

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, June 14, 2018

Time: 1:00 p.m.

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

Present: Jone Geimer-Flanders, D.O., Chairperson, Oahu Osteopathic Member
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
Peter Holt, M.D., Oahu Member
Palasi Puleyasi, Public Member
Karen E. Sept, D.O., Oahu Osteopathic Member
Geri Young, M.D., Kauai Member
Shari J. Wong, Deputy Attorney General
Ahlani K. Quiogue, Executive Officer
Olga Reppun, Secretary

Excused: Darren K. Egami, M.D., Maui Member

Guests: Elizabeth Char, M.D., Emergency Medical Personnel
("EMP") Advisory Committee Member
Jeff Zuckernick, EMP Advisory Committee Member
Ava Dysarz, Chaminade University Pre-med Student
Anand Patel, M.D., Applicant
Kristopher Bjornson, M.D., Pu`ulu Lapa`au, Medical Director
Ted Sakai, Pu`ulu Lapa`au, Executive Director

Call to Order: The meeting was called to order at 1:04 p.m., at which time quorum was established.

Approval of the May 10, 2018, Minutes: It was moved by Dr. Bintliff, seconded by Dr. Akaka, and carried by a majority, with the exception of Dr. Sept, who abstained from voting on this matter, to approve the minutes of the executive session and the minutes of the regular session of the May 10, 2018, meeting unamended.

Introduction
of guests

Dr. Patel and Ms. Dysarz were invited into the meeting room at 1:05 p.m.

Chair Geimer-Flanders greeted the guests. Board members and staff introduced themselves.

Dr. Patel and Ms. Dysarz were excused from the meeting room at 1:06 p.m.

Applications for
License/
Certification:

a. Applications:

It was moved by Dr. Holt, seconded by Dr. Bintliff, and unanimously carried to enter into executive session at 1:07 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.

Dr. Halford entered the meeting room at 1:08 p.m.

Mr. Puletsi entered the meeting room at 1:09 p.m.

- (i) Physician (Permanent):
 - a. Eric J. Putz, M.D.
 - b. Anand C. Patel, M.D.
 - c. Danny W. Beal, M.D.
 - d. Brent H. Greenwald, M.D.
 - e. Walter B. Grenell, D.O.
 - f. Frank B. Hamlett, M.D.
 - g. Christopher J. Karakasis, M.D.
 - h. Humpartzoom J. Kojian,
aka H. James Kojian, II, M.D.
 - i. Gregory C. Reuter, M.D.
 - j. Alexander W. Schermer, M.D.

- k. Alexander D. Serra, M.D.
- (ii) Limited and Temporary License for Residency/Specialty Training:
 - a. Jonathan Cho, M.D.
 - b. Matthew Yee, M.D.
- (iii) Physician Assistant:
 - a. Elizabeth M. Ennis, PA-C
- (iv) Emergency Medical Personnel:
 - a. Joseph Puente, EMT

It was moved by Dr. Bintliff, seconded by Dr. Young, and unanimously carried to return to the open meeting at 2:22 p.m.

Applications for
License/
Certification:

- b. Ratifications:
 - (i) List

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

Dr. Char, Mr. Zuckernick, Ms. Dysarz, and Dr. Bjornson were invited into the meeting room at 2:23 p.m.

It was moved by Chair Geimer-Flanders, seconded by Dr. Holt, and unanimously carried to approve the following applications:

- (i) Physician:
 - c. Danny W. Beal, M.D.
 - d. Brent H. Greenwald, M. D.
 - e. Walter B. Grenell, D.O.
 - f. Frank B. Hamlett, M.D.
 - i. Gregory C. Reuter, M.D.
 - j. Alexander W. Schermer, M.D.

k. Alexander D. Serra, M.D.

(ii) Limited and Temporary License for Residency/Specialty Training:

b. Matthew Yee, M.D.

(i) Physician:

a. Eric J. Putz, M.D.

After due consideration of the information received, it was moved by Chair Geimer-Flanders, seconded by Vice-Chair Halford, and unanimously carried to approve Dr. Putz's application for licensure. In addition, the Board directed Ms. Quiogue to communicate to Dr. Putz the Board's commendations on his efforts and to encourage him to continue on this path.

b. Anand C. Patel, M.D.

After due consideration of the information received, it was moved by Chair Geimer-Flanders, seconded by Dr. Bintliff, and carried by a majority, with the exception of Dr. Halford and Dr. Chun, who recused themselves from the discussion and voting on this matter, to approve Dr. Patel's application for licensure.

g. Christopher J. Karakasis, M.D.

After due consideration of the information received, it was moved by Dr. Holt, seconded by Dr. Bintliff, and unanimously carried to approve Dr. Karakasis's application for licensure pending submission of a corrected and revised application answering affirmatively to question 12.a. and to issue a non-disciplinary letter of education reminding Dr. Karakasis of his responsibility as a physician to disclose and provide accurate information at all times.

h. Humpartzoom J. Kojian aka H. James Kojian, II.

After due consideration of the information received, it was moved by Dr. Dao, seconded by Dr. Bintliff, and carried by a majority, with the exception of Dr. Chun, who abstained from voting on this matter, to approve Dr. Kojian's application for licensure.

(ii) Limited and Temporary License for Residency/Specialty Training:

a. Jonathan Cho, M.D.:

It was moved by Chair Geimer-Flanders, seconded by Dr. Bintliff, and unanimously carried to approve Dr. Cho's renewal application subject to certain conditions, basing the decision on the following grounds of the Hawaii Revised Statutes ("HRS") and Hawaii Administrative Rules ("HAR"), which find support in the records and files of his application:

HRS §436B-19(7): Professional misconduct, incompetence, gross negligence, or manifest incapacity in the practice of the license profession;

HRS §436B-19(9): Conduct or practice contrary to recognized standards of ethics for the licensed profession or vocation; and

HAR §16-85-112(3): Violating this chapter, the applicable licensing laws or any rule or order of the board.

The Board considers Dr. Cho's conduct while affiliated with the Kaiser Permanente Internal Medicine Residency Program ("Program") to be extremely concerning and contrary to the standards of ethics as adopted by the American Medical Association ("AMA"). Specifically, the Board believes that Dr. Cho failed to uphold the following AMA Principles of Medical Ethics:

(I) A physician shall be dedicated to providing competent medical care, with compassion and respect for human dignity and rights;

(II) A physician shall uphold the standards of professionalism, be honest in all interactions, and strive to report physicians deficient in character or competence, or engaging in fraud or deception, to appropriate entities;

(IV) A physician shall respect the rights of patients, colleagues, and other health professionals, and

shall safeguard patient confidences and privacy within the constraints of the law; and

- (VIII) A physician shall, while caring for a patient, regard responsibility to the patient as paramount.

As such, the Board imposed the following conditions to Dr. Cho's limited and temporary license:

1. Dr. Cho's limited and temporary license for residency/specialty training, License No. MDR-7266, is hereby conditioned for period to include the remainder of the July 2017 – June 30, 2018, academic year, and the following academic year, July 1, 2018 – June 30, 2019.
2. Dr. Cho shall ensure that the Program provides the Board monthly reports with the following information:
 - a. Dr. Cho's status with the Program;
 - b. Whether there are any adverse outcomes based on his care of patients;
 - c. Whether there have been or are any adverse and/or disciplinary actions pending against him; and
 - d. Whether there have been any issues with professionalism in his dealings with patients, colleagues, supervisors, subordinates, and ancillary staff.

The first monthly report shall be due to the Board within 30 days of the date of the Board's decision letter, and every 30 days thereafter. If Dr. Cho fails to comply with the conditions placed on his license, the Board will consider whether to take appropriate disciplinary actions against the license.

3. Dr. Cho shall provide a copy of the Board's decision letter to the Program Director, or the Program Director's successor within ten (10) days of the date of the letter. In turn, the Program Director shall send written confirmation to the Board's Executive Officer confirming receipt of the decision letter. All correspondence shall be addressed to the Board's Executive Officer.
4. Should Dr. Cho wish to have any of the conditions removed from his license, he shall make a request in

writing to the Board, at which time the Board would consider such request. When doing so, Dr. Cho shall provide evidence of full compliance with the conditions.

(iii) Physician Assistant:

a. Elizabeth M. Ennis, PA-C

After due consideration of the information received, it was moved by Vice-Chair Halford, seconded by Dr. Bintliff, and unanimously carried to approve Ms. Ennis's application for licensure pending submission of additional information.

(iv) Emergency Medical Personnel:

a. Joseph Puente, EMT

After due consideration of the information received, it was moved by Dr. Young, seconded by Dr. Dao, and unanimously carried to defer Mr. Puente's application for licensure.

Legal Advice
on Handling
Repetitive/ Similar
Agenda Items:

After due consideration of the information received, it was moved by Dr. Holt, seconded by Dr. Bintliff, and unanimously carried to delegate, pursuant to HRS §436B-8, to the Board's Executive Officer the authority to determine whether an agenda item proposed by an individual or an organization is unduly repetitious, as well as whether the testimony by an individual or an organization is irrelevant, or immaterial, or unduly repetitious to the agenda item.

If it is determined that the proposed agenda item is repetitive or similar to a matter that has already come before the Board, the Executive Officer shall direct the inquirer to the appropriate meeting minutes which include the discussion and any possible decision made by the Board.

Request to Make
Presentation to the
Hawaii Medical
Board by
Mr. Steven Shanks,
President, Co-
Founder, Erchonnia,
Corporation:

Ms. Quiogue informed the Board that by email dated June 13, 2018, Mr. Shanks declined to appear before the Board because, in his opinion, she "has rejected the topics [he] wanted to talk about, for no apparent good reason". He also stated: "I decline your late invitation to talk to the Board for five minutes."

Ms. Quiogue explained that, by email dated June 12, 2018, she had informed Mr. Shank that he would be given five (5) minutes to present his information pursuant to Hawaii Administrative Rules §16-85-98. The Board may refuse to hear any testimony which is irrelevant, immaterial, or unduly repetitious to the agenda item on which it is presented.

Ms. Quiogue stated that she also advised Mr. Shanks that the Board does not and cannot endorse any product or procedure because the Board has no authority or jurisdiction to do so. Thus, the items Mr. Shanks wanted

to present to the Board as described in his letter dated June 1, 2018, will not be considered. She went onto say that she advised Mr. Shanks that the Hawaii State Ethics Commission has interpreted the State's Fair Treatment Law to prohibit Board members from granting unwarranted privileges, such as the endorsement of a medical device, to an individual or business, while in their official capacity.

Mr. Shanks was to be provided an opportunity to address the Board regarding Dr. Halford's comments to Mr. Leslie Iczkovitz during his prior presentations to the Board. To make it very clear, Ms. Quiogue informed Mr. Shanks that the Board actually had no comments for Mr. Iczkovitz and instead politely listened to his presentations. However, when Mr. Iczkovitz persisted, Dr. Halford offered his comments.

Advisory
Committees:

- a. Emergency Medical Personnel:
 - (i) Emergency Medical Technician Certificates:
 - a. Requirements for out-of-state applications for Emergency Medical Technician Certificates, and how these applicants may meet the following: (1) didactic training in cardiac defibrillation and IV access; and (2) 96-hours of clinical training.

Ms. Quiogue informed the Board that the Emergency Medical Personnel Advisory Committee ("EMP Committee") held its meeting on May 23, 2018. At that meeting, the EMP Committee considered how out-of-state applicants would meet the requirements set forth in Hawaii Administrative Rules §§ 16-85-54(b)(1)(E) and 16-85-54-(b)(1)(F). Ms. Quiogue indicated that she had asked the EMP Committee for recommendations in order for these out-of-state candidates to meet the requirements.

Ms. Quiogue informed the Board that Elizabeth Char, M.D., Vice-Chairperson of the EMP Committee, and Mr. Jeff Zuckernick, Committee Member, were in attendance to provide background and answer any questions the Board may have regarding its recommendation.

Dr. Char explained that the requirements for the EMT level of certification in Hawaii are different from most mainland U.S. states, where only National Registry of Emergency Medical Technicians ("NREMT") certification is required to be licensed. In Hawaii, there are additional requirements that an applicant for an EMT certificate must meet in order to be certified by the Board, including, but not limited to: providing evidence of completion of didactic training in cardiac defibrillation and IV access from a state-approved EMT program; and evidence of completion of 96

hours of clinical training experience obtained through a board-approved agency.

Ms. Quiogue reminded members that the Board had amended its emergency medical personnel rules in 2016, and that these additional requirements were implemented after many meetings with the emergency medical personnel community. She went on to say that the requirement for IV access and cardiac defibrillation were established because the scope of practice for EMTs in Hawaii includes a limited practice of medicine.

Mr. Zuckernick stated that, as a result of the Hawaii's Emergency Medical Services rule change in the 90-ies, now EMTs routinely assist paramedics in starting an IV and cardiac defibrillation. Mr. Zuckernick informed the Board members that he still worked as a paramedic and that he could attest to the fact that 90% of IVs are started by EMTs.

The Board members reviewed drafts of the certification forms for the EMT Didactic Training – IV Access and Cardiac Defibrillation Requirement and Certification: EMT Clinical Training.

In particular, if an applicant's curriculum does not include didactic training in IV Access and Cardiac Defibrillation, the following must be done in order to meet the requirement:

IV Access:

- Medical legal implications
- Reasons for IV access
- IV equipment (catheter types/sizes) and IV safety (sharps)
- Factors that affect flow rates
- Syringe types and sizes
- Administration sets/extension – types
- Saline locks
- IV fluids
- Cannulation sites
- Equipment set up
- IV securing devices
- IV cannulation procedures
- IV cannulation complications
- IO overview
- Other device overview (IO, central lines, umbilical)
- IV practice

Cardiac Defibrillation:

- Shockable rhythms
- Non-shockable rhythms
- Pad placement
- 3-lead placements
- How to operate the EKG monitor to shock
- Safety concerns

Should an applicant be deficient in clinical training hours, they may meet that requirement by:

- The period of clinical training shall have occurred under the supervision of a certified Paramedic for the number of hours needed to meet the 96-hours of clinical training, and shall consist of at least:

Riding as a third person on an emergency 911 ambulance, running basic life support cases, and successfully demonstrating competency in the following:

- Oxygen administration;
- Utilizing bag-valve-mask;
- Utilizing suction;
- Utilizing airway aids (OPA/NPA);
- Using short board spinal immobilization device;
- Traction splint application;
- Splinting;
- Bandaging
- IV access;
- Cardiac Defibrillation; and
- Basic life support case(s) in which the applicant was in charge or responsible.

Ms. Quiogue stated that, because the EMP Committee is advisory in nature, the Board must consider and ratify any recommendation it makes in order for her to implement such decision.

It was moved by Chair Geimer-Flanders, seconded by Dr. Holt, and unanimously carried to ratify the EMP Committee's recommendations as detailed above.

Ms. Quiogue thanked the committee members for attending the meeting.

Mr. Zuckernick left the meeting room at 2:45.

- c. Physician Assistants
- d. Podiatrists

Dr. Bintliff and Dr. Char left the meeting room at 2:51 p.m.

Presentation:

- a. Pu`ulu Lapa`au, The Hawai`i Program for Healthcare Professionals: *Who We Are and What We Do*

Dr. Kristopher Bjornson, the medical director of Pu`ulu Lapa`au, made a presentation to the Board.

Dr. Bjornson briefed the Board about the mission, history, organizational structure, and funding sources of Pu`ulu Lapa`au. He also described a typical referral, types of monitoring agreements, agreement requirements, and possible actions for non-compliance with an agreement.

Dr. Bjornson informed the Board members that, according to a study of 904 physicians enrolled in a monitoring program, 78% of participants were licensed, and working at the end of a five-year monitoring period.

Chair Geimer-Flanders thanked Dr. Bjornson for the presentation and stated that the Board was very supportive of monitoring programs like Pu`ulu Lapa`au and grateful to have this program in the State.

Dr. Sept inquired how much Pu`ulu Lapa`au charges for an initial evaluation of a physician.

Dr. Bjornson responded that the initial evaluation and consultation are done free of charge. The monthly fee while enrolled into a monitoring program is \$225.

Vice-Chair Halford asked if any of the hospitals provided funding for the program and how the program was able to hire staff.

Dr. Bjornson replied that that funding is, unfortunately, an issue and, therefore, the program currently only has part-time staff of 3. Some of the funding comes from the hospitals, some from health organizations, and some from program participant fees: there usually are about 25 participants in the program. He stated, that, based on the number of licensed physicians in the State, the program should be larger: with the average 8-10% rate of addiction, the program should be about 5 times its current size.

Vice-Chair Halford asked Dr. Bjornson if the program charged a fee in cases when an out-of-state licensure applicant is asked by the Board to contact Pu`ulu Lapa`au in order to be referred for an evaluation.

Dr. Bjornson responded that there was no fee.

Vice-Chair Halford suggested that Pu`ulu Lapa`au consider introducing a referral fee for such applicants.

Dr. Sept inquired about Pu`ulu Lapa`au's location.

Dr. Bjornson said that they were located by the Foster Botanical Gardens. He added that the Pu`ulu Lapa`au's coordinator worked 20-30 hours a week and he and Mr. Ted Sakai, the executive director, worked about 10 hours a week.

Vice-Chair Halford asked what the name Pu`ulu Lapa`au meant.

Dr. Bjornson responded that, while there are different interpretations, the meaning is basically "healing our healer".

Mr. Sakai entered the meeting room at 3:07 p.m.

Mr. Sakai, the executive director of Pu`ulu Lapa`au, introduced himself to the Board members and thanked them for allowing the program to present information at the meeting.

Vice-Chair Halford stated that professionals and programs such as Pu`ulu Lapa`au are invaluable for regulatory boards, hospital leadership, credentialing, and monitoring.

Chair Geimer-Flanders added that it would be great if Pu`ulu Lapa`au could find additional funding, as it would make it a more available resource for physicians experiencing burn-out and depression. She asked Dr. Bjornson how much overlap there was between depression and self-medication.

Dr. Bjornson informed the Board that there was considerable overlap and that, if necessary, a program participant is referred for a mental health professional.

He also explained that Pu`ulu Lapa`au was currently looking at the models of larger monitoring programs in other states, such as Colorado, Massachusetts, and North Carolina, to see how this State's program could be developed to include prevention.

Dr. Bjornson also said that one other issue that Pu`ulu Lapa`au was currently working on is where to draw the line of confidentiality.

Mr. Sakai added that, along with therapy, other states' programs are beginning to offer coaching. He and Dr. Bjornson have been researching the possibility of coaching.

Dr. Young brought to the attention of the Board members that Dr. Bintliff co-authored a booklet for a physicians' well-being program of the American College of Emergency Physicians. Dr. Young added that the booklet contained a lot of useful material for dealing with issues such as addiction, divorce, financial strain, etc.

Dr. Young relayed that, as a hospital administrator, she is seeing more and more issues with physician burn-out as one of the unintended consequences of the introduction of electronic medical records (EMR) system.

Ms. Quiogue asked Dr. Bjornson and Mr. Sakai if they knew how larger programs, such as Colorado, Massachusetts and North Carolina were funded.

Dr. Bjornson responded that those programs received most of its funding from the state medical boards.

Ms. Quiogue remarked that it would be difficult to do in Hawaii, because the Board is administratively attached to the Department of Commerce and Consumer Affairs. She went on to say that the funding comes from its application, license, and Compliance Resolution Fund fees, which are used, among other things, to carry out the daily functions of division/department as well as to fund the investigations and prosecutions of the applicants and licensees.

Discussion followed. Mr. Sakai remarked that Pu`ulu Lapa`au did not want to deter physicians by increasing fees for participation in the program. He proceeded to say that the Hawaii Medical Association was very supportive of Pu`ulu Lapa`au's work, and, even though it was not able to directly fund it, they were exploring various options that were available.

Ms. Quiogue asked whether it would be possible to assess a fee, such as the physician assessment fee, to fund Pu`ulu Lapa`au, or would there be restrictions because it has a 501(c)3 status.

Chair Geimer-Flanders emphasized how important it was to expand a program like Pu`ulu Lapa`au and thanked Dr. Bjornson and Mr. Sakai for their work and for attending the meeting.

Open Forum: None.

Next Meeting: Thursday, July 12, 2018
1:00 p.m.
King Kalakaua Conference Room, First Floor
335 Merchant Street
Honolulu, Hawaii 96813

Adjournment: There being no further business to discuss, the meeting was adjourned at 3:20 p.m.

Reviewed and approved by:

Taken and recorded by:

/s/ Ahlani K. Quiogue

/s/ Olga Reppun

(Ms.) Ahlani K. Quiogue
Executive Officer

(Ms.) Olga Reppun
Secretary

AKQ:or
06/30/18

(x) Minutes approved as is.
() Minutes approved with changes: see _____

HAWAII MEDICAL BOARD 06/14/2018-RATIFICATION LIST

LTYPE LIC NUM BP NAME PART 1

MD 19675 DAVID A <WILKINSON<
MD 19676 MICHAEL H <WALCZYK<
MD 19677 SHANTHA M <PARAMESWARAN<
MD 19678 JINMENG <ZHANG<
MD 19679 NIREK <RASTOGI<
MD 19680 TUYNGOC B <NGUYEN<
MD 19681 JEFFREY P <HANSEN<
MD 19682 MYOUNGHEE C <KOO<
MD 19683 JAMES K <MANTONE<
MD 19684 RAMIN <AHSAEI<
MD 19685 KINSLEY A <HUBEL<
MD 19686 MARK A <YAP<
MD 19687 MATTHEW T <BOIRE<
MD 19688 PAUL H <RIEHLE<
MD 19689 ANDREW <HWANG<
MD 19690 JANE E <CAPLAN<
MD 19691 SOOHYUN <KIM<
MD 19692 PERNILLE <OTTOSEN<
MD 19693 THOMAS A <SORBERA<
MD 19694 GEORGE B <RUDY<
MD 19695 RICHARD <VILLALOBOS<
MD 19696 MICHAEL C W S <YIM<
MD 19697 DANIEL J <ESCOBAR<
MD 19698 SARAH P <READ<
MD 19699 DARIN L <WRIGHT<

MD 19700 STEVEN L <NOVICK<

MD 19701 CHISOO <CHOI<

MD 19702 JEAN P <COLON PONS<

MD 19703 MELISSA S <NICOLETTI<

MD 19704 KRISTIN H <KING<

MD 19705 ERIKA L <OFEK<

MD 19706 EYAS <YOUSSEF<

MD 19707 WILBUR D <PERALTA<

MD 19708 KAMIL K <KLINKOSZ<

AMD 831 STEPHEN B <FUTH<

AMD 832 TYLAN J <ROGERS<

AMD 833 BRIAN B <WHITMAN<

AMD 834 BRADLEY J <MORRIS<

AMD 835 CHRISTOPHER P <ROGERS<

AMD 836 LYNN A <CRAFT<

AMD 837 JOSHUA R <JOHNSON<

DOS 1889 JORDAN L <THOMSON<

DOS 1890 GAIL D <FANCHER<

DOS 1891 MANFRED <TEJERINA TEMMERMAN<

DOS 1892 WEI-LI <HSU<

DOS 1893 COSETTE M <STAHL<

DOS 1894 BRANT W <FONNESBECK<

DOS 1895 MARTHA L <CRUZ<

MDR 7478 MOLLY M <MALONE<

MDR 7479 CAROLINE M <RIDDLE<

MDR 7480 LEIMOMI N <KANAGUSUKU<
MDR 7481 ANDREA A B <GREGERSON<
MDR 7482 NINA L <BECKWITH<
MDR 7483 COREY C <CHINN<
MDR 7484 CLARK T <NICHOLS<
MDR 7485 JANIRA M <NAVARRO SANCHEZ<
MDR 7486 RACHEL N M S <SANTIAGO<
MDR 7487 RACHEL E <MERRIFIELD<
MDR 7488 RUTUJA N <KIBE<
MDR 7489 AMY W <JENKINS<
MDR 7490 LINDSEY E <HEATHCOCK<
MDR 7491 KRISSELLE G M <GINES<
MDR 7492 JACKYLINE S <PRESTOSA<
MDR 7493 THERESA L <MYERS<
MDR 7494 ALYSSA J <MALLEY<
MDR 7495 SAMANTHA B <KAISER<
MDR 7496 REEMA J <GHATNEKAR<
MDR 7497 INGRID Y <CHERN<
MDR 7498 BRETT J <MATOIAN<
MDR 7499 REID I <SAKAMOTO<
MDR 7500 ADAN F <HERNANDEZ<
MDR 7501 MATTHEW <KAWAHARA<
MDR 7502 JORDAN S F T <WANG<
MDR 7503 DUSTYN H <UCHIYAMA<
MDR 7504 MICHAEL W <TEE<
MDR 7505 JONATHAN S <LIN<
MDR 7506 DYLAN E L T <LEE<
MDR 7507 SOYUN M <HWANG<

MDR 7508 QUINLINN K <ADOLPHO<

MDR 7509 KYAN RENIE C <AGBAYANI<

MDR 7510 ANTONETTE VERONICA B <HERNANDEZ<

MDR 7511 MONIKA A <BERNAS<

MDR 7512 DANIEL W W <HONG<

MDR 7513 LAURA C <HOUK<

MDR 7514 SHOTA J <KAMO<

MDR 7515 TIMOTHY D <KELLNER<

MDR 7516 DANE T <KUROHARA<

MDR 7517 JEFFREY H <PAN<

MDR 7518 ROBERT J <PATTISON<

PO 226 LEE A <WITTENBERG<

EMTA 36 SHAWN P <HOWE<

EMTP 2213 TYLER J <LAUGER<

EMTP 2214 HANNAH L <HAWKINS<

EMTP 2215 RYAN J <ANG LEE<

EMT 2848 DAVIS N <GIANG<

EMT 2849 CASEY J <WHITWORTH<

EMT 2850 CHRISTOPHER J <PINKSTON<