



FLORIDA BOARD OF MEDICINE



2009-2010 Annual Report

Onelia G. Lage, M.D. - 2010

Fred Bearison, M.D. - 2009

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Florida Board of Medicine Members

As of July 2010

Onelia G. Lage, M.D.

Chair
Pediatrics
Term expires: 10/31/2010

Michael A. Chizner, M.D.

Vice-Chair
Cardiology
Term expires: 10/31/2010

George Thomas, M.D.

1st Vice-Chair
Cardiology
Term expires: 10/31/2010

Steven Rosenberg, M.D.

2nd Vice Chair
Dermatology
Term expires: 10/31/2010

H. Frank Farmer, Jr., M.D.

Internal Medicine
Term expires: 10/31/2013

Fred Bearison, M.D.

Internal Medicine
Term expires 10/31/2013

Brigitte Rivera Goersch

Consumer Member
Term expires: 10/31/2014

Trina Espinola, M.D.

Surgeon
Term expires: 10/31/2011

Robert Nuss, M.D.

Professor of OB/GYN
Term expires: 10/31/2012

Bradley Levine

Consumer Member
Term expires: 10/31/2012

Donald E. Mullins

Consumer Member
Term expires: 10/31/2012

Elisabeth Tucker, M.D.

OB/GYN
Term expires: 10/31/2012

Tully Patrowicz, M.D.

Ophthalmology
Term expires: 10/31/2010

Jason J. Rosenberg, M.D.

Plastic Surgery
Term expires: 10/31/2012

Gary E. Winchester, M.D.

Family Medicine
Term expires: 10/31/2011

Key Staff and Board Counsel

Larry G. McPherson, Jr., J.D., Executive Director

Chandra Prine, Program Operations Administrator, Initial Licensure Unit:
Gloria Nelson, CPM, Regulatory Supervisor/Consultant

Crystal Sanford, CPM, Program Operations Administrator: Administrative Unit, Licensure Maintenance Unit, Office Surgery Registration & Inspection Program, and Pain Management Clinic Registration and Inspection Program.

George Johnson, Regulatory Supervisor/Consultant

JoAnne Trexler, CPM, Regulatory Supervisor/Consultant

Whitney Bowen, Regulatory Specialist II

Ed Tellechea, J.D., Senior Assistant Attorney General & Chief, Administrative Law Bureau,
Board Counsel

Donna McNulty, J.D., Assistant Attorney General & Deputy Chief, Administrative Law Bureau,
Board Counsel for Credentials Committee and Council on Physician Assistants

Nancy Murphy, CP, FRP, Operations and Management Consultant I

Major Activities for FY 09-10

<p>Chair’s Recognition Award</p>	<p>The award winners for FY 09-10:</p> <ul style="list-style-type: none"> • Timothy DeVon Replogle – UF medical student • Bryan J. Allen - USF medical student • Terri-Ann Bennett – UM medical student • Anit Anil Rastogi, FIU medical student • Raymond Pomm, M.D. • Barth Green, M.D.
<p>Proposed Legislation for 2011</p>	<p>1. Expert Witness Testimony – High priority The Board proposes legislation that would add to the definition of the practice of medicine in Chapter 458, F.S., “rendering of an opinion”.</p> <p>The Board also proposes legislation regarding the registration of expert witnesses.</p> <p>2. Continuing Medical Education The Board supports any bill making the statutory requirements for specific CME courses be repealed, and that authority to specify any CME requirements be vested in the Board through rulemaking.</p> <p>The Board also proposes changing s. 456.031, F.S. to allow the Domestic Violence course to be taken any time during the 3 licensing biennium’s.</p> <p>3. Adverse Incidents Reports The Board proposes a public records exemption for physician office adverse incident reports to ensure comprehensive reporting of medical errors. Reporting of errors is critical to identify unsafe practices and take corrective action for public safety.</p> <p>The Board proposes legislative language that would modify the current requirement in the adverse incident reporting statute to limit the number of health care providers required to advise a patient of an incident.</p> <p>The Board proposes legislative language that would modify the current requirement to report adverse incidents if the incident occurred within 30 days of an office surgical procedure instead of 15.</p>

	<p>4. Medical Licensure</p> <ul style="list-style-type: none"> - Raise the fee cap to \$1,000. - Clarify the 2/4 year practice requirement - Clarify graduating from school must include being a student at that location (no Internet schools) - Update changes in medical school directory to remove WHO and to add IMED or its successor agency - Add reference to §456.072, F.S. to the end of the statute - Delete affidavit provision related to limited licenses - Amend poverty level definition for limited licenses from 100% to 200% - Delete redundant “community and migrant” language in limited license practice locations - Add reference to §766.115(3)(2)(e)(2), F.S. regarding volunteer service guidelines - Delete redundant language regarding where limited licensees may practice - Include requirement for complying with Chapter 456 - Add language regarding poor evaluations from internships, fellowships, training programs
<p>New Legislation Enacted in 2010</p>	<p style="text-align: center;">HB 573</p> <p>This bill deleted the requirement for PA’s to complete 3 months of clinical experience prior to being approved to be a prescribing PA and allows forms to be submitted electronically. <u>This change is effective July 1, 2010.</u></p> <p style="text-align: center;">HB 5311</p> <p>This bill, in sections 32 and 33, provides new licensure provisions for retired military physicians to be eligible to receive an area of critical need certificate. Many physicians give up their medical license when they retire then decide they want to practice, often as a volunteer, but do not want to go through the full licensure process again. The bill also provides the board additional authority to place conditions on the license.</p> <p style="text-align: center;">SB 2272</p> <p>Senate Bill 462, passed during the 2009 Legislative Session, required the registration and inspection of pain management clinics and the creation of standards of practice rules for physicians practicing in registered pain clinics. The Department of Health (Department) developed rules for registration and set the registration and inspection fees. The Boards of Medicine and Osteopathic Medicine are developing standards of practice rules for physicians practicing in pain management clinics. You can view the</p>

draft rule at the board website: www.flhealthsource.com.

In addition to the ongoing rulemaking process, new statutory provisions affecting pain management clinics, SB 2272, were signed into law by Governor Crist on June 4, 2010. These new provisions become effective on October 1, 2010. Most of the new provisions are in s. 458.3265, Florida Statutes.

Currently, all privately owned pain-management clinics/facilities/offices (clinics) which advertise any type of pain services, or employ a physician who is primarily engaged in the treatment of pain by prescribing or dispensing controlled substance medications are required to register with the Department. There are over 1,000 clinics registered. Below is a summary of the new pain management clinics provisions in SB 2272, which are effective October 1, 2010.

SB 2272 includes major changes that will impact the ownership and practice of pain management clinics. If you practice in this area, it is imperative that you carefully review the entire bill. To view the entire pain management clinic law, go to:

- www.leg.state.fl.us
- Select "Senate"
- In the bill field, enter "2272".

The following is a summary of some of the changes. These are only highlights of the bill and you are urged to read the entire bill:

Clinic Responsibilities

The following four new exemptions to registration were created. In addition to the current exemptions, clinics do not have to register if:

- clinic is owned by a publicly held corporation whose shares are traded on a national exchange or on the over-the-counter market and whose total assets at the end of the corporation's most recent fiscal quarter exceeded \$50 million;
- clinic is affiliated with an accredited medical school at which training is provided for medical students, residents or fellows;
- clinic does not prescribe or dispense controlled substances for the treatment of pain; or
- clinic is owned by a corporate entity exempt from federal taxation under 26 U.S.C. § 501(c)(3).

Each clinic location must register separately even if the clinic is operated under the same business name or management as another. A new registration is also required for changes in ownership. The law creates new restrictions on ownership, including certain convictions and the law allows the Department to grant exemptions

for criminal adjudications over 10 years old.

The clinic must designate a physician to register the clinic and the designated physician must practice at the clinic. The term “practice at the clinic” will be defined in rule by the Department. The designated physician must be a medical doctor licensed under Chapter 458, F.S., or an osteopathic physician licensed under Chapter 459, F.S., that has a full, active and unencumbered license. Notification of changes in designated physician must be made within 10 days by the clinic and the outgoing designated physician.

The Department shall deny registration to any clinic that is not fully owned by an MD, DO, or group of MD and DO licensees, unless the clinic is licensed as a health care clinic with the Agency for Health Care Administration pursuant to Chapter 400, F.S.

The Department will conduct annual inspections of clinics not accredited by board approved organizations and the inspection will include random medical records review. Clinics must demonstrate compliance with s. 458.3265, F.S., as well as the rules of the Department and the Boards’ standards of practice rules after rulemaking is complete and the rules are in effect. [Rules 64B8-9.0131 & 64B15-14.0051, FAC –and the accreditation rule not yet in effect].

Physician Responsibilities

Physicians may not practice in a clinic that should be registered but is not registered as required.

Any physician who meets the training requirements to practice medicine in a pain management clinic pursuant to rules adopted by the Board as of July 1, 2012, may continue to practice medicine in a pain-management clinic as long as the physician continues to comply with the board rules. On July 1, 2012, physicians practicing in a registered pain management clinic must have:

- successfully completed a pain medicine fellowship accredited by ACGME; or
- successfully completed a pain medicine residency accredited by ACGME; or
- been practicing in a pain clinic and in compliance with qualifications set forth in the Boards’ standards of practice rules.

Only physicians licensed under Chapters 458 (MD) and 459 (DO), F.S., may dispense medications in a pain management clinic.

A physical examination must be performed by the physician on the

day that the physician prescribes or dispenses a controlled substance for a patient at a pain management clinic for chronic non-malignant pain. If the physician prescribes or dispenses in excess of a 72-hour supply of a controlled substance, the physician must document the reason in the patient's medical record.

The Board shall adopt a rule establishing the maximum number of prescriptions for Schedule II or Schedule III controlled substances or the controlled substance Alprazolam which may be written at any one registered pain management clinic during any 24 hour period.

Physicians are responsible for maintaining control and security of his/her prescription blanks and any other method used for prescribing controlled substances. This includes using counterfeit resistant prescriptions and notifying the Department within 24 hours of a theft or loss of a prescription blank or breach of any other method used for prescribing.

Dispensing Practitioners

Dispensing practitioners at pain management clinics may not dispense more than a 72 hour supply of schedule II-V medications for a patient that pays by cash, check, or credit card. However, there are exemptions:

- workers compensation patient;
- cash, check or credit card is used only to cover the applicable co-payment or deductible; and
- complimentary packs of medications to the practitioner's own patients.

Penalties and Grounds for Discipline

New grounds for criminal violations have been established for:

- operating/owning/managing an unregistered clinic, and
- knowingly prescribing or dispensing controlled substances from an unregistered clinic.

New grounds for discipline for designated physicians have also been established for violations of their responsibilities.

New grounds for discipline have been created for MD licensees, including:

- failing to notify the Department of theft of prescriptions from a pain management clinic within 24 hours, and
- promoting or advertising, through any communication media, the use, sale or dispensing of any controlled substance appearing on any schedule in Chapter 893, F.S.

	<p>This is an overview of the new laws. It is important that physicians who practice pain management stay abreast of these current events and are encouraged to go online to read the new law in its entirety. If you are unsure whether you should register, it is important that you contact your private counsel. And as always, stay tuned to our web site for more information on pain management clinics.</p>
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Rule Amendments for FY 09-10

During FY 09-10, the Board drafted new rules and amended several existing rules in a continued effort to improve the quality of health care, increase patient safety, and to increase the efficiency of the Board. Some rule highlights are noted below:

Board of Medicine Rules:

64B8-1.007 – Forms

This rule has been updated as various Board forms have been revised. For example, the licensure applications (MD, PA, AA) were revised this fiscal year and so this rule was updated to indicate the revisions to the forms.

64B8-3.006 – Registration Fee for Dispensing Practitioners

This rule was changed only because of a change to the Registration Application for Dispensing Practitioners. No fee was changed.

64B8-4.009 – Applications

This rule was changed to incorporate the 5 most mis-diagnosed medical conditions for the Prevention of Errors course required for initial licensure. This rule was also updated with each revision of the application. This fiscal year, the applications were revised to include questions resulting from SB 1986.

64B8-4.029 – Registration as a Dispensing Practitioner

The registration application was revised and incorporated within this rule.

64B8-8.001 – Disciplinary Guidelines

This rule was revised to add disciplinary guidelines for pain management clinic violations. It was also revised to add disciplinary guidelines for violations imposed by 2009 Legislation, SB 1986.

64B8-8.0011 – Standard Terms Applicable to Orders

This rule was revised to change the Compliance Management Unit address; to require documentation of completion of community service be verified by the organization where the community service hours were performed; and requires lectures to address specific events arising from the Respondent's disciplinary matter.

64B8-8.011 – Notice of Noncompliance

This rule was changed to specify that failure to complete the requirement for instruction on domestic violence in the appropriate biennium, which is the last biennium of the 6 year period, shall result in a notice of noncompliance only.

64B8-8.0021 – Provisions Governing All Supervisors or Monitors

This rule was revised to allow a third party entity to supervise a physician on probation and to be compensated for providing the supervision in instances when the physician is unable to obtain a monitor/supervisor.

64B8-8.017 - Citation Authority

This rule was revised to clarify the time frames for completion of various citation violations in an effort to make the time frames for completion consistent throughout the rule.

64B8-9.013 – Standards for the Use of Controlled Substances for the Treatment of Pain

Revisions for this rule have just started and are the result of implementation of the pain management clinic registration and inspection program.

64B8-9.0131 – Standards of Practice for Physicians Practicing in Pain Management Clinics

64B8-9.0132 – Requirements for Pain Management Clinic Registration; Inspection or Accreditation

These rules are still being developed. SB 462, passed during the 2009 Legislative Session, regarding the registration and inspection of pain management clinics. Subsequently, SB 2272 passed the 2010 Legislative Session and imposed additional requirements for the registration and inspection program. These rules are ongoing.

64B8-11.001 – Advertising

This rule was updated to include the American Board of Interventional Pain Physician (ABIPP) who had submitted a request and was approved by the Board as a certifying organization.

Rule 64B8-13.005 – Continuing Education for Biennial Renewal

This rule was changed to incorporate the 5 most mis-diagnosed medical conditions for the Prevention of Errors course required for renewal.

Physician Assistant Rules:

64B8-30.003 – Physician Assistant Licensure

This rule was updated when the application for licensure was revised. This fiscal year, the application was revised to include questions resulting from SB 1986. This rule is in the process of being updated to address HB 573 which removed the requirement for 3 months clinic experience prior to receiving a prescribing registration. It also was updated to allow PA's to dispense under the authority of their supervising physician.

64B8-30.005 – Physician Assistant Licensure Renewal and Reactivation

This rule was revised to allow PA's to attend a full day of disciplinary hearings at a Board Meeting to receive five (5) hours CME in ethics.

64B8-30.012 – Physician Assistant Performance

This rule was revised to delete the requirement for co-signature of patient records, pursuant to a Legislative change.

64B8-30.013 – Notice of Noncompliance

This rule was changed to specify that failure to complete the requirement for instruction on domestic violence in the appropriate biennium shall result in a notice of noncompliance.

64B8-30.014 – Citation Authority

Rule changed to require a PA who fails a CME audit to be audited for the next two (2) biennia.

64B8-30.015 – Disciplinary Guidelines

This rule was revised to add disciplinary guidelines for violations imposed by 2009 Legislation, SB 1986 and to set forth additional guidelines and penalties for various violations.

Anesthesiologist Assistant Rules:

64B8-31.003 – Application for Licensure and Licensure Requirements for Anesthesiologist Assistants

This rule was updated due to revisions of the application. This fiscal year, the applications were revised to include questions resulting from 2009 Legislation, SB 1986.

Office Surgery Registration and Inspection Program Rules

64B8-9.009 – Standard of Care for Office Surgery

This rule was modified to require a defibrillator or AED under the requirement equipment and supplies category of the rule.

64B8-9.0092 – Approval of Physician Office Accrediting Organizations

The rule was updated to include Institute of Medical Quality as an approved accrediting organization to review physician office surgery settings.

Board, Committee and Regulatory Meetings FY 09-10

In an effort to increase efficiency and reduce costs, the Board of Medicine continues to use conference calls as an alternative for those meetings that do not require personal appearances and to combine meetings or hold meeting in conjunction with the Board Meetings.

Total Meetings

FY 06-07	88
FY 07-08	72
FY 08-09	74
FY 09-10	77

Total Meeting Hours

FY 06-07	256.25
FY 07-08	230
FY 08-09	192.5
FY 09-10	2312

Total Number of Conference Calls vs. Face-to-face Meetings

	Conference Calls	Face-to-Face
FY 06-07	44	44
FY 07-08	31	41
FY 08-09	37	37
FY 09-10	29	48

BREAKDOWN LISTING OF ALL MEETINGS AND HOURS IN FY 09-10:

*** Note: This chart reflects only the number of meeting hours and does not include the hundreds of hours spent in reviewing material in preparation for the meetings, particularly probable cause meetings.**

Meeting	Number of Hours
July 10, 2009 PCP South Panel	Est. 2
July 18-19, 2009 Board Business and Planning Meeting	11.5
July 24, 2009 PCP North Panel	Est. 2
August 13, 2009 Credentials Committee Meeting	4.25
August 13, 2009 Council on Physician Assistants Meeting	1.75
August 13, 2009 Rules/Legislative Committee Meeting	1.25
August 13, 2009 Electrolysis/Dietetics-Nutrition Committee Meeting	.5
August 14-15, 2009 Board Meeting	14
August 21 PCP South Panel	Est. 2
August 28, 2009 PCP North Panel	Est. 2
August 29, 2009 Probation Committee Meeting	Est. 4
August 29, 2009 Boards of Medicine and Osteopathic Medicine Pain Management Clinic Standards of Practice Joint Committee Meeting	4
September 2, 2009 Expert Witness Committee Meeting	.25
September 11, 2009 PCP South Panel	Est. 2
September 25 PCP North Panel	Est. 2
September 25, 2009 Boards of Medicine and Osteopathic Medicine Pain Management Clinic Standards of Practice Joint Committee Meeting	4

September 26, 2009 Negative Drug Formulary Committee Meeting	3.25
October 1, 2009 Credentials Committee Meeting	2.5
October 1, 2009 Anesthesiologist Assistant Committee Meeting	.25
October 1, 2009 Council on Physician Assistants Meeting	1.5
October 1, 2009 Rules/Legislative Committee Meeting	.75
October 1, 2009 Electrolysis/Dietetics-Nutrition Committee Meeting	.5
October 1, 2009 Surgical Care/Quality Assurance Committee Meeting	1
October 2-3, 2009 Board Meeting	9.75
October 9, 2009 PCP South Panel	Est. 2
October 23, 2009 PCP North Panel	Est. 2
November 7, 2009 Probation Committee Meeting	Est. 4
November 13, 2009 PCP South Panel	Est. 2
November 20, 2009 PCP North Panel	Est. 2
November 21, 2009 Boards of Medicine and Osteopathic Medicine Pain Management Clinic Standards of Practice Joint Committee Meeting	5.75
December 3, 2009 Credentials Committee Meeting	2.5
December 3, 2009 Rules/Legislative Committee Meeting	1.25
December 3, 2009 Surgical Care/Quality Assurance Committee Meeting	1.25
December 4-5, 2009 Board Meeting	14
December 17, 2009 PCP South Panel	Est. 2

December 18, 2009 PCP North Panel	Est. 2
December 19, 2009 Boards of Medicine and Osteopathic Medicine Pain Management Clinic Standards of Practice Joint Committee Meeting	4
December 19, 2009 Council on Physician Assistants Meeting	.25
January 6, 2010 Expert Witness Committee Meeting	.5
January 15, 2010 PCP South Panel	Est. 2
January 22, 2010 PCP North Panel	Est. 2
January 23, 2010 Boards of Medicine and Osteopathic Medicine Pain Management Clinic Standards of Practice Joint Committee Meeting	7.5
February 4, 2010 Credentials Committee Meeting	4
February 4, 2010 Council on Physician Assistants Meeting	1
February 4, 2010 Rules/Legislative Committee Meeting	2.25
February 4, 2010 Surgical Care/Quality Assurance Committee Meeting	.25
February 5-6, 2010 Board Meeting	12.5
February 19, 2010 PCP South Panel	Est. 2
February 19-20, 2010 Boards of Medicine and Osteopathic Medicine Pain Management Clinic Standards of Practice Joint Committee Meeting	11.75
February 26, 2010 PCP North Panel	Est. 2
February 27, 2010 Probation Committee Meeting	Est. 3
March 3, 2010 Board Conference Call	.5
March 12, 2010 PCP South Panel	Est. 2
March 26, 2010 PCP North Panel	Est. 2

April 8, 2010 Credentials Committee Meeting	5
April 8, 2010 Council on Physician Assistants Meeting	.5
April 8, 2010 Rules/Legislative Committee Meeting	3.25
April 8, 2010 Specialty Credentialing Committee Meeting	.25
April 9-10, 2010 Board Meeting	13.75
April 9, 2010 Electrology-Dietetics-Nutrition Committee Meeting	.25
April 9, 2010 Expert Witness Committee Meeting	2
April 10, 2010 Rule Hearing	.25
April 23, 2010 PCP South Panel	Est. 2
April 30, 2010 PCP North Panel	Est. 2
May 1, 2010 Probation Committee Meeting	Est. 3
May 5, 2010 Board Conference Call Meeting	.5
May 14, 2010 PCP South Panel	Est. 2
May 28, 2010 PCP North Panel	Est. 2
June 3, 2010 Credentials Committee Meeting	3.25
June 3, 2010 Council on Physician Assistants Meeting	.5
June 3, 2010 Rules/Legislative Committee Meeting	.25
June 4-5, 2010 Board Meeting	8.25
June 4, 2010 Rule Hearing	2
June 4, 2010 Specialty Credentialing Committee Meeting	.5
June 5, 2010 Rule Hearing	.25
June 18, 2010 PCP South Panel	Est. 2

June 25, 2010 PCP North Panel	Est. 2

Presentations Provided, Articles Written, Special Recognitions in FY 09-10

Practitioner and public education remained a primary goal for the Board in FY 09-10. In addition to web site information, the following in-person presentations on health care regulation, training, prescribing, and new laws and rules were provided by the Executive Director and other Board Staff with the help of Board of Medicine members:

Presentation	Presented by
Clarification of CME Issue Relevant to Domestic Violence Requirement <i>Florida Derm News</i> Summer 2009	Steven Rosenberg, M.D. 2 nd Vice Chair
Regulatory Issues & the Board of Medicine FMA Best Practices Symposium July 24, 2009	Fred Bearison, M.D.
Florida Board of Medicine: Update and Overview Brooksville Regional Hospital July 28, 2009	Fred Bearison, M.D.
Update on the Florida Board of Medicine Capital Medical Society August, 2009	Gary Winchester, M.D.
Expert Witnesses and Top Things Physicians Do to Get Into Trouble Florida OB/GYN Society August, 2009	Elisabeth Tucker, M.D.
What's New with the Board of Medicine Alachua County Medical Society November 11, 2009	Jason Rosenberg, M.D.
Prescription Drug Abuse Forum: Board of Medicine Disciplinary Role Nova Southeastern University November 14, 2009	Robert Cline, M.D.
Board of Medicine: Regulatory Component of Professionalism Florida State University School of Medicine November 30, 2009	Larry G. McPherson, Jr Executive Director Crystal Sanford, CPM Program Operations Administrator
Board of Medicine Update Program Directors/Chairs of the residency and fellowship programs – UF January 5, 2010	Robert Nuss, M.D.

Pain Management & Your License Annual Pain Management Symposium Broward General Medical Center February 13, 2010	Larry G. McPherson, Jr. Executive Director
Article on Haiti Trip Article for <i>House Calls</i> Magazine and <i>MQA Today</i> Newsletter 2010	Jason Rosenberg, M.D.
Haiti Trip Presentation Gainesville Rotary Club February 2, 2010	Jason Rosenberg, M.D.
Haiti Trip Presentation Oak Hall School Cum Laude Society March 2, 2010	Jason Rosenberg, M.D.
Ethical Economics in Dermatology and Dermatologic Surgery American Academy of Dermatology Annual Meeting March 5-9, 2010	Steven Rosenberg, M.D. 2 nd Vice Chair
2 nd Place for his lamp made of old pathology slides! American Academy of Dermatology Annual Meeting March 5-9, 2010	Steven Rosenberg, M.D. 2 nd Vice Chair
Haiti Trip Presentation Newberry Rotary Club March 16, 2010	Jason Rosenberg, M.D.
Board of Medicine Update Program Directors/Chairs of the residency and fellowship programs – UF March 16, 2010	Robert Nuss, M.D.
Board of Medicine Update National Hispanic Medical Association Meeting March 2010	Onelia G. Lage, M.D. Chair
Board of Medicine Update Bay County Medical Society March, 2010	Elisabeth Tucker, M.D.
CME Bay County Medical Society April, 2010	Elisabeth Tucker, M.D.

Board of Medicine Update University of Miami Plastic Surgery April, 2010	Onelia G. Lage, M.D. Chair
Board of Medicine Overview Florida Association of Medical Staff Services May 6, 2010	Chandra Prine Crystal Sanford, CPM Program Operation Administrators
Board of Medicine Update Florida Pediatric Society May, 2010	Onelia G. Lage, M.D. Chair
Board of Medicine Update Holy Cross Hospital June 3, 2010	Larry G. McPherson, Jr. Executive Director
FMA Laws & Rules Course Tampa, FL June 26, 2010	Larry G. McPherson, Jr. Executive Director
Designated <i>One of America's Top Doctors</i> Broward Health 2010	Michael Chizner, M.D. Vice Chair
<i>Outstanding Physician Award</i> Tallahassee Capital Medical Society 2010	Gary Winchester, M.D.
Designated <i>One of Top Government Attorneys</i> Florida Trend's Florida Legal Elite 2010	Ed Tellechea Board Counsel
Enrolled in <i>Miami Dade College Alumni Hall of Fame</i> 2010	Onelia G. Lage, M.D. Chair

Licensure Statistics

Medical Doctors	FY 06-07	FY 07-08	FY 08-09	FY 09-10
Licensure Applications Received	4420	4480	4004	4150
Licenses Issued	4281	4180	4119	3883
Number of Personal Appearances at Credentials Committee	223	132	191	191
Number of Individual Consideration (appearances not required)	10	11	17	6
Number of Licensure Denials	8	8	4	1
Number of Licensure Denials – Allowed to Withdraw	5	1	1	3
Number of Licensure Applicants Allowed to Withdraw	8	5	13	17
Medical Licenses Reactivated (Inactive to Active)	40	43	31	49
Medical Licenses Reactivated (Delinquent to Active)	664	606	558	704
Medical Physicians (deceased during fiscal year)	67	84	179	503 *
Medical Administrative Voluntary Relinquishments	246	214	243	235
Medical Voluntary Withdrawals from Practice	8	6	4	2
Retired Status	420	326	218	177
Physician Assistants				
Physician Assistant	451	424	481	555

Applications Received				
Physician Assistant Licenses Issued	395	416	428	455
Physician Assistant Individual Considerations	0	10	2	0
Physician Assistant Licensure Denials	1	0	0	0
Physician Assistant Denials Allowed to Withdraw	1	1	0	0
Physician Assistant Allowed to Withdraw	1	0	0	2
Physician Assistant Licenses Reactivated (Inactive to Active)	4	9	7	3
Physician Assistant Licenses Reactivated (Delinquent to Active)	38	103	33	0
Physician Assistant Administrative Voluntary Relinquishments	5	20	6	15
Physician Assistants (deceased during the fiscal year)	0	1	1	1
Anesthesiologist Assistants				
Anesthesiologist Assistant Applications Received	1	1	25	24
Anesthesiologist Assistant Licenses Issued	5	1	24	18
Anesthesiologist Assistant Individual Considerations	0	10	2	0
Anesthesiologist Assistant Licensure Denials	1	0	0	0
Anesthesiologist Assistant Denials Allowed to Withdraw	1	1	0	0
Anesthesiologist Assistant Allowed to	1	0	0	2

Withdraw				
Anesthesiologist Assistant Licenses Reactivated (Inactive to Active)	4	9	7	0
Anesthesiologist Assistant Licenses Reactivated (Delinquent to Active)	38	103	33	0
Anesthesiologist Assistant Administrative Voluntary Relinquishments	5	20	6	2
Anesthesiologist Assistants (deceased during the fiscal year)	0	1	1	0

*** This figure is large due to a system that captured previously unreported data.**

OFFICE SURGERY FACILITY STATISTICS

Office Surgery Registrations	FY 06-07	FY 07-08	FY 08-09	FY 09-10
Total number of facilities registered	307	316	341	370
Total number of physicians registered	692	641	727	826
Accreditation				
Number of facilities accredited by National Organizations	178	121	162	170
AAAASF	109	73	121	120
AAAHc	20	46	24	27
JCAHO	16	2	17	23
FLACS (*No longer an accepted accrediting organization after June 2007)	33	0	0	0
Annual Inspection by DOH				
Number of facilities currently registered for DOH inspection annually	129	195	179	200
Annual DOH Inspection Statistics				
Inspections requested	66	170	53	11
Inspections completed	41	135	85	154
Inspections pending	13	2	39	25
Inspections cancelled (*inspections under this category were cancelled due to facility closure or obtaining national accreditation prior to scheduled inspection date)	12	33	2	18
Registration Statistics				
Number of new facilities registered in FY	46	43	53	45
Number facilities closed in	24	38	26	17

FY				
Number of new physicians registered in FY	115	121	166	173

**Compliance Statistics
FY 09-10**

Total Fines Imposed: \$1,363,935.24
Total Fines Collected: \$1,171,980.43

Total Costs Imposed: \$1,051,068.08
Total Costs Collected: \$671,044.29

FY 08-09

Total Fines Imposed: \$1,143,961.25
Total Fines Collected: \$1,021,525.20

Total Costs Imposed: \$649,998.02
Total Costs Collected: \$548,139.43

FY 07-08

Total Fines Imposed: \$1,435,296.15
Total Fines Collected: \$1,312,780.01

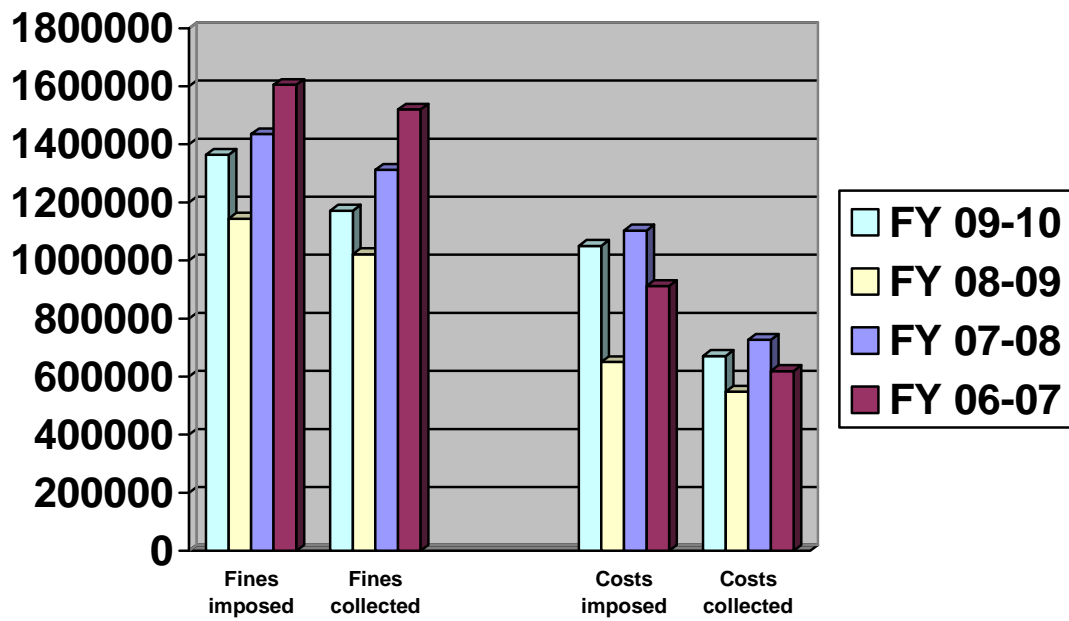
Total Costs Imposed: \$1,103,080.33
Total Costs Collected: \$726,930.29

FY 06-07

Total Fines Imposed: \$1,604,990.00
Total Fines Collected: \$1,520,268.51

Total Costs Imposed: \$912,498.00
Total Costs Collected: \$619,124.38

Total Revenue Collected (Fines & Costs):



Average number of active compliance cases for FY 09-10:

- average number of compliance files tracked = 725 files
- 431 files completed requirements during the fiscal year

Average number of active compliance cases for FY 08-09:

Note: Not available

Average number of active compliance cases for FY 07-08:

- average number of compliance files tracked = 698 files

Average number of active compliance cases for FY 06-07:

- average number of compliance files tracked = 576 files

Thanks to our contributors:

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