical technicians, paramedics, and physician assistants. All of these professions are now licensed and regulated by their own boards.

In 1996, the Legislature authorized the Board to establish the Iowa Physician Health Committee to administer a program to advocate for and monitor the recovery and rehabilitation of impaired physicians.

In 2015, the Legislature authorized the Board to join the Interstate Medical Licensure Compact, which establishes an expedited process for medical licensure in participating states.

Non-physician "public" members have been on the 10-member Board since 1975.



IOWA BOARD OF MEDICINE 400 SW Eighth Street, Suite C Des Moines, Iowa 50309-4686

HOURS: 8:00 a.m. to 4:30 p.m., Monday

through Friday

PHONE: (515) 281-5171 FAX: (515) 242-5908 EMAIL: ibm@iowa.gov

WEB: www.medicalboard.iowa.gov

The Board regulates the practice of medicine and surgery and acupuncture under the authority of lowa Code chapters 17A, 147, 147B, 148, 148E, 272C and Section 653 in the lowa Administrative Code.

The Board is charged with enforcing these laws and rules to protect the public from licensees who do not practice medicine and acupuncture within prevailing and acceptable standards of care.

The Board is an Executive Branch agency within the Iowa Department of Public Health. The Board is funded entirely with licensure fees.

BOARD MEMBERS



MEMBERS OF THE BOARD OF MEDICINE, MAY 1, 2016, TO APRIL 30, 2017: (front row from left): KellyAnn Light-McGroary, M.D., Solon; Diane Cortese, Urbandale; Mary Jo Romanco, Pleasantville; Nicole Gilg Gachiani, M.D., Des Moines; (Back row from left): Ronald Cheney, D.O., Carroll; Ronald Kolegraff, M.D., Milford; Charles Wadle, D.O., West Des Moines; Diane Clark, Lake Mills; Hamed Tewfik, M.D., Iowa City; and Kyle Ulveling, M.D., Carroll.

The 10-member Board of Medicine is composed of seven physicians (five M.D.s and two D.O.s) and three non-physicians who represent the public. Members are appointed by the Governor and confirmed by a two-thirds' majority vote in the Iowa Senate for a full three-year term or to complete the unexpired term of a member who resigned. Members can serve up to nine years. Members receive a per diem and expenses. The Board annually elects a chairperson, vice chairperson, and secretary and is organized into four standing committees, each with five members: Executive, Licensure, Monitoring, and Screening.

2016 MEMBERS & OFFICERS	APPOINTED	TERM EXPIRES
Diane Clark, Lake Mills, Chair	2011, 2014	April 30, 2017
Ronald Cheney, D.O., Carroll, Vice Chair	2014	April 30, 2017
Kyle Ulveling, M.D., Carroll, Secretary	2015	April 30, 2018
Diane Cortese, Urbandale	2014, 2016	April 30, 2019
Nicole Gilg Gachiani, M.D., Des Moines	2016	April 30, 2019
Ronald Kolegraff, M.D., Milford	2016	April 30, 2019
KellyAnn Light-McGroary, M.D., Solon	2016	April 30, 2019
Mary Jo Romanco, Pleasantville	2015	April 30, 2018
Hamed Tewfik, M.D., Iowa City	2011, 2014	April 30, 2017
Charles Wadle, D.O., West Des Moines	2015	April 30, 2018

Physicians and non-physicians interested in serving on the Board can complete an online application at https://openup.iowa.gov/

EXECUTIVE DIRECTOR'S REPORT

The Iowa Board of Medicine takes seriously its fundamental responsibility to serve the citizens of Iowa by ensuring that physicians and acupuncturists are qualified to practice and that they are adhering to the laws, rules and standards that regulate their practices.

In 2016, the Board:

- Administered active licenses for 12,236 physicians and 66 licensed acupuncturists.
- Received 645 complaints and mandatory reports and completed reviews or investigations of 661 case files.
- Took 62 public disciplinary actions and voted to issue 89 confidential letters of concerns about licensees' conduct or practice.
- Filed charges against 21 physicians and issued three public consent agreements as a condition for medical licensure.
- Assessed civil penalties totaling \$78,500 involving 17 cases.
- Initiated action to amend three administrative rules.
- Held seven two-day administrative meetings, 10 teleconferences, and one disciplinary hearing.
- Continued a robust educational outreach program to the public and licensees, health care stakeholders, and state and federal government officials.
- Participated in training activities and regulatory discussions offered by the Federation of State Medical Boards and the Administrators in Medicine.
- Issued 11 new licenses for non-clinical administrative medicine practices.
- Actively participated in the new Interstate Medical Licensure Compact.
- Elected the first non-physician public member to serve as Board chair.

The Board places great emphasis on completing timely, fair and complete investigations that result in appropriate action. Concurrently, the Board provides assistance and guidance to licensees through the adoption of rules and regular communications on disciplinary actions and a variety of issues relating to their practices.

In addition, the Board remains a strong supporter of the Iowa Physician Health Program, which facilitates the intervention and rehabilitation of physicians who have mental, physical or chemical dependency issues that, if left untreated or not monitored, could impair their ability to practice safely.

This brief report is a statistical tabulation of the Board's work during 2016. Behind these numbers are the hard work of a devoted and professional staff and the exceptional public service of dedicated Board members.

The Board has a long history of transparency regarding its licensure, disciplinary and regulatory work, making all public documents easily available on the Board's website. In addition, the agency has provided annual reports such as this one for several decades. Do you want to know more about the Board? Please visit us online at www.medicalboard.iowa.gov or contact me.

APRIL 1, 2017

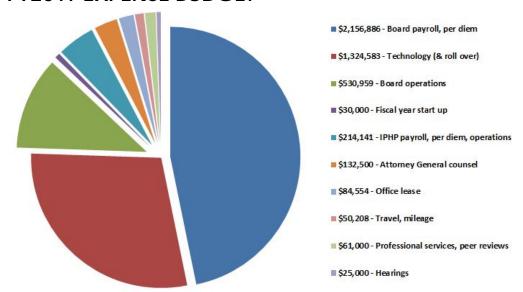
MARK E. BOWDEN, M.P.A.

EXECUTIVE DIRECTOR, IOWA BOARD OF MEDICINE

Royli & Drewler

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FY2017 EXPENSE BUDGET



BOARD OF MEDICINE'S EXPENSE BUDGET FOR FISCAL YEAR 2017 (JULY 1, 2016, THROUGH JUNE 30, 2017): \$4,609,861. The FY2017 expense budget includes roll-over funds for operations and to cover ongoing expenses for programming the Board's database and to fund technology upgrades. The Board's anticipated revenue from licensure fees in FY2017 is \$3,039,995. The Board is funded entirely with licensure fees, which have not been increased since FY2007. In FY2014, the Board reduced fees.

2016 MEETING SCHEDULE

MEETINGS & TELECONFERENCES January 15 February 4-5 February 19 March 5 March 26 April 7-8 June 2-3 June 25 June 29 July 28-29 August 13 September 15-16 October 22 October 27-28 November 12 December 15-16



ON THE BOARD'S WEBSITE: www.medicalboard.iowa.gov

- Agendas, minutes of all meetings in the past six years
- Profiles on all lowa-licensed physicians and acupuncturists
- Forms for online-filing of complaints with the Board
- Regulatory information for licensees and applicants
- Annual reports since 1978
- Press releases and documents on all public orders

To receive press releases, agenda s and other Board news, sign up at join-IABMPRESSRELEASE@lists.ia.qov.

ADMINISTRATIVE RULES

The Board of Medicine's administrative rules, which have the weight of law, are found in Section 653 of the Iowa Administrative Code. Before the Board can adopt a new rule or amend an existing rule, the intended action item must be published in the Administrative Bulletin and reviewed at a public hearing. The proposed change can also be subject to review by the Governor's Office and by the Administrative Rules Review Committee. In addition, the public can petition the Board to adopt, amend or repeal an administrative rule.

Rulemaking initiated in 2016:

- CHAPTER 13, STANDARDS OF PRACTICE AND PRINCIPLES OF MEDICAL ETHICS –
 ARC2253C. The amendments update the Board's recommended resources for
 physicians who treat chronic pain, including the U.S. Centers for Disease Control
 and Prevention's new recommendations for the prescribing of opioid pain
 medication for patients 18 years of age and older in primary care settings.
 Recommendations focus on the use of opioids in treating chronic pain.
 INITIATED 04/08/2016 | ADOPTED 07/29/2016 | EFFECTIVE 10/19/2016
- CHAPTER 17, LICENSURE OF ACUPUNCTURISTS ARC2860C. The amendments update requirements for licensure, renewal and reinstatement; identify diagnostic and treatment modalities performed by acupuncturists; provide definitions of additional terms associated with acupunctural services; revise requirements for the display, distribution and retention of a disclosure sheet which contains information for patients; establish requirements for the delegation of certain aspects of treatment; and establish a requirement that licensees report changes in their full legal names. INITIATED 10/28/2016 | ADOPTED 01/19/2017 | EFFECTIVE 03/22/2017
- CHAPTER 25, CONTESTED CASE PROCEEDINGS ARC2610C. The amendment updates a subrule to be consistent with a 2014 amendment to lowa Code section 148.7(4) regarding the use of alternate members on Board panels that hear contested case proceedings. Alternate members serve on panels when a quorum of the Board is not available. INITIATED 04/08/2016 | ADOPTED 07/29/2016 | EFFECTIVE 10/19/2016

Rulemaking petition received in 2016:

• CHAPTER 13, STANDARDS OF PRACTICE AND PRINCIPLES OF MEDICAL ETHICS. Filed February 23, 2016, the petition asked the Board to adopt a new rule, 653 IAC 13.13, to prohibit a physician from engaging in sexual orientation change efforts on patients less than 18 years of age. The Board issued an order on April 22, 2016, denying the petition due to the lack of sufficient facts to initiate rulemaking. The Board directed a subcommittee to study the issue and to make a recommendation on the need for a rule. In a report issued October 14, 2016, the subcommittee concluded that a rule was not necessary at this time. The report cited existing rules and national practice standards that the Board could apply to evaluate a physician's practice if there were conversion therapy complaints. The petition, the order denying the petition, and the subcommittee report are available at www.medicalboard.iowa.gov

IOWA PHYSICIAN HEALTH PROGRAM

The Iowa Physician Health Program (IPHP) was established in 1996 to support physicians who self-report mental health issues, physical disabilities or substance use disorders. The advocacy and confidential monitoring program is administered by the Iowa Physician Health Committee, which is appointed by the Board of Medicine. Participants sign contracts agreeing to adhere to the strict guidelines. The program's overarching goals are supporting physicians



who seek the program's assistance, protecting the public by carefully monitoring physicians with diagnosed impairments that may affect their abilities to practice, and maintaining credibility with the Board and the public by accountability and responsible application of authority. The committee and program are defined in Iowa Administrative Code 653 Chapter 14. Committee members receive a per diem and expenses.

The committee held four meetings in 2016 and met with 32 program participants. The program's budget of \$214,141 in FY2017 is funded entirely with licensure fees. Licensees do not pay additionally to participate in the program, but they are responsible for all costs associated with drug screening, therapy, treatment and so forth.

Staff members of the Board manage the program and meet with the participants in the field to ensure compliance. The committee's co-chairs and legal counsel provide guidance on case issues. **Members of the committee in 2016:**

- Lester Yen, M.D., West Des Moines, co-chair
- Raymond Harre, M.D., Davenport, co-chair
- Eric Boyum, M.D., Oskaloosa
- Kim Brangoccio, LMFT, CEAP, IAADC, Booneville
- Jeanine Freeman, J.D., Des Moines
- Jeff Kerber, Ph.D., West Des Moines, licensed marriage and family therapist
- Sasha Khosravi, D.O., Grimes
- Jeffrey Means, M.Div., Ph.D., Des Moines
- Mark Bowden, M.P.A., executive director, Board of Medicine

Amy Van Maanen, L.B.S.W., is the program's coordinator and Emily Zalasky, L.B.S.W., is the program's case manager. Sara Scott, an Assistant Iowa Attorney General, provides legal counsel for the program.

IOWA PHYSICIAN	HEA	LTH	PROGRAM http://iph	p.iowa.	gov/
(TOTALS ON DECEMBER 31)	2015	2016	(PARTICIPANTS' DIAGNOSES)	2015	2016
Active Participants	60	50	Substance use	14	13
In review for eligibility	10	8	Mental health	13	8
Physicians	59	47	Physical condition	7	2
Resident physicians	11	11	Multiple diagnoses	26	27
Discharged	58	37			
Noticed for violations	0	5			

LICENSURE

JANUARY 1-DECEMBER 31	2014	2015	2016
Active M.D. licenses	9,756	10,090	10,289
Active D.O. licenses	1,782	1,881	1,947
TOTAL	11,538	11,971	12,236
TOTAL	11,000	11,771	12,200
Active M.D.s with Iowa work address	5,477	5,455	5,382
Active D.O.s with Iowa work address	1,333	1,375	1,407
TOTAL	6,810	6,830	6,789
TOTAL	0,010	0,030	0,707
PERMANENT PHYSICIAN LICENSE			
Issued by endorsement	470	496	581
Issued by expedited endorsement	143	182	227
Issued by examination	296	288	285
TOTAL	909	966	1,093
TOTAL	707	700	1,073
Application denied	0	0	0
Confidential letter about application	NA	63	80
Commontain lotter about application	14/1	30	
(EFFECTIVE 7/1/15) Relinquished		33,379	494
Renewed	5,398	5,342	5,466
Went inactive	788	793	852
Reinstated	76	85	73
ADMINISTRATIVE MEDICINE LICENSE			
(EFFECTIVE 7/1/16) Issued			11
Renewed			0
ACTIVE			11
RESIDENT PHYSICIAN LICENSE			
Issued	288	290	306
Renewed	13	2	6
ACTIVE	720	756	762
SPECIAL PHYSICIAN LICENSE			
Issued	0	4	1
Renewed	25	22	23
Went inactive	0	3	0
ACTIVE	24	26	24
TEMPORARY PHYSICIAN LICENSE			
Issued	14	9	9
Renewed	4	1	2
Went inactive	5	4	7
ACTIVE	11	6	6
ACUPUNCTURIST LICENSE			
Issued	8	10	2
Renewed	47	0	55
Went inactive	9	9	0
ACTIVE	52	62	66
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IOWA MEDICAL LICENSES

PERMANENT – A license to practice in any setting in Iowa. It's a two-year license that can be renewed.

ADMINISTRATIVE – A license for a non-clinical, administrative position in medicine not involving patient care.

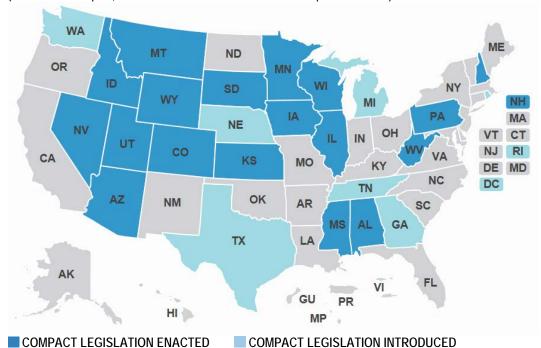
RESIDENT – A license to practice in a Board-approved resident training program in lowa. The license is issued for the duration of the training program.

SPECIAL – A license to practice by a highly specialized physician who is a medical college faculty member at the University of lowa or Des Moines University who does not meet qualifications for permanent licensure.

TEMPORARY – A license authorizing a physician to practice in a short-term Board-approved practice setting such as medical director of a camp.

INTERSTATE MEDICAL LICENSURE COMPACT

(Data shown as of April 1, 2017. Source: Interstate Medical Licensure Compact Commission)



The Interstate Medical Licensure Compact creates a new pathway to expedite the licensing of physicians seeking to practice medicine in multiple states. States participating in the Compact agree to work together in new ways to significantly streamline the licensing process and to strengthen public protection by sharing investigative and disciplinary information. The expedited licensure process began in April 2017.

The Compact, which was established in 2015, comes at a time when physicians are seeking licensure in multiple states to complement their practices in regional health care systems and their use of telemedicine to reach patients in under-served areas.

The Compact had been enacted in 18 states, with others expected to adopt it this year. States that have joined so far include Alabama, Arizona, Colorado, Idaho, Illinois, Iowa, Kansas, Minnesota, Mississippi, Montana, Nevada, New Hampshire, Pennsylvania, South Dakota, Utah, West Virginia, Wisconsin, and Wyoming. Iowa became the 10th state to enact the law, which is presented in Iowa Code chapter 147B.

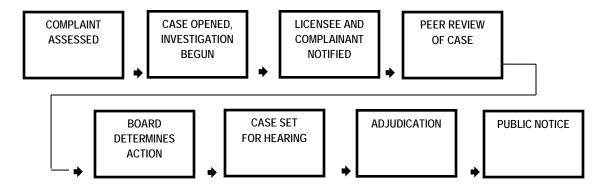
To be eligible for expedited licensure, physicians must possess a full and unrestricted license to practice medicine in a Compact state; possess specialty certification or be in possession of a time unlimited specialty certificate; have no discipline on any state medical license; have no discipline related to controlled substances; not be under investigation by any licensing or law enforcement agency; have passed the USMLE or COMLEX (or equivalent) within three attempts; and have successfully completed a graduate medical education program.

A commission provides oversight and administration of the Compact. Iowa's commissioners are Diane Clark, a public member of the Board of Medicine, and Mark Bowden, the Board's executive director. More information about the Interstate Medical Licensure Compact is available at www.imlcc.org

ENFORCEMENT

JANUARY 1 TO DECEMBER 31	2013	2014	2015	2016
COMPLAINTS, MANDATORY REPORTS				
Complaints	493	497	577	449
Reports	168	150	135	196
TOTAL	661	647	712	645
Complaint files closed	683	NA	588	474
Report files closed	115	NA	146	187
TOTAL	798	726	734	661
Complaint investigations open on 12/31	659	NA	367	358
Report investigations open on 12/31	4	NA	68	73
TOTAL	663	584	435	431
PUBLIC CHARGES & CONSENT AGREEMENTS	44	40	22	24
DISCIPLINARY ACTIONS: FORMAL & INFORMAL				
License revocation/surrender	20	9	3	2
License suspension	1	1	1	0
License probation	11	7	12	8
Civil penalty	16	16	17	17
Public citation and warning	31	26	21	23
Practice restriction	13	7	7	10
TOTAL FORMAL (PUBLIC) ACTIONS	92	66	61	62
Confidential letter about practice or conduct	77	123	105	89
Licenses monitored by the Decades 40/04	200	404	400	67
Licensees monitored by the Board on 12/31	206	191	196	67
PUBLIC LETTER TO CEASE AND DESIST	0	2	2	0

GENERAL OVERVIEW OF COMPETENCY COMPLAINT PROCESS



ENFORCEMENT SUMMARY – 2016 CHARGES & CONSENTS

In 2016, the Board of Medicine filed charges against 24 physicians involving issues related to their practices in Iowa or related to adverse actions taken against them by another state's medical licensing board. Total charges listed below exceed 24 because some physicians were charged with more than one count. The total charges include three consent agreements as a condition for granting a permanent Iowa license, publicly recognizing adverse actions taken against applicants by another state's licensing board.

CHARGES:

Failure to conform to standards - 2

Failure to respond or comply with investigation - 1

Fraud in representations as to skill or ability - 2

Improper management of medical records - 1

Improper pain management - 5

Inappropriate prescribing - 1

Maintaining pre-signed prescriptions - 1

Practice harmful or detrimental to the public - 1

Professional incompetency - 5

Sexual harassment - 1

Sexual misconduct - 1

Unethical or unprofessional conduct - 3

Untruthful or improbable statements in

advertisements - 1

Wrong surgical procedure - 1

Sanctions by another state's licensing board - 8

- Failure to conform to standards 1
- Failure to maintain medical records 1
- Failure to provide appropriate care 3
- Gross negligence 1
- Sexual contact with a patient 1
- Improper prescribing 1
- Professional incompetence 1
- Substance abuse 2
- Unprofessional conduct 2

CONSENT AGREEMENTS FOR LICENSURE:

(Agreement recognizes action against applicant in another state)

- Improperly performed brachytherapy 1
- Failure to provide appropriate care 1
- Failure to appropriately diagnose and treat gastric ulcer 1

OUTCOMES: Complaints are most often handled in one of three ways

- 1. NO ACTION. This is the result when no violation of laws, rules or medical care standards has occurred. The licensee is notified and the information is kept on file.
- 2. INFORMAL ACTION. There may be no violation of laws, rules or medical care standards that warrants public action, but the Board is nonetheless concerned about some aspect of the licensee's conduct or performance. The Board will issue a confidential letter of education or warning cautioning the licensee against repeating similar conduct or practice.
- 3. PUBLIC CHARGES FILED. The Board determines there is a violation of laws, rules or medical care standards and files public charges and a disciplinary hearing is scheduled.

ENFORCEMENT SUMMARY – 2016 INFORMAL ACTIONS

When the Board of Medicine determines that probable cause does not exist to take formal public disciplinary action the Board may send a confidential non-disciplinary letter to a licensee expressing concerns and requesting that a licensee take corrective action. In 2016, the Board voted to issue 89 confidential letters addressing the following concerns in the practice of medicine or the licensee's conduct:

Anticoagulation management, monitoring for patient Breached professional boundaries by treating patients outside of clinical setting

Delayed diagnosis, treatment of patient's fractured tibia Diagnosis, treatment of patient who experienced significant obstetric complication

Diagnosis, treatment of patient with delirium Diagnosis, treatment of patient with hyperthyroidism Diagnosis, treatment, management of patient who was subsequently diagnosed with a contagious disease Did not receive abnormal test results due to recordkeeping error and failed to follow-up on test results

Disciplined by another state's licensing board Engaged in unprofessional conduct and/or behavior with subordinate co-worker

Engaged in unprofessional conduct with patient's family member

Engaged in unprofessional conduct and concerns about physician's pain management and prescribing practices Evaluation, treatment of patient who experienced neurological deficits following spine surgery Evaluation, treatment of single pregnant patient who presented with nausea, vomiting and cognitive concerns Evaluation of patient, including failure to recognize and address signs and symptoms of a pulmonary embolism Evaluation, diagnosis, treatment of patient who experienced testicular torsion resulting in loss of testicle

Evaluation, diagnosis, treatment of patient with breast mass resulting in delayed diagnosis, treatment of cancer Evaluation, monitoring, treatment of patient whose ventilation was deteriorating

Evaluation, testing, treatment of patient who experienced an acetaminophen overdose

Evaluation, testing, treatment of patient who experienced an intestinal obstruction

Evaluation, testing, treatment of patient with palpable mass Evaluation, testing, treatment of patient who suffered stroke Evaluation, testing, treatment of patient who was diagnosed with left inferior orbit lymphoma

Evaluation, treatment, follow-up care of patient who was subsequently diagnosed with H1N1 influenza virus Failed to complete a death certificate in a timely manner Failed to document accurate and detailed cause of death on death certificates

Failed to maintain appropriate and timely medical records Failed to respond to investigation in timely manner Failed to report abnormal test results to patient and failed to provide appropriate follow-up

Failed to provide appropriate follow-up for abnormal test results from a preoperative clearance evaluation resulting in the delayed diagnosis and treatment of lung cancer Failed to report hospital disciplinary action in timely manner Failed to timely respond to audit of CME activities Falsified medicine-related forms

Informed consent, surgery, communication, documentation for patients who experienced postoperative complications Management of patient who was receiving dialysis treatment Medical office is messy, failed to maintain records properly, maintained expired medicine samples

Misread CT scan of the head resulting in delayed diagnosis and treatment of a subdural hematoma

Misread an electrocardiogram and failed to document recommendation for hospital admission

Pain control during a nephrostomy

Pain management and prescribing practices

Pain management, prescribing practices and monitoring of patient who experienced an acute hydrocodone overdose Performance of a cesarean section delivery

Postoperative care including delayed diagnosis and treatment Prescribed antibiotics to a co-worker's grandchildren without performing appropriate examinations and without maintaining medical records

Prescribed excessive amounts of opioids and benzodiazepines Prescribed medications to former patient in another state without appropriate examinations, monitoring, records Prescribed medications to patient without performing appropriate examinations and without maintaining records Prescribing of controlled substances to patients for treatment of chronic pain

Prescribing practices, pain management, medication management for multiple patients

Professional conduct and communication with patients and or healthcare providers $% \left(\mathbf{r}\right) =\mathbf{r}^{\prime }$

Psychiatrist discussed business transaction with patient during office visits

Retired physician failed to provide appropriate chronic pain management to multiple patients

Specialist failed to refer patient to their primary care provider for a cardiac workup in a timely manner Supervision of delegated medical services

Surgeon ordered preoperative clearance evaluation and failed to review and/or address abnormal test results and ensure that patient received appropriate follow-up care resulting in delayed diagnosis and treatment of lung cancer Surgical treatment and documentation for patient who experienced significant postoperative complications Surgery and postoperative care for patient who experienced significant complications following a colonoscopy Surgical care of patient who had colon resection surgery and experienced serious postoperative complications

Surgical treatment of patient who underwent coronary bypass surgery, experienced postoperative complications Surgical treatment of patient who underwent spinal surgery and experienced postoperative complications

Surgical treatment of patient who experienced significant postoperative complications

Treatment of critically ill patient after hospital discharge Treatment of a high-risk pregnancy, including failure to establish and or document an estimated fetal weight at time of admission

Treatment of patient who experienced a dog bite Treatment of patient who experienced a urinary tract infection and antibiotic resistant E. coli

Treatment of patient who had physical contact with a bat and may have contracted rabies

Treatment of multiple patients in emergency department Treatment of patients for drug addiction including, early refills, positive drug screens and medical record keeping Treatment of patients via telemedicine including physician's examinations and documentation

Use of hormone therapy including evaluation, testing, and monitoring $% \left(\mathbf{r}\right) =\mathbf{r}^{\prime }$

ENFORCEMENT, LICENSURE ACTIONS – 2016 ORDERS

The following are summaries of the Board of Medicine's public orders issued in 2016, including enforcement actions and licensure requirement waivers. The documents for these orders are available at www.medicalboard.iowa.gov

Samuel D. Andrews, M.D. License No. 44021 Date of Order: 12/16/2016

Actions: Issued Citation and warning and issued him a permanent Iowa medical license. **Basis:** Action taken by the Illinois Board.

David R. Archer, M.D. License No. 25222 Date of Order: 06/03/2016

Actions: Issued citation and warning; assessed civil penalty; ordered to complete medical record keeping course; prohibited from prescribing, administering or dispensing controlled substances for the treatment of chronic pain; placed on probation subject to monitoring and prescribing audits. Basis: Improper pain management.

Muhammad Sameer Yameen Arain, M.D. License No. 43391

Date of order: 06/02/2016

Actions: Issued medical license; waived licensure requirement in 653 IAC 9.7(1)e(1) - complete all components of the United States Medical Licensure Exam within a 10-year period. **Basis:** Dr. Arain exceeded the 10-year limit by two months. He completed a total of 5

10-year period. **Basis:** Dr. Arain exceeded the 10-year limit by two months. He completed a total of 5 years of accredited postgraduate training. He holds an active, unrestricted license in another state..

Manish Bajaj, M.D. License No. 43499 Date of order: 06/03/2016

Actions: Issued medical license; waived licensure requirement in 653 IAC 9.3(1)c(3)complete progressive continuous, postgraduate training in a program approved by the Board. Basis: Dr. Bajaj completed one year of accredited training followed by one year of non-accredited training and then an additional year of accredited training. All training was done at University of Iowa Hospitals and Clinics' radiology department.

Ravi C. Ashwath, M.D. License No. 32606 Date of Order: 08/11/2016

Actions: Issued citation and warning; issued medical license. **Basis:** Action taken by the Georgia Composite Medical Board.

Daniel J. Baldi, D.O. License No. 02785

Date of order: 10/28/2016

Actions: Issued citation warning; assessed civil penalty; ordered to complete medical record course; permanently keeping prohibited from prescribing, administering dispensing controlled substances for the treatment of chronic pain; lifted suspension of his Iowa medical license, but he must successfully complete Board-approved a comprehensive clinical competency evaluation or a residency/retraining program to demonstrate his medical competency; and complete a professional ethics program and a medical record keeping course before he can return to the practice of medicine; Upon successful completion of the requirements, Dr. Baldi will be placed on probation for a period of five years subject to Board monitoring, including a Board-approved practice plan, controlled substance prescribing audits and a Board-approved practice monitoring plan. Basis: incompetency; Professional inappropriate prescribing; improper pain management; unethical or unprofessional conduct.

Richard C. Blunk, M.D. License No. 39153 Date of order: 06/03/2016

Actions: Issued citation and warning; assessed civil penalty; placed on probation subject to monitoring. Basis: Sexual misconduct.

Daniel Baumgart, M.D. License No. 32998 Date of order: 09/16/2016

Actions: Reinstated medical license; waived reinstatement requirement in 653 IAC 9.15(2)d demonstrate competency by an evaluation, special testing or complete additional training. Basis: Physician held an active Iowa license until December 1, 2013, with no disciplinary action. Board recognized his continuing medical education, practice history and positive letters of recommendation.

Paul M. Bolger, M.D. License No. 35368 Date of order: 02/05/2016

Actions: Issued citation and warning; assessed civil penalty; ordered to complete a professional ethics program; prohibited from engaging in the practice of telemedicine unless and until he demonstrates that he is able to do so in a safe manner and he receives prior written approval from the Board. Basis: Failure to conform to the acceptable standard of care.

Steven P. Breaux, M.D. License No. 36950 Date of order: 04/08/2016

Actions: Issued citation and warning; assessed civil penalty; ordered to establish appropriate prenatal care protocol. Basis: Failure to conform to the acceptable standard of care; failure to disclose required information.

Dorothy Cline-Campbell, D.O. License No. 02727 Date of order: 09/16/2016

Actions: Terms of an October 22, 2010, order were terminated. The Board continued to prohibit her from serving as a medical director of any skin care clinic in the future pursuant to the January 12, 2006, combined Statement of Charges and Settlement Agreement. Basis: Completed terms of order.

ENFORCEMENT, LICENSURE ACTIONS – 2016 ORDERS

The following are summaries of the Board of Medicine's public orders issued in 2016, including enforcement actions and licensure requirement waivers. The documents for these orders are available at www.medicalboard.iowa.gov

Yehudith Assouline Dayan, M.D. License No. 43809 Date of order: 09/16/2016

Actions: Issued medical license; waived licensure requirement in 653 IAC 9.7(1)e(1) - complete all components of the United States Medical Licensure Exam within a 10-year period. Basis: Dr. Dayan exceeded the 10-year limit by six years and two months. She has held a special license to practice at the University of Iowa Hospitals and Clinics since 2013. She passed all

steps of USMLE on first attempt.

James D. Dickie, M.D. License No. 38544 Date of order: 10/28/2016

Action: Voluntarily surrendered of Iowa medical license. **Basis:** Action taken by the Kansas State Board of Healing Arts.

Michael J. Flanigan, M.D. License No. 22174 Date of order: 12/16/2016

Action: Issued citation and warning. **Basis:** Action taken by the Wisconsin Medical Examining Board.

Tamara S. Hlavaty, M.D. License No. 29637 Date of order: 07/29/2016

Actions: Issued citation and warning; assessed civil penalty; referred to the Iowa Physician Health Program for substance abuse assessment, monitoring and assistance. Basis: Action taken by the Nebraska Board of Medicine and Surgery.

David H. Marcowitz, D.O. License No. 03281 Date of order: 06/03/2016

Action: Stay enforcement of deadlines established in June 25, 2015 order. **Basis:** Dr. Marcowitz reported serious health issues and agreed to not engage in any aspect of the practice of medicine.

Michael F.E. Jones, M.D. License No. 18361 Date of order: 09/16/2016

Action: March 29, 2012, order terminated. **Basis:** Completed terms of order.

Heather M. Marthers, M.D. License No. 36499 Date of order: 04/08/2016

Action: Probation terminated. **Basis:** Completed terms of probation.

Kent D. Miller, D.O. License No. 01915 Date of order: 12/16/2016

Actions: Issued citation warning; assessed civil penalty; prohibited from prescribing, administering or dispensing controlled substances for treatment of chronic pain; ordered to complete a Board-approved medical record keeping course; placed on probation for a period of five years subject to Board monitoring, including controlled substance prescription audits. Basis: Improper pain management; failure to provide appropriate medical care.

Paul D. Peterson, D.O. License No. 03181 Date of order: 07/29/2016

Actions: Issued citation and warning; assessed civil penalty; ordered to complete continuing medical education in the areas of record keeping, medical appropriate diagnosis and treatment of group B streptococcal meningitis in newborn children, and the established criteria and appropriate use of phentermine for weight loss; prohibited from prescribing, administering or dispensing controlled substances for the treatment of chronic pain; placed on probation subject to monitoring. Basis: Failure to conform to the acceptable standard of violation of statute or rule of the Board.

Stuart G. Oxford, M.D. License No. 31601 Date of order: 09/16/2016

Actions: Issued citation and warning; ordered him to fully comply with the August 26, 2015, order issued by the Nebraska Board of Medicine and Surgery. Basis: Action taken by the Nebraska board.

Michael C. Prescher, M.D. License No. 31176 Date of order: 12/16/2016

Action: Probation terminated. Must share a copy of order with any new hospital, clinic, office, or other health care facility prior to practicing medicine at the facility in the future and submit a written statement to the Board from each which indicates that they have read and fully understand the terms and conditions of the order. The following practice requirements remain in effect: a Board-approved group practice setting; a Boardapproved chaperone for all female patients except when he practicing in a Board-approved hospital setting; treatment only during regular clinic hours: trained appropriately staff: appropriate levels of sedation; appropriate monitoring during procedures; appropriate patient transportation following procedures; appropriate written informed consent; appropriate medical records; and appropriate fees for services. Basis: Completed terms of probation.

David B. Robinson, M.D. License No. 41096 Date of order: 10/28/2016

Actions: Issued citation and warning; assessed civil penalty; placed on probation subject to monitoring. Basis: Unprofessional conduct.

ENFORCEMENT, LICENSURE ACTIONS - 2016 ORDERS

The following are summaries of the Board of Medicine's public orders issued in 2016, including enforcement actions and licensure requirement waivers. The documents for these orders are available at www.medicalboard.iowa.gov

Winthrop S. Risk, II, M.D. License No. 35883 Date of order: 09/16/2016

Action: Prohibition from treating patients for chronic pain and/or prescribing, administering or dispensing controlled substances to patients terminated. The Board may conduct audits of Dr. Risk's controlled substance prescribing practices to ensure that he is prescribing controlled substances for the treatment of chronic pain in a safe manner in the future. Basis: Completed terms of order.

Randy R. Robinson, M.D. License No. 29686 Date of order: 09/16/2016

Actions: Issued citation and warning; assessed civil penalty; ordered to complete a Board-approved course for appropriate prescribing of controlled substances for the treatment of chronic pain and a medical record keeping course; and required to submit to Board-approved prescribing audits for a period of two years. Basis: Improper pain management.

Susan L. Roeder, D.O. License No. 03218

Date of orders: 06/03/2016, 08/31/2016

Actions (06/03/2016): Issued citation and warning; assessed civil penalty; ordered to complete a professional ethics program. Basis: Pre-signing prescriptions. Action (08/31/2016): June 3, 2016, order terminated. Basis: Completed terms of order.

Michael T. Salwitz, M.D. License No. 43914 Date of order: 10/28/2016

Actions: Issued citation and warning; issued permanent Iowa medical license. Basis: Actions taken by the Arizona Medical Board and the Ohio Medical Board.

Mary P. Rosman, D.O. License No. 02054 Date of order: 02/05/2016

Actions: Issued citation and warning; assessed civil penalty; prohibited from prescribing, administering dispensing or controlled for the substances chronic treatment of pain; prohibited from diagnosing and treating Lyme disease; prohibited from engaging in the practice of telemedicine; placed on probation subject to monitoring. Failure to conform to the acceptable standard of care; failure to maintain adequate medical records.

David H. Segal, M.D. License No. 38342 Date of order: 12/16/2016

Actions: Issued citation and warning; assessed civil penalty; ordered to complete a Boardapproved professional ethics program. Dr. Segal agreed that he will not engage in the practice of surgery under his Iowa license. Basis: Professional incompetency; pre-signing prescriptions.

Josh A. Smith, D.O. License No. 02944 Date of order: 02/05/2016

Actions: Issued citation and warning; assessed civil penalty; placed on probation subject to monitoring. Basis: Failure to conform to acceptable standard of care; failure to maintain adequate medical records.

Salahuddin Syed, M.D. License No. 37105 Date of order: 04/08/2016

Actions: Issued citation and warning; ordered to arrange for continuing audits; ordered to consult with a dermatopathologist prior to issuing any pathology report for cases of suspected melanoma; ordered to submit professional paper. Basis: Professional incompetence; practice harmful and detrimental to the public.

Edward A. Steinmann, Jr., D.O. License No. 02944 Date of order: 07/29/2016

Actions: Issued citation and warning; assessed civil penalty; ordered to complete a medical record keeping course; prohibited from prescribing, administering or dispensing controlled substances for the treatment of chronic pain; placed on probation subject to monitoring. Basis: Failure to conform to the acceptable standard of care.

Richard H. Strauss, M.D. License No. 39212 Date of order: 07/29/2016

Action: Issued citation and warning. **Basis:** Action taken by the Wisconsin Medical Examining Board.

Andrzej Szczepanek, M.D. License No. 37643 Date of order: 12/16/2016

Action: Probation terminated. **Basis:** Completed terms of probation.

Michael J. Taylor, M.D. License No. 18399 Date of order: 04/08/2016

Actions: Assessed civil penalty; voluntarily surrendered Iowa medical license. **Basis:** Failure to maintain adequate medical records.

Kent J. Van Why, M.D. License No. 28991 Date of order: 07/29/2016

Action: Probation terminated. **Basis:** Completed terms of probation.

Kimberly A. VerSteeg, D.O. License No. 03547 Date of order: 06/03/2016

Action: Probation terminated. **Basis:** Completed terms of probation.

ENFORCEMENT, LICENSURE ACTIONS - 2016 ORDERS

The following are summaries of the Board of Medicine's public orders issued in 2016, including enforcement actions and licensure requirement waivers. The documents for these orders are available at www.medicalboard.iowa.gov

Jeffrey R. Wahl, D.O. License No. 04092 Date of order: 10/28/2016

Actions: Issued citation and warning; assessed civil

penalty. Basis: Wrong surgical procedure.

Thomas L. Warren, Jr., M.D.

License No. 30923 Date of order: 09/30/2016

Action: Agreed to not engage in any aspect of the practice of medicine. **Basis:** Physical, mental or neuropsychological condition which impairs ability to practice medicine with reasonable skill and safety.

Jeff Z. Zhang, M.D. License No. 43177 Date of order: 03/07/2016

Actions: Issued medical license; waived licensure requirement in 653 IAC 9.3(1)c(3) - must have completed continuous, progressive postgraduate training in a program approved by the Board. Basis: Dr. Zhang completed one year of accredited training. He completed two years of non-accredited clinical fellowship. The program indicated he received the same training as a physician in an accredited slot. Dr. Zhang had a temporary Iowa license preceding the Board's approval of the waiver request. The Board considered his time on the temporary license. His employer voluntarily supplied a proctoring plan and quarterly reports while on the temporary license. He holds an unrestricted license to practice in Nebraska.

CIVIL PENALTIES	S					
LICENSEES	2011 23	2012 29	2013 16	2014 16	2015 17	2016 17
AMOUNTS						
1,000	2	3	2	0	2	1
2,000	0	1	0	0	0	0
2,500	7	6	6	7	1	3
3,000	0	0	0	0	1	0
5,000	9	5	4	8	7	12
7,500	1	4	1	1	2	0
10,000	4	11	3	0	4	1
TOTAL AMOUNT	2011	2012	2013	2014	2015	2016
OF PENALTIES	\$112,000	\$185,000	\$74,500	\$65,000	\$97,500	\$78,500

lowa Code 148.6(1) provides that the Board of Medicine, after due notice and hearing, may issue an order to discipline a licensee, including imposing a civil penalty not to exceed \$10,000. All penalties are deposited in the general fund of the State of Iowa. The Board does not financially benefit from the penalties it imposes. The Board is funded entirely with licensure fees. Since 2007, the Board has imposed civil penalties totaling \$965,500.

ALTERNATE MEMBERS

Alternate members of the Board of Medicine play an important role in contested case hearings. Up to three alternates can serve on a six-member panel for a hearing when a quorum (six members) of the 10 current members of the Board is not available. Since it was authorized by law in 2008 and implemented in 2009, the Alternate pool is routinely tapped for hearings. Alternates are recommended by the Board, but must be approved by the Governor. An Alternate's term is nine years. Alternates receive a per diem and expenses. Alternates serving in 2016 were:

ALTERNATE MEMBERS	<u>APPOINTED</u>
Carole Frier, D.O., Des Moines	March 25, 2011
Analisa Haberman, D.O., Mason City	August 21, 2012
Bruce Hughes, M.D., Des Moines	March 25, 2011
John Marshall, M.D., Council Bluffs	August 21, 2012
Paul Thurlow, Dubuque	November 14, 2011
Janece Valentine, Fort Dodge	July 8, 2012
Joyce Vista-Wayne, M.D., Clive	September 26, 2013
Allen Zagoren, D.O., Clive	March 19, 2009

CONTESTED CASE HEARINGS								
	2012	2013	2014	2015	2016			
HEARING	8	4	2	2	1			
HEARING USING ALTERNATES	6	3	1	2	1			
SETTLED WITHOUT HEARING	40	47	34	23	25			

PEER REVIEWS

In addition to three public members, the Board of Medicine includes seven physicians, representing at most seven specialties. Complaints about lowa physicians, however, cross the spectrum of specialties, from anesthesiology to urology. Therefore, in competency issues expertise in a given case may not be available on the Board when the case is discussed. If, after a case has been investigated and discussed at the Board level, specialty expert opinion is needed to fairly determine if the standard of care has or has not been met, a formal peer review may be requested. John Olds, M.D., the Board's medical advisor, will recruit physicians to serve on a committee to review a case file, which includes the investigative report, interviews with the complainant, witnesses and the physician involved, and pertinent medical records. The peer reviewers then discuss their findings and determinations amongst themselves and submit a formal report to the Board for consideration. Iowa physicians who are interested in serving as a peer reviewer may contact Dr. Olds at (515) 242-3229. An instruction manual for peer reviewers is available at www.medicalboard.iowa.gov

PEER REVIEWS						
	2011	2012	2013	2014	2015	2016
ORDERED	7	9	11	16	12	8
COMPLETED	8	9	7	9	13	6

0	State Population: Population ≤ age 21: Total Active Physicians: Primary Care Physicians:		Total Female Physicians: Total Medical or Osteopathic Students Total Residents:	: 1,	917 544 41		
				IA	IA Rank		
	Active Physicians per 100	,000 Population, 2014		211.0	42		
	Total Active Patient Care	Total Active Patient Care Physicians per 100,000 Population, 2014					
	Active Primary Care Phys	icians per 100,000 Po	pulation, 2014	84.8	34		
Physician	Active Patient Care Prima	ary Care Physicians pe	er 100,000 Population, 2014	78.7	31		
Supply	Active General Surgeons	per 100,000 Population	on, 2014	7.0	41		
	Active Patient Care Gene	ral Surgeons per 100,	000 Population, 2014	6.6	35		
	Percent Active Female Pl	Percent Active Female Physicians, 2014					
	Percent of Active Physicia	Percent of Active Physicians who are International Medical Graduates, 2014					
	Percentage of Active Phy	sicians Who Are Age	60 or Older, 2014	27.2%	38		
l lo dorare duete	Students Enrolled in Med	ical or Osteopathic Sc	hool per 100,000 Population, AY 2014-2015	49.7	7		
Undergraduate Medical	Students Enrolled in Publ	ic Medical or Osteopa	athic Schools per 100,000 Population, AY 2014-2015	21.5	20		
Education (UME	Percent Change in Stude	Percent Change in Students Enrolled in Medical or Osteopathic Schools (2004-2014)					
	Percent of Medical School	ol Matriculating from In	-State, AY 2014-2015	68.2%	24		
	Total Residents/Fellows in	n ACGME Programs p	per 100,000 Population as of 12/31/14	27.1	26		
Graduate Medical	Total Residents/Fellows in	n Primary Care ACGM	1E Programs per 100,000 Population as of 12/13/14	10.8	24		
Education	Percentage of Internation	al Medical Graduates	in ACGME Programs as of 12/31/14	23.8%	21		
(GME)	Ratio of Residents and Fe	ellows (GME) to Medic	cal and Osteopathic Students (UME), AY 2013-2014	0.6	41		
	Percent Change in Resid	ents and Fellows in AC	CGME-Accredited Programs, 2004-2014	9.4%	43		
	Percent of Physicians Re	tained in State from U	ndergraduate Medical Education, 2014	22.1%	39		
	Percent of Physicians Re	tained in State from P	ublic Undergraduate Medical Education, 2014	30.7%	39		
Retention	Percent of Physicians Re	tained in State from G	raduate Medical Education, 2014	35.9%	44		
	Percent of Physicians R	etained in State fron	n UME and GME Combined, 2014	61.1%	34		

Source: Association of American Medical Colleges, 2015 State Physician Workforce Data Book

			Femal	<u>e</u>	Age 6	0 or Older
Specialty	Total Active	People Per Physician	Number	Percent	Number	Percent
All Specialties	6,557	474	1,917	29.3	1,776	27.2
Allergy & Immunology	28	110,969	10	35.7	*	*
Anatomic/Clinical Pathology	114	27,255	38	33.3	54	47.4
Anesthesiology	320	9,710	63	19.7	79	24.8
Cardiovascular Disease	153	20,308	21	13.7	56	36.6
Child & Adolescent Psychiatry**	50	18,253	25	50.0	14	28.0
Critical Care Medicine	64	48,549	15	23.4	*	*
Dermatology	75	41,428	27	36.0	23	30.7
Emergency Medicine	206	15,083	43	21.0	55	27.0
Endocrinology, Diabetes & Metabolism	33	94,155	12	36.4	11	33.3
Family Medicine/General Practice	1,677	1,853	579	34.6	442	26.5
Gastroenterology	75	41,428	*	*	17	22.7
General Surgery	219	14,188	31	14.2	59	26.9
Geriatric Medicine***	23	29,684	*	*	*	*
Hematology & Oncology	98	31,705	26	26.5	31	31.6
Infectious Disease	53	58,625	19	35.8	12	22.6
Internal Medicine	597	5,205	197	33.1	183	30.7
Internal Medicine/Pediatrics**	*	*	*	*	*	*
Interventional Cardiology	30	103,571	*	*	*	*
Neonatal-Perinatal Medicine**	40	77,678	17	42.5	*	*
Nephrology	58	53,571	16	27.6	15	25.9
Neurological Surgery	31	100,230	*	*	*	*
Neurology	99	31,385	27	27.6	37	37.4
Neuroradiology	20	155,356	*	*	*	*
Obstetrics & Gynecology	264	11,769	134	50.8	52	19.7
Ophthalmology	147	21,137	39	26.7	38	25.9
Orthopedic Surgery	172	18,065	*	*	56	32.6
Otolaryngology	87	35,714	10	11.5	23	26.4
Pain Medicine & Pain Management	27	115,079	*	*	*	*
Pediatrics**	328	2,783	179	54.6	78	23.9
Physical Medicine & Rehabilitation	43	72,259	13	30.2	11	25.6
Plastic Surgery	33	94,155	*	*	12	36.4
Preventive Medicine	49	63,411	18	36.7	20	40.8
Psychiatry	223	13,933	69	31.1	86	38.6
Pulmonary Disease & Critical Care Medicine	40	77,678	*	*	25	62.5
Radiation Oncology	43	72,259	13	31.0	14	32.6
Radiology & Diagnostic Radiology	209	14,867	28	13.4	70	33.5
Rheumatology	39	79,670	14	35.9	11	28.2
Thoracic Surgery	37	83,976	*	*	13	35.1
Urology	69	45,031	*	*	19	27.5
Vascular & Interventional Radiology	15	207,142	*	*	*	*
Vascular Surgery	31	100,230	*	*	*	*

31 100,230 * * * * *
Source: Association of American Medical Colleges, 2015 State Physician Workforce Data Book

^{*} Counts for specialties with fewer than 10 physicians are not shown
** Only those 18 years or younger are included in People Per Physician
*** Only those 65 years or older are included in People Per Physician

The Board of Medicine is fortunate to have dedicated, competent personnel who take their jobs, and the Board's mission, seriously. Every day, these men and women perform licensure and regulatory enforcement duties that enable the Board to protect the health of lowans.

IOWA BOARD OF MEDICINE

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