

HAWAII MEDICAL BOARD
Professional and Vocational Licensing Division
Department of Commerce and Consumer Affairs
State of Hawaii

MINUTES OF MEETING

The agenda for this meeting was filed with the Office of the Lieutenant Governor, as required by §92-7(b), Hawaii Revised Statutes ("HRS").

Date: Thursday, September 14, 2017

Time: 1:00 p.m.

Place: King Kalakaua Conference Room
King Kalakaua Building
335 Merchant Street, 1st Floor
Honolulu, HI 96813

Present: Peter Halford, M.D., Vice-Chairperson, Oahu Member
Gerard K. Akaka, M.D., Oahu Member
Sharon "Shay" Bintliff, M.D., Hawaii Member
Maria Chun, Ph.D., Public Member
Franklin V.H. Dao, M.D., Oahu Member
Darren K. Egami, M.D., Maui Member
Palasi Puleyasi, Public Member
Karen E. Sept, D.O., Oahu Osteopathic Member
Shari J. Wong, Deputy Attorney General ("DAG")
Ahlani K. Quiogue, Executive Officer
Wilma Balon, Secretary

Excused: Jone Geimer-Flanders, D.O., Chairperson, Oahu Osteopathic Member
Peter Holt, M.D., Oahu Member

Guests: Lei Fukumura, Special Deputy Attorney General ("SDAG")
Mike Robinson, Vice President, Government Relations, and
and Community Affairs, Hawaii Pacific Health
Lorrin Kim, Chief, Office of Planning and Policy, and Program
Development, Department of Health ("DOH")
Catherine Awakuni Colón, Director, Department of Commerce
and Consumer Affairs ("DCCA")
Jo Ann Uchida-Takeuchi, Deputy Director, DCCA
Sean Mikell, Administrative Assistant, DCCA
Virginia "Ginny" Pressler, M.D., Director, DOH
Daria Loy-Goto, Complaints and Enforcement Officer, Regulated Industries
Complaints Office ("RICO")
John Hassler, Supervising Attorney, RICO
Jacek N., Member of the Public
Mila B., Member of the Public

Call to Order: The meeting was called to order at 1:08 p.m., at which time quorum was established.

Approval of the
August 10, 2017
Minutes:

It was moved by Dr. Bintliff, seconded by Dr. Dao, and unanimously carried to approve the minutes of the regular session and the minutes of the executive session of the August 10, 2017 meeting as circulated.

Adjudicatory
Matters:

Dr. Halford called for a recess from the meeting at 1:09 p.m. to discuss and deliberate on the following adjudicatory matters pursuant to Chapter 91, HRS.

Dr. Akaka entered the meeting room at 1:10 p.m.

- a. In the Matter of the License to Practice Medicine of Guy H. Takahashi, M.D.; MED 2017-71-L

After discussion, it was moved by Dr. Akaka, seconded by Dr. Bintliff, and unanimously carried to accept the Settlement Agreement Prior to Filing of Petition for Disciplinary Action and Board's Final Order; Exhibit "1".

- b. In the Matter of the License to Practice Medicine of James H. Turner, M.D.; MED 2017-25-L

The Board deferred this matter at its June 8, 2017 meeting, and requested a correction to page 2, paragraph A5. The wrong state medical board was referred to. It was noted that the correction was made.

After discussion, it was moved by Dr. Halford, seconded by Dr. Egami, and unanimously carried to accept the correction on the Settlement Agreement Prior to Filing of Petition for Disciplinary Action and Board's Final Order; Exhibits "1" and "2".

- c. In the Matter of the License to Practice Medicine of Susan Cauley, M.D.; MED 2004-104-L; MED 2004-105-L; and MED 2004-123-L

The Board reviewed and considered Dr. Cauley's letter received on July 17, 2017, requesting that the probationary status be removed from her Hawaii Medical License, License No. MD-8551.

After due consideration of Dr. Cauley's request as well as quarterly reports submitted by Dr. Cauley and John Heaster, M.D., it was moved by Mr. Puletasi, seconded by Dr. Dao, and unanimously carried to approve Dr. Cauley's request to remove the probationary status from her Hawaii Medical License, License No. MD-8851.

Following the Board's review, deliberation and decision in this matter pursuant to Chapter 91, HRS, Dr. Halford announced that the Board reconvene to its regular Chapter 92, HRS, meeting at 1:16 p.m.

Dr. Halford invited the guests back into the meeting room, and informed them that the Board will be entering executive session.

Guests were excused from the meeting room at 1:18 p.m.

Applications for
License/
Certification:

a. Applications:

It was moved by Dr. Sept, seconded by Dr. Akaka, and unanimously carried to enter into executive session at 1:18 p.m. pursuant to HRS §92-5(a)(1) to consider and evaluate personal information relating to individuals applying for professional licenses cited in HRS §26-9, and pursuant to HRS §92-5(a)(4), to consult with the Board's attorney on questions and issues pertaining to the Board's powers, duties, privileges, immunities and liabilities.

(i) Physician:

- a. Doyle S. Coleman, M.D.
- b. Adrienne D. Fehr, D.O.
- c. Chrysanthy Ha, M.D.
- d. Eric G. LeVeen, M.D.
- e. Ryan G. McMorries, M.D.
- f. Bartholomew D. Sak, M.D.
- g. Kenneth L. Scott, D.O.
- h. Lloyd D. Wagner, M.D.

(ii) Physician Assistant:

- a. Arthur B. Domingo, PA-C

(iii) Podiatrist:

- a. Jon P. McCreary, D.P.M.

5. Federation of State Medical Boards: Interstate Medical Licensure Compact

6. Board Delegation

- a. Hawaii Revised Statutes §453-8.6., Discipline based on action taken by another state or federal agency; conditions; prohibition of practice

It was moved by Dr. Egami, seconded by Dr. Akaka, and unanimously carried to return to the open meeting at 2:26 p.m.

Dr. Halford invited the guests back into the meeting room, and asked the guests, staff and members to introduce themselves before the Board proceeded with the next items on its agenda.

It was moved by Dr. Bintliff, seconded by Dr. Akaka, and unanimously carried to approve the following applications:

(i) Physician:

- a. Doyle S. Coleman, M.D.
- b. Adrienne D. Fehr, D.O.
- c. Chrysanthy Ha, M.D.
- e. Ryan G. McMorries, M.D.
- f. Bartholomew D. Sak, M.D.
- h. Lloyd D. Wagner, M.D.

(iii) Podiatrist:

- a. Jon P. McCreary, D.P.M.

(i) Physician:

- d. Eric G. LeVeen, M.D.

It was moved by Dr. Egami, seconded by Mr. Puletasi, and unanimously carried to defer Dr. LeVeen's application pending his personal appearance or phone into one of its next scheduled meetings and additional information.

- g. Kenneth L. Scott, D.O.

It was moved by Dr. Bintliff, seconded by Mr. Puletasi, and unanimously carried to defer Dr. Scott's application pending additional information.

(ii) Physician Assistant:

- a. Arthur B. Domingo, PA-C

It was moved by Dr. Halford, seconded by Dr. Dao, and unanimously carried to defer Mr. Domingo's application pending additional information.

Applications for
License/
Certification:

b. Ratifications:

- (i) List

It was moved by Dr. Bintliff, seconded by Dr. Dao, and unanimously carried to ratify the attached lists of individuals for licensure or certification.

Federation of State
Medical Boards:
Interstate Medical
Licensure Compact:

Dr. Halford informed guests that the Board previously discussed the Federation of State Medical Boards Interstate Medical Licensure Compact ("FSMB Compact") at its meetings on November 12, 2015 and September 8, 2016. Dr. Halford emphasized that at those meetings the Board expressed concerns with the FSMB Compact because it was in its infancy. Since then, the FSMB Compact has come a long way, and now the Board is revisiting the matter.

Dr. Halford invited those present for this agenda item to provide comments and/or opinions.

Virginia Pressler, M.D., Director, DOH thanked the Board for allowing her to attend, and stated that she does not have a formal presentation prepared, but is very interested in the FSMB Compact.

Dr. Pressler informed the Board that she attends meetings every few months and has weekly conference calls with colleagues from other states who relay positive things about the FSMB Compact. She went on to say that her counterparts from Arizona have only wonderful things to say about it.

Dr. Pressler stated that she participates in various work groups, and in their discussions on healthcare, all parties' goals are to determine how to make healthcare more accessible and easier to navigate in the State. She went on to say that a possible solution is the FSMB Compact since it is a faster pathway to medical licensure.

Dr. Pressler's understanding of the FSMB Compact is that it would reduce paperwork that the Board would need to review and will assist in the recruitment of more physicians to the State since it would provide an expedited pathway of licensure.

Dr. Halford informed the guests that one of the Board's past concerns was whether the FSMB Compact would truly expedite the licensure process.

Ms. Quiogue provided the following statistics regarding the Board's current MD and DO application population for the period January 1, 2015 – present:

Total applications received: 1,901

Applications received from participating FSMB Compact states: 525

Applications received from non-participating FSMB Compact States: 1,376

Based on this information, 28% of the Board's application population apply from states participating in the FSMB Compact. For these applications, the process would be more expeditious if Hawaii was a FSMB Compact-member state of the FMSB.

On the other hand, 72% of the Board's application population apply from non-participating jurisdictions. These applicants would be required to go through the current application process. Ms. Quiogue stated that one-third of the Board's applicants are from Hawaii (322 applicants: 256 MDs and 66 DOs) and California (319 applicants: 298 MDs and 21 DOs).

Dr. Halford asked what the processing time is to obtain a medical license if you are chosen as the State of Principal Licensure ("SPL").

Ms. Quiogue explained that if a state is chosen as the SPL, then the SPL is responsible for vetting that applicant. The SPL must ensure, prior to issuing a Letter of Qualification ("LOQ") that the applicant meets all requirements established by the Interstate Medical Licensure Compact Commission ("IMLCC"). This includes the SPL verifying primary source information (e.g., medical education, graduate medical education) that the Board's office currently does not perform. The SPL would also be responsible to query the National Practitioner Data Bank and the FSMB's Physician Data Center. Further the SPL must run both a FBI and state criminal background check.

Regarding the criminal background checks, Ms. Quiogue provided that currently the Hawaii Board of Nursing ("BON") requires this as part of its requirements to obtain a license in this jurisdiction. While the BON's license population is greater than the Board's, she expressed that the BON currently uses up to six licensing branch staff members to run the checks, and yet they are still unable to keep up with the demand. In comparison, the Board has only one dedicated staff member – its executive officer.

Ms. Quiogue emphasized that the process itself would not be expedited if the State is chosen as the SPL. If a state is chosen as a secondary state or the state that is selected as the state to issue a license only, then yes, the process would be quicker. However, given our current application population – 322 applicants from Hawaii – the process would not be faster if they were to select Hawaii as the SPL. She went on to say that the FSMB also advises that the application process may take several weeks if a state is chosen as the SPL.

For the edification of members and guests, Ms. Quiogue advised that there are currently 22 states which have enacted legislation to participate in the FSMB Compact – 11 states issuing LOQs and licenses; 6 states issuing licenses; and 5 states that have had to delay implementation.

For the states issuing LOQs and licenses, the states must ensure that the applicant meets all license requirements established by the IMLCC.

These states would be responsible for verifying primary source information, querying data banks, and running background checks.

For the states issuing licenses, these jurisdictions will receive certification from the IMLCC stating that an applicant has met the requirements to receive a LOQ in another jurisdiction, and that a license may be issued.

Regarding those jurisdictions with delayed implementation, Public Law 92-544 was passed by Congress in 1972 and authorizes the FBI to conduct criminal background checks. A state may request a criminal background check provided the state has passed legislation, in this case an enabling statute, that fulfills the requirements established by the Department of Justice. HRS §846-2.7 must be amended to allow the Board to run criminal background checks.

Dr. Dao asked whether there is any data that shows that the FSMB Compact would actually expedite the licensure process.

Ms. Quiogue indicated that other than anecdotal information, she has not done the research and/or could not obtain qualitative and/or quantitative data which provides that the FSMB Compact would expedite the licensure process. She referred to her earlier comments regarding the SPL process which can take several weeks.

Lorin Kim, Chief, Office of Planning and Policy, and Program Development, DOH stated that the Board had requested that he obtain this information at a previous meeting. He went on to say he contacted the IMLCC to obtain this information, and because of changes in the executive director position, the IMLCC asked that he check back with them in October 2017.

Similar to Dr. Pressler's comments, Mr. Kim emphasized that he believes the FSMB Compact would increase access to care because it can be used as a recruitment tool for employers. The FSMB Compact has already received a strong show of support from various organizations and associations.

Dr. Akaka expressed that due to a lack of clarity in the Bylaws and Rules of the FSMB Compact, the Board is concerned that it would be ceding/delegating elements of its license and disciplinary processes to other boards or organizations. More specifically, the Board is concerned it may not have the same capabilities it currently has to deny an applicant or discipline a licensee who may harm a Hawaii patient.

With regard to the FSMB Compact and the Bylaws and Rules, Dr. Akaka inquired whether the Board would have the ability to take disciplinary action against a physician or would it be required to mirror the action of the SPL or other member state.

DAG Wong noted that staff members from the Regulated Industries Complaints Office ("RICO") were present, and invited them to provide comments regarding their interpretation of the FSMB Compact language.

Daria Loy-Goto, Complaints and Enforcement Officer, RICO explained that the Board's current law (HRS Chapter 453) allows it to take disciplinary action against a Hawaii-licensed physician based on discipline action taken by another state or federal agency. She explained that the Board has seen a number of settlement agreements and final orders which resulted from its current law. As a reminder, Ms. Loy-Goto stated that in 2016, the Board supported RICO's proposed legislation which resulted in Act 38.

Ms. Loy-Goto indicated that legislation such as Act 38 provides the Board and RICO with an effective tool to take reciprocal action against a Hawaii-licensed physician who is disciplined by another state board. She went on to say that it also allows the Board to take any other action authorized by its statutory chapter as well as HRS Chapter 436B.

DAG Wong advised that Act 38 gives the Board discretion to take the same, harsher or milder action than the other jurisdiction. However, it is her understanding of the FSMB Compact that the Board would be required to mirror the action of the SPL, meaning it would not have the ability to take harsher or milder action than the SPL.

DAG Wong explained further, that if a SPL-issued license is revoked, surrendered or relinquished in lieu of discipline, or suspended, then all licenses issued to the physician by FSMB Compact-member boards shall automatically be placed, without further action necessary by any FSMB Compact-member board, on the same status. If the member board in the SPL subsequently reinstates the physician's license, a license issued to the physician by any other FSMB Compact-member board shall remain encumbered until that respective FSMB Compact-member board takes action to reinstate the license in a manner consistent with the Medical Practice Act of that state, in this case, HRS Chapter 453.

Ms. Loy-Goto explained that after reviewing the FSMB Compact language, RICO did have concerns with several provisions, including: its lack of providing a Hawaii-licensed physician a hearing or their due process rights, if disciplinary action were to occur; the requirement that the Board/RICO cooperate in providing investigative information to other jurisdictions (Ms. Loy-Goto explained that RICO has numerous agreements in place with other law enforcement agencies which prohibit them from sharing information with others); or the enforceability of subpoenas issued by other member states – for example, would a subpoena issued by Pennsylvania be honored by in this State or vice versa.

John Hassler, Supervising Attorney, RICO expressed similar concerns as Ms. Loy-Goto, and stated that as attorneys they want to know how the FSMB Compact would work in the real world. The FSMB Compact seems to contain numerous legal and technical hurdles. Mr. Hassler reiterated that his concerns again are with sharing investigative records with other jurisdictions and the enforceability of subpoenas amongst jurisdictions.

Ms. Loy-Goto emphasized that while RICO has concerns regarding the FSMB Compact, RICO would be supportive of the Board's consideration of other pathways of licensure.

Ms. Loy-Goto thanked the members for allowing her to provide comments and concerns regarding the FSMB Compact.

Dr. Halford asked Ms. Loy-Goto if it is her understanding that if someone is sanctioned pursuant to the FSMB Compact, for instance in Missouri, would that translate to action being taken in every other jurisdiction in which the physician is licensed via the FSMB Compact. More importantly, would the Board be bound by the same action taken by Missouri.

Ms. Loy-Goto explained, and as the Board is aware, through the current provisions in the Board's statutes, RICO has entered into settlement agreements which provided for sanctions harsher than imposed by the home state. Ms. Loy-Goto stated that it is unclear how the FSMB Compact would work.

Dr. Dao indicated that the laws of the State tend to supersede the language of the FSMB Compact, and that it appears that the Board would be relinquishing its authority to take greater action against licensees in some cases.

Mr. Hassler explained that his understanding of FSMB Compact is that there is some flexibility in the disciplinary sanctions a member board may take.

Ms. Quiogue clarified Mr. Hassler's comments, and explained the following:

- If a license granted to a physician in the SPL is revoked, surrendered, or relinquished in lieu of discipline then all licenses issued to the physician by a FSMB Compact-member board shall automatically be placed without further action necessary by any FSMB Compact-member board, on the same status (e.g., SPL Arizona revokes a physician's license. Then Nevada in turn, as a FSMB Compact-member state which had issued a license to that physician, would be required to take the same action).
- If disciplinary action is taken against a physician by a non-SPL member board, any other FSMB Compact-member board may deem the action conclusive, and impose the same or lesser sanctions against the physician so long as such sanctions are consistent with state law; or pursue separate disciplinary action against the physician under its laws, regardless of the action taken in other member states.

- If a license is granted to a physician by a non-SPL member state is revoked, suspended, or relinquished in lieu of discipline, then any license(s) issued to the physician by any other FSMB Compact-member board(s) shall be suspended, automatically and immediately without further action necessary by the other member board(s), for 90 days upon entry of the order by the disciplining board, to permit the member board(s) to investigate the basis for the action under state law. The suspension may be terminated prior to the completion of the 90-day suspension period in a manner consistent with state law.

Dr. Halford asked what the associated costs and workload would be if the Board chose to participate in the FSMB Compact.

Ms. Quiogue explained that it is still unclear what the actual fee is for a medical board to be a member of the IMLCC. Based on the current 22 participating states in the FSMB Compact, only 28% of the Board's application population, come from these states. The workload should not be that great since Hawaii would not be the SPL.

However, Ms. Quiogue explained that if the non-participating states like Hawaii and California join the FSMB Compact, and Hawaii is chosen as the SPL, then the workload of staff would increase greatly. She reiterated her earlier comments regarding verifying primary source information that the Board currently does not perform. Further, the FSMB Compact's requirements far exceed the Board's current license requirements. Applicants would be required to submit documents we currently do not require, and then staff would be reviewing additional information. As a SPL, Hawaii would be required to run background checks as well as query various data banks.

Dr. Sept inquired whether there would be a loss of revenues if the Board were to consider joining the FSMB Compact through its license/renewal fees.

Ms. Quiogue explained that each licensing area must be self-sustainable. She explained further that the FSMB Compact requires a non-refundable fee of \$700.00 for an application for a LOQ. The IMLCC shall remit \$300.00 of the service fee to the SPL, and shall remit \$400.00 to the IMLCC's general fund. A non-refundable service fee of \$100.00 shall be assessed to the applicant each time the LOQ is disseminated to one or more FSMB Compact-member states after the initial dissemination of the LOQ for license(s) in FSMB Compact-member states. A FSMB Compact-member state may also charge a separate license fee in addition to the aforementioned fees.

Dr. Halford asked Dr. Pressler if her intent is to have legislation introduced which would require the Board to join the FSMB Compact.

Dr. Pressler informed the Board that she does not intend have legislation introduced as part of the administrative package. She went on to say that her intent was to bring this to the Board's attention, use it as a possible recruitment tool, and ensure that it is being looked at critically by the Board. Dr. Pressler stated that it is her understanding that several legislators are considering the introduction of such legislation.

Given the importance placed on access to care and providing an expedited pathway of licensure for physicians, Ms. Quiogue asked Dr. Pressler if she knew whether the legislature and administration would consider another expedited pathway of licensure that would ensure that the Board is not delegating or ceding its authority to evaluate applications and discipline licensees.

Dr. Pressler stated that she would be supportive of anything that will expedite recruitment and licensure of physicians. However, from what she's heard, the FSMB Compact is one way to expedite licensure.

Ms. Quiogue again emphasized that FSMB Compact only provides an expedited pathway of licensure for approximately 28% of the Board's current applicant population. However, if an applicant picks Hawaii as the SPL, the application process may actually take longer than the current process because of the additional verification the Hawaii staff must perform. The FSMB Compact would adversely affect California and Hawaii applicants, approximately 72% of the Board's current application population if Hawaii is chosen as the SPL.

Ms. Mila B. asked what the average length of time it takes a physician to become licensed in Hawaii.

Ms. Quiogue informed Ms. Mila B. that it may take anywhere from several weeks to, as was noted by one of the applications reviewed in the packet before the Board, a year. She went on to say that if an application is clean, and the applicant is responsive to all deficiency notices, then a license can be issued within several weeks.

Ms. Mila B. asked what is wrong with the current process in place.

Dr. Halford stated that the application process can sometimes be very long.

Ms. Quiogue clarified that the process can sometimes be very long, but the reality is that the problems are not only regarding problems with staff processing the information, but also with applicants' failure to respond to notices timely, problems with the application (e.g., adverse/derogatory information), etc.

Ms. Mila B. suggested that Board consider other options such as an expedited pathway of licensure like Kansas has in place, rather than the FSMB Compact.

Ms. Quiogue referred to her earlier comments regarding the Board creating its own expedited pathway of licensure or possibly temporary licenses for telemedicine. However, if the Board were to consider these options, then it would have to be properly noticed on a future agenda.

Mr. Jacek N. asked whether the process is different for foreign physicians.

Ms. Quiogue explained that the process is the same for U.S. medical school graduates and foreign medical school graduates. However, the current requirements are different. For instance, a U.S. medical school graduate is required to successfully complete one year of accredited graduate medical education. A foreign medical school graduate is required two years of accredited graduate medical education.

Dr. Halford informed guests that the Board will not make any statement or decisions regarding the FSMB Compact given the amount of information it is required to digest as well as the discussion that occurred. Dr. Halford informed the guests that the Board will discuss this matter further at its October 12, 2017 meeting, and invited the guests to remain for the other agenda items if they inclined to do so.

Guests left the meeting room at 2:45 p.m.

Board Delegation:

- a. Hawaii Revised Statutes §453-8.6, Discipline based on action taken by another state or federal agency; conditions; prohibition of practice

Ms. Quiogue reminded members that during the 2016 Legislative Session, S.B. 2675, HD2, was enacted by Governor Ige as Act 38. This Act authorizes the Board of Dental Examiners, Hawaii Medical Board, Board of Nursing, and Board of Pharmacy to deny a license to an applicant or impose disciplinary action against a licensee who has been disciplined by another state or a federal agency. It also prohibits a licensee from practicing until a final order of discipline is issued if the licensee has been prohibited from practicing in another state. She explained further that the provisions specific to the Board have been codified as HRS §453-8.6.

In order to implement the provisions of HRS §453-8.6, Ms. Quiogue asked the Board to consider delegating its authority to its executive officer to execute a Board's Proposed Final Order that imposes discipline on a licensee upon receipt of evidence of revocation, suspension, or other disciplinary action against a licensee by another state or federal agency.

Ms. Quiogue stated that she is requesting such delegation in accordance with HRS §436B-8, and that such delegation would assist RICO in expediting certain disciplinary cases as is the intent of the legislation.

Discussion followed. Dr. Sept asked whether the Board would review and sign the Final Order once issued.

Executive Officer Quiogue answered in the affirmative, and emphasized that she is only asking for delegation to sign a Board's Proposed Final Order.

Drs. Halford, Bintliff, and Sept expressed their support of this request since it would allow the Board to take action against a licensee expeditiously.

Discussion followed. In order to implement the provisions of HRS §453-8.6, and in accordance with HRS §436B-8, it was moved by Dr. Halford, seconded by Dr. Bintliff, and unanimously carried by the Board to delegate its authority to the Executive Officer to execute a Board's Proposed Final Order that proposes to impose discipline on a licensee upon receipt of evidence of revocation, suspension, or other disciplinary action against a licensee by another state or federal agency. The Executive Officer shall only be authorized to sign a Board's Proposed Final Order that proposes to prohibit a licensee from practicing if the disciplinary action by another state prohibits the licensee from practicing in that state.

Advisory
Committees:

- a. Physician Assistants
- b. Emergency Medical Service Personnel
 - (i) Reappointment to the Emergency Medical Service Personnel Advisory Committee:
 - a. Ronald M. Kuroda, M.D.

It was moved by Dr. Halford, seconded by Dr. Bintliff, and unanimously carried to reappoint Dr. Kuroda to the Emergency Medical Service Personnel Advisory Committee. His term of service begins effective immediately and ends on June 30, 2021.

- c. Podiatrists

Next Meeting: Thursday, October 12, 2017
King Kalakaua Conference Room, First Floor
335 Merchant Street
Honolulu, HI 96813

Adjournment: It was moved by Dr. Sept, seconded by Dr. Egami, and unanimously carried to adjourn the meeting at 3:11 p.m.

Reviewed and approved by:

/s/Ahlani K. Quiogue

(Ms.) Ahlani K. Quiogue
Executive Officer

AKQ:wb
9/1/17

Taken and recorded by:

/s/Wilma Balon

Wilma Balon
Secretary

- Minutes approved as is.
 Minutes approved with changes; see minutes of _____.

HAWAII MEDICAL BOARD (09/14/2017-RATIFICATION LIST)

LTYPE LIC NUM BP NAME PART 1

MD 19286 IAN A <KAMINSKY<
MD 19287 NICOLAI <WOHNS<
MD 19288 DARRIN J <KUCZYNSKI<
MD 19289 USHA R <KILARU<
MD 19290 SHERRY <SIAREZI<
MD 19291 LESLIE A <FUCHS<
MD 19292 JOSEPH W <VAN DERVEER< III
MD 19293 PAUL M <STOVER<
MD 19294 LISA H <ELLIS<
MD 19295 BAHAR <SADJADI<
MD 19296 KYONG SU <MIN<
MD 19297 ALEXEI M <WAGNER<
MD 19298 JONATHAN G <FLEURAT<
MD 19299 ANDREW M <MEILLIER<
MD 19300 ARIES C <KUO<
MD 19301 MARGARET M <SAMAAN<
MD 19302 LETIZIA M <ALTO<
MD 19303 LEEJOE K <PALLICKAL<
MD 19304 JAY E <WOLVERTON<
MD 19305 ANURITHA R <MARUMGANTI<
MD 19306 MARC H <APPEL<
MD 19307 VICTOR G <LACOMBE<
MD 19308 RICHARD M C <LIU<
MD 19309 BRIAN M <BOSSCHER<
MD 19310 ALICE K <CHIANG<
MD 19311 JEFFREY <CHANG<
MD 19312 MAX A <CLARK< II
MD 19313 MARY ANN <IYER<
MD 19314 JAMI A <FUKUI<
MD 19315 NARAT J <EUNGDMRONG<
MD 19316 WILLIAM E <DANER< III
MD 19317 WAZHMA <ASLAMY<
MD 19318 SERENA A <EDWARDS<
MD 19319 HUMAN <KOTOBI<
MD 19320 CLAUDIA G <HOOTEN<
MD 19321 ERIN E <FISK<
MD 19322 MAX R <JOHNSON<
MD 19323 JENNIFER M A <KAYA<
MD 19324 JOEL G <MASSEY<
MD 19325 STEPHEN D <SANTORA<
MD 19326 JOHN T <CURNES<
MD 19327 SOPHIA T <TRAN<
MD 19328 BRIAN A <FRANKEL<
MD 19329 MARTHINUS T <ZEEMAN<
MD 19330 GAIL <UKATU<

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MD 19331 LARRY <LAWRENCE<
MD 19332 SAGAR K <SHAH<
MD 19333 DMITRY <MYSH<
MD 19334 AARON S <ASHTON<
MD 19335 TYLER J <GREEN<
MD 19336 MARIO A <LEE<
MD 19337 CYNTHIA E <MILLER<
MD 19338 CAROL D <COLLIER<
MD 19339 JOAN S <HAYNES<
MD 19340 BRENNAMAE <SHACKELFORD<
MD 19341 NICHOLAS T <CALLEY<
MD 19342 BRADLEY J <MARCUS<
MD 19343 DONALD D <DAVIDSON< JR
MD 19344 TAIT G <DALTON<
MD 19345 IRENE A <HANNA<
MD 19346 KEITH N <WILLIAMS<
MD 19347 PHILIP E <HANLINE<
MD 19348 ATEKA <GUNJA<
MD 19349 JOHN R <HENWOOD<
MD 19350 JABAR <WHITTIER<
MD 19351 MCHUY F <MCCOY<
MD 19352 DAVID W <SCHECHTMAN<
MD 19353 BHAWANA <RATHORE<
MD 19354 ARASH <RADPARVAR<

AMD 770 JESSICA L <GRAVES<
AMD 771 ROBERT W <CHRISTINE<
AMD 772 SABRINA L <SHUMAR<
AMD 773 ASHLEE M <SCOTT<
AMD 774 MADELENA L <GARCIA<
AMD 775 MEGAN L <STUMPH<
AMD 776 KATHRYN <BROWN<
AMD 777 LINDSAY E <MAUGHAN<
AMD 778 VICTORIA T <REDMOND<
AMD 779 CHRISTINE M <RUDOLF<
AMD 780 THERESA S <FAUST<
AMD 781 ALICIA K <LADUKE<
AMD 782 MICHAEL T <O'LEARY<
AMD 783 CRYSTAL D <RYDER<
AMD 784 TERRA D <RUDD<
AMD 785 KAIDEN G <KELLY<
AMD 786 COURTNEY M <GOURLEY<

DOS 1837 BRYAN J <FLETCHER<
DOS 1838 CYRUS C <HASSELBY<
DOS 1839 RICHARD <KLINE<

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DOSR 430 ALICIA M <UNANGST<
DOSR 4283 KELLI T <FRITZ<

MDR 7388 GABRIELA <DELLAPIANA<
MDR 7389 DARYL E L <GOH<
MDR 7390 AMELIA <CURTIS<
MDR 7391 BLAKE <BRUTON<
MDR 7392 AARON V <TABOR<
MDR 7393 MARGARET G <KREBS<
MDR 7394 PETER A <THOMPSON<
MDR 7395 MELANIE M <MAYKIN<

EMTP 2164 MATTHEW D <DOMINGO<
EMTP 2165 GABRIEL R <CAMACHO<
EMTP 2166 JONATHAN P <MONTGOMERY<
EMTP 2167 DANIEL M <HOLIAN<
EMTP 2168 TIFFANY M <JIMENEZ<
EMTP 2169 WILLIAM K I <FROST<

EMT 2813 CAN HUANG <ZHANG<
EMT 2814 KAPONO <KAHUI<
EMT 2815 NICKLAUS A <YOUNG<
