The meeting was called to order 11:05 a.m. on August 27, 2015 by Chair, Michael Arambula, M.D. Committee members present were Frank S. Denton; John D. Ellis, Jr; Carlos Gallardo; John R Guerra, D.O., Robert B. Simonson, D.O. and Paulette B. Southard.

Mr. Gallardo moved, Ms. Southard seconded, that the Committee close the meeting to the public and continue in Executive Session for deliberations concerning Agenda item 2a. The motion passed. Dr. Arambula announced that the meeting would be closed for deliberations at 11:07 a.m. concerning licensure applications and the character and fitness of applicants under the authority of The Medical Practice Act Sections 152.009 and 155.058, Occupations Code, and that while in executive session, the Board would not take any action, make any decision, or vote with regard to any matter that may be considered or discussed. A certified agenda of any executive session will be made.

Timothy Webb entered the meeting at 11:10 a.m.

The Executive Session ended at 2:47 p.m.

The Licensure Committee conducted hearings to review applicants and licensees appearing concerning eligibility. The hearings were conducted in Executive Session. Following the hearings, the Committee reconvened and considered the applications.
Agenda Item 2a - Applicants appearing concerning eligibility

Applicant #1699 appeared before the Committee in executive session. In open session, Mr. Denton moved that the committee recommend to the full board that the applicant be granted an unrestricted license. Ms. Southard seconded the motion. Mr. Gallardo voted against the motion. All others voted in favor. The motion passed.

Applicant #1700 appeared before the Committee, with counsel, in executive session. In open session, Mr. Gallardo moved that the committee recommend to the full Board that the applicant be granted an unrestricted physician in training permit. Ms. Southard seconded the motion. All voted in favor. The motion passed.

Applicant #1701 appeared before the Committee in executive session. In open session, Dr. Guerra moved that the committee recommend to the full Board that the applicant’s appeal is denied and the original offer of a non-disciplinary remedial plan stand. This recommendation is based on submitting a false statement to the Board. Mr. Gallardo seconded the motion. All voted in favor. The motion passed.

Applicant #1702 appeared before the Committee, with counsel, in executive session. In open session, Mr. Gallardo moved that the committee recommend to the full Board that the applicant be determined ineligible for a license. This recommendation is based upon on unprofessional conduct and disciplinary action taken by a health care entity. Ms. Southard seconded the motion. All voted in favor.

Applicant #1703 appeared before the Committee, with counsel, in executive session. In open session, Dr. Guerra moved that the committee recommend to the full Board that the applicant’s appeal be denied and the original offer of an Agreed Order with a Public Reprimand stands. This recommendation is based on being disciplined by another state. Mr. Gallardo seconded the motion. All voted in favor. The motion passed.
Applicant #1704 appeared before the Committee, with counsel, in executive session. In open session, Ms Southard moved that the committee moved that the committee recommend to the full Board that the applicant be granted an unrestricted physician in training permit. Dr. Guerra seconded the motion. Mr. Gallardo voted against the motion. All others voted in favor. The motion passed.

Applicant #1713 appeared before the Committee, in executive session. In open session, Mr. Denton moved that the committee recommend to the full Board that the applicant be granted a fourth attempt at the Texas Medical Jurisprudence Exam. Dr. Simonson seconded the motion. All voted in favor. The motion passed.

Applicant #1714 appeared before the Committee in executive session. In open session, Mr. Gallardo moved that the committee recommend to the full Board that the applicant be determined ineligible for a license. This recommendation is based on unprofessional conduct and receiving deferred adjudication/deferred disposition for a felony or misdemeanor of moral turpitude. Ms. Southard seconded the motion. All voted in favor. The motion passed.

Applicant #1717 appeared before the Committee, with counsel, in executive session. In open session Mr. Webb moved that the committee recommend to the full Board that the applicant be determined ineligible for a license. This recommendation is based on unprofessional conduct; conviction of a misdemeanor; disciplinary action taken by a health care entity; and submitting a false statement to the Board. Mr. Gallardo seconded the motion. All voted in favor. The motion passed.

Applicant #1718 appeared before the Committee, with counsel, in executive session. In open session, Dr. Simonson moved that the committee recommend to the full Board
that the applicant be granted an unrestricted license. Mr. Webb seconded the motion. All other voted in favor. The motion passed.

Item 2b - Proposed orders offered by the Executive Director –Ms. Knight reported on 20 physician licensure and 7 Physician in Training permit holders remedial plans and agreed orders offered by the Executive Director and accepted by applicants. Mr. Webb moved to recommend to the full Board that the orders be approved. Mr. Gallardo seconded. All voted in favor. The motion passed.

Item 2c – Physician licensure applicants to be licensed. There were 203 applicants who met all requirements to be considered for permanent licensure by the full Board. Dr. Guerra moved to recommend to the full Board that all 203 physician licensure applicants determined to meet eligibility requirements by staff be approved. Mr. Webb seconded the motion. All voted in favor. The motion passed.

Item 2d – Surgical assistant licensure applicants to be licensed. There were 10 surgical assistant applicants who met all requirements to be considered for licensure by the full Board. Mr. Gallardo moved to recommend to the full Board that all 10 surgical assistant applicants determined to meet eligibility requirements by staff be approved. Dr. Guerra seconded the motion. All voted in favor. The motion passed.

Agenda Item 2e – Acudetox applicants for certification – There were none

Agenda Item 3 – Report on physician licensure statistics. Ms. Knight reported that the fourth quarter of FY15 approximately 1,420 new physician licenses were issued compared to 1,417 in the fourth quarter of FY14. Ms. Knight also reported that the average time to complete physician licensure applications during the fourth quarter of FY15 was 40 days.
Agenda Item 4a - Discussion, recommendation, and possible action regarding cancellation of licenses by request for incomplete registration: Surgical Assistants. There were 5 surgical assistants license to be cancelled. Ms. Southard recommended to the full Board that the 5 surgical assistants’ licenses be cancelled. Mr. Gallardo seconded. All voted in favor and the motion passed.

Agenda Item 4b - Discussion, recommendation, and possible action regarding cancellation of licenses by request for incomplete registration: Acudetox. There was one Acudetox certification to be cancelled. Ms. Southard recommended to the full Board that the one Acudetox certification be cancelled. Mr. Gallardo seconded. All voted in favor and the motion passed.

Agenda Item 5a - Discussion, recommendation, and possible action regarding Nonprofit Health Organizations: Applicants for initial certification. There were 16 applications for initial certification as a Nonprofit Health Organization for approval. Mr. Gallardo moved to recommend to the full Board that the 16 requests for initial certification as a Nonprofit Health Organization be approved. Ms. Southard seconded. All voted in favor and the motion passed.

Agenda Item 5b - Discussion, recommendation, and possible action regarding Nonprofit Health Organizations: Requests for biennial recertification. There were 12 applications for biennial recertification as a Nonprofit Health Organization for approval. Ms. Southard moved to recommend to the full Board that the 12 requests for biennial recertification as a Nonprofit Health Organization be approved. Dr. Guerra seconded. All voted in favor and the motion passed.

Agenda Item 5c - Discussion, recommendation, and possible action regarding Nonprofit Health Organizations: Cancellation of organizations certified as Nonprofit Health Organizations – There were none
Agenda Item 6 - Discussion, recommendation, and possible action regarding proposed amendments to board rules:

a. 163.1 – Definitions (Licensure)
b. 163.2 Alternative License Procedures

Mr. Denton moved to recommend to the full Board that the rule as presented be published in the Texas Register for public comment. Dr. Simonson seconded. All voted in favor. The motion passed.

c. 166.1 Physician Registration
d. 166.2 Continuing Medical Education

Ms. Southard moved to recommend to the full Board that the rule as presented be published in the Texas Register for public comment. Dr. Guerra seconded. All voted in favor. The motion passed.

e. 171.5 Duties of PIT Holders to Report

Dr. Guerra moved to recommend to the full Board that the rule as presented be published in the Texas Register for public comment. Mr. Gallardo seconded. All voted in favor. The motion passed.

f. 172.5 Visiting Physician Temporary Permit

Mr. Webb moved to recommend to the full Board that the rule as presented be published in the Texas Register for public comment. Mr. Gallardo seconded. All voted in favor. The motion passed.
Agenda Item 7 – Report on Academic Stakeholders Meeting. Ms. Knight reported on the third annual Academic Stakeholders meeting held on July 30, 2015. The majority of the action items from the previous Stakeholders meeting had been completed by Board staff. Presentations were made by both the Texas Higher Education Coordinating Board (THECB) and the Texas Physician Health Program (TPHP). Ms. Knight commented that this group continues to be a valuable asset to the Board in gathering input for high level policy related to academic issues.

Agenda Item 8 - Discussion, recommendation, and possible action regarding specialty board certifications as a remedy for clerkships. Mr. Freshour and Ms. Knight asked for direction regarding §155.003 of the Texas Occupation Code, which allows a waiver for meeting certain medical education requirements if an applicant is specialty board certified.
The Committee directed staff to add changing the wording, to allow applicants who have ever been specialty board certified to qualify for the waiver, to the list of issues included in the Board’s Sunset review.

Mr. Denton asked that the issue of accredited educational programs for surgical assistants be revisited and put on the Licensure Committee agenda for December, specifically in terms of possible remedies for programs that lose accreditation during an applicant’s attendance. The Committee directed staff to add this to the agenda in December.

Agenda Item 10 - There being no further business, the meeting was adjourned at 3:27 p.m.
## August 2015

**Agenda Item 02b – Proposed orders offered by the Executive Director**

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BOARD MEETING OF AUGUST 28, 2015

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GRAND TOTAL 183 20 203

TEXAS MEDICAL BOARD
FULL LICENSURE APPLICANTS FOR CONSIDERATION AT AUGUST, 2015 BOARD MEETING

1. ABDULLAH, FARHAN SALMAN DO FULL-REG (582660)
   SCHOOL: NOVA SE UNIV, HLTH PROF DIV, COLL OSTEO, FT LAUDERDALE, FL-2014

2. ADATIA, NEHA MAYANK DO FULL-REG (594946)
   SCHOOL: CHICAGO COLL OF OSTEO MED, MIDWESTERN UNIV, CHICAGO, IL-2008

3. ADEGBESAN, SUSAN MD FULL-REG (594480)
   SCHOOL: MEDICAL UNIV OF THE AMERICAS, NEVIS-2012

4. AHMED, UMER MD FULL-REG (587093)
   SCHOOL: UNIV OF SINT EUSTATIUS, SINT EUSTATIUS, NETHERLAND ANTILLES-2012

5. AIBANA, OMOWUNMI MD FULL-REG (594211)
   SCHOOL: UNIV OF PENNSYLVANIA SCH OF MED, PHILADELPHIA-2009

6. ALAM, NAHEED MD FULL-REG (586884)
   SCHOOL: DOW MED COLL, UNIV OF KARACHI, KARACHI, PAKISTAN-1999

7. ALEXANDER, ELIZABETH THOMAS MD FULL-REG (591090)
   SCHOOL: UMDNJ-NEW JERSEY MEDICAL SCHOOL, NEWARK-2012

8. ALIKAH, MAUREEN MD FULL-REG (594952)
   SCHOOL: BAYLOR COLL OF MED, HOUSTON-2011

9. AMIN, MILON MD FULL-REG (586757)
   SCHOOL: HOWARD UNIV COLLEGE OF MEDICINE, WASHINGTON-2008

10. AMIRISHETTY, SHAILAJA MD FULL-REG (589948)
11. ANWAR, FARRUKH MD
   FULL-REG (590296)
   SCHOOL: DOW MED COLL, UNIV OF KARACHI, KARACHI, PAKISTAN-1990

12. BACKOFEN, GREGORY SCOTT MD
    FULL-REG (575434)
    SCHOOL: UNIV IBEROAMERICANA (UNIBE) ESC DE MED, SANTO DOMINGO, DOM REPUBLIC-2009

13. BARNHART, ERIN ANANDA MD
    FULL-REG (514132)
    SCHOOL: UNIV OF TEXAS MEDICAL SCHOOL, HOUSTON-2005

14. BASSUNER, JURI MD
    FULL-REG (595563)
    SCHOOL: UNIVERSITY OF MISSOURI SCHOOL OF MEDICINE, COLUMBIA-2014

15. BENSON, KEVIN WILLIAM MD
    FULL-REG (593040)
    SCHOOL: STATE UNIV OF NY HLTH SCI CTR, BROOKLYN COLL OF MED, BROOKLYN-1994

16. BERHIL, ANIS MD
    FULL-REG (593698)
    SCHOOL: UNIV SIDI MOHAMMED BEN ABDELLAH-FES, MOROCCO-2007

17. BERNARD, NICOLE LOUISE MD
    FULL-REG (565401)
    SCHOOL: UNIV OF TEXAS MED BRANCH, GALVESTON-2012

18. BICKNELL, KENDALL MD
    FULL-REG (565539)
    SCHOOL: UNIV OF TEXAS MEDICAL SCHOOL, HOUSTON-2012

19. BOOHER, ASHLEY JADE MD
    FULL-REG (582793)
    SCHOOL: TEXAS A & M UNIV HLTH SCI CTR, COLL OF MED, COLLEGE STATION-2014

20. BOSE, KINSHUK MD
    FULL-REG (591083)
    SCHOOL: PENNSYLVANIA STATE UNIV, MILTON S HERSHEY MED CTR, HERSHEY-2008

21. BROWN, MACKENZIE ELIZABETH DO
    FULL-REG (591114)
    SCHOOL: TOURO UNIV COLL OF OSTEO MED, VALLEJO, CA-2011

22. BROWN, MATTHEW AUSTIN MD
    FULL-REL (533219)
    SCHOOL: BAYLOR COLL OF MED, HOUSTON-2008

23. BROWN, ROBERT JAMES DIX MD
    FULL-REG (594232)
    SCHOOL: STATE UNIV OF NEW YORK HLTH SCI CTR, SYRACUSE COLL OF MED, SYRACUSE-2006

24. BURRIS, BENJAMIN SCOTT MD
    FULL-REG (581487)
    SCHOOL: TEXAS A & M UNIV HLTH SCI CTR, COLL OF MED, COLLEGE STATION-2012

25. BURROUGHS, ADAM GLEN MD
    FULL-REG (567317)
    SCHOOL: UNIV OF TEXAS MED BRANCH, GALVESTON-2012

26. BURTON, CHRISTIAN ANTHONY MD
    FULL-REG (573155)
    SCHOOL: UNIV OF TEXAS MEDICAL SCHOOL, HOUSTON-2013
27. CALLEJAS, LEYDA PENNYNA MD  FULL-REG (574668)
   SCHOOL: UNIV AUTONOMA DE HONDURAS, TEGUCIGALPA-2008

28. CAMPOY, ABRAHAM MD  FULL-REG (573365)
   SCHOOL: UNIV DE MONTEMORELOS, MONTEMORELOS-2008

29. CERVANTES, TESSA JENE MD  FULL-REG (565673)
   SCHOOL: UNIV OF TEXAS MEDICAL SCHOOL, SAN ANTONIO-2012

30. CHA, DAVID JEANGUP MD  FULL-REG (559707)
   SCHOOL: STATE UNIV OF NEW YORK AT STONY BROOK SCH OF MED, STONY BROOK-2011

31. CHANGELA, KINJAL MD  FULL-REG (595294)
   SCHOOL: UNIV OF MIAMI SCH OF MED, MIAMI-2012

32. CHAUDHARY, JESSICA MD  FULL-REG (586659)
   SCHOOL: UNIV OF WASHINGTON SCH OF MED, SEATTLE-2007

33. CHAUDHRY, RIZWAN MUHAMMAD MD  FULL-REG (589263)
   SCHOOL: SABA UNIV SCH OF MED, SABA, NETHERLANDS ANTILLES (MATRICULATED AFTER 2002)-2006

34. CHAUDRY, SALMANN IMTIAZ DO  FULL-REG (595019)
   SCHOOL: UMDNJ - SCHOOL OF OSTEO MED, STRATFORD-2007

35. CHAVA, SREEKANTH MD  FULL-REG (584702)
   SCHOOL: OSMANIA MED COLL, HYDERABAD, ANDHRA PRADESH-1996

36. CHOI, SE MYUNG MD  FULL-REG (592594)
   SCHOOL: ROSALIND FRANKLIN UNIVERSITY OF MEDICINE AND SCIENCE, CHICAGO MEDICAL SCHOOL, CHICAGO-2011

37. CHRISTNER, JENNIFER GOLD MD  FULL-REG (590638)
   SCHOOL: UNIV OF TOLEDO COLL OF MED, TOLEDO OH (ALTERNATE SCHOOL NAME: MED COLL OF OHIO)-1995

38. CLARKE, NICHOLAS MD  FULL-REG (567162)
   SCHOOL: UNIV OF MIAMI SCH OF MED, MIAMI-2012

39. COFFEY, CHARLES EDWARD MD  FULL-REG (586333)
   SCHOOL: DUKE UNIV SCH OF MED, DURHAM-1979

40. COVEY, SHANNON AMBER MD  FULL-REG (594555)
   SCHOOL: TEXAS A & M UNIV HLTH SCI CTR, COLL OF MED, COLLEGE STATION-2010

41. CULLEN, MICHAEL LEO MD  FULL-REL (64458)
   SCHOOL: CREIGHTON UNIV SCH OF MED, OMAHA-1979
42. DAHDEL, MAHER MD  
   SCHOOL: DAMASCUS UNIV, DAMASCUS-2000  
   FULL-REG (594970)

43. DAMODARAN, SENTHILKUMAR MD  
   SCHOOL: MADRAS MED COLL, MADRAS UNIV, MADRAS, TAMIL NADU, INDIA-2001  
   FULL-REG (594041)

44. DANWAR, HUMERA NAZ MD  
   SCHOOL: LIAQUAT MED COLL, UNIV OF SIND, JAMSHORO, PAKISTAN-2004  
   FULL-REG (566195)

45. DAVIDSON, RUSSELL GORDON MD  
   SCHOOL: WAYNE STATE UNIV SCH OF MED, DETROIT-2011  
   FULL-REG (570022)

46. DILLE, RENEE MD  
   SCHOOL: UNIV OF ARIZONA COLL OF MED, TUCSON-2013  
   FULL-REG (573829)

47. DUDLEY, LEE ANTHONY DO  
   SCHOOL: OHIO UNIV COLL OF OSTEO MED, ATHENS-1998  
   FULL-REG (525231)

48. DUNCAN, CASEY BOYD MD  
   SCHOOL: OHIO STATE UNIV COLL OF MED, COLUMBUS-2008  
   FULL-REG (533570)

49. EDDINS, MICHELLE MCCOWN MD  
   SCHOOL: LOUISIANA STATE UNIV SCH OF MED, NEW ORLEANS-2012  
   FULL-REG (567577)

50. EJIOGU, CHIDERA CATHERINE MD  
   SCHOOL: UNIV OF TEXAS MED BRANCH, GALVESTON-2011  
   FULL-REG (559284)

51. ESCOBAR, VICTOR IVAN MD  
   SCHOOL: UNIV ALBERTO MASFERRER, FAC DE MED, SAN SALVADOR, EL SALVADOR-2009  
   FULL-REG (566032)

52. FLOYD, CARALYN JEAN DO  
   SCHOOL: NOVA SE UNIV, HLTH PROF DIV, COLL OSTEO, FT LAUDERDALE, FL-2008  
   FULL-REG (583551)

53. FORT, JULIANA MELODY MD  
   SCHOOL: LOUISIANA STATE UNIV SCH OF MED, SHREVEPORT-1986  
   FULL-REL (452167)

54. FRANCE, ADRIAN KAY MD  
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55. FRANCO, JOHNNY MD  
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56. FREETO, MICHAEL ALLEN MD  
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57. FRIEDMAN, MARK LEWIS MD  
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58. FRONTZ, REBECCA LEAH DO  
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59. FUSI, STEFANO MD  
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60. GAINOR, ROBERT EDWARD MD  
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61. GIBSON, RACHELE ANN MD  
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62. GOLDSMITH, SHAINA JILL MD  
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63. GRANDHI, RAMESH MD  
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64. GRIGORIYAN, ARTUR MD  
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65. GULATI, TARUNA MD  
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66. HAKIMI, AHMAD NABIL MD  
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67. HASAN, ASMA MD  
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68. HASHWANI, ARAFAT ALI MD  
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69. HITE, PAMELA RENE MD  
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70. HLAING, CRYSTAL MD  
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71. HUEN, AURIS ONN-LAY MD  
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72. HURTADO, VERONICA MD  
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73. HUYNH, QUYEN MD  
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74. IMAM, TABASSUM ZAFFAR MD  
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109. LYONS, KAREN MD
   SCHOOL: UNIV COLL OF CORK, NAT'L UNIV OF IRELAND, CORK (AFTER 1996)-2005
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110. MANN, GARY NEIL MD
   SCHOOL: UNIV OF THE WITWATERSRAND, JOHANNESBURG-1989
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111. MANSOOR, UROOJ MD
   SCHOOL: SIND MED COLL, UNIV OF KARACHI, KARACHI-2000
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112. MARANTO, LISMAIDA DO
   SCHOOL: CHICAGO COLL OF OSTEO MED, MIDWESTERN UNIV, CHICAGO, IL-2002
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113. MARINO, MICHAEL JUSTIN MD
   SCHOOL: TULANE UNIV SCH OF MED, NEW ORLEANS-2011
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114. MARQUEZ, WILLIE MATTHEW MD
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115. MARTIN, JOSHUA BRYAN DO
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116. MATHEW, TEENA MD
   SCHOOL: KOTTAYAM MED COLL, MAHATMA GANDHI UNIV, KOTTAYAM, KERALA, INDIA-2006
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117. MATOS, ANGEL FRANCISCO MD
   SCHOOL: UNIV OF WISCONSIN MED SCH, MADISON-2013
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118. MCKELLAR, DUNCAN LAWRENCE JR MD
   SCHOOL: UNIV OF TEXAS MEDICAL SCHOOL, HOUSTON-1983
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119. MCKNIGHT, JASON RAY MD
   SCHOOL: UNIV OF TEXAS MEDICAL SCHOOL, HOUSTON-2014
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120. MERRITT, CURTIS JAMES DO
   SCHOOL: UNIV OF NORTH TEXAS HLTH SCI CTR, FORT WORTH-2010
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121. MOORE, ALAINA ELIZABETH MD
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122. MORA, MARILYN JEAN MD
   SCHOOL: LOUISIANA STATE UNIV SCH OF MED, NEW ORLEANS-1996
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123. MORALES-RALAT, ASTRID MD
   SCHOOL: UNIV OF PUERTO RICO SCH OF MED, SAN JUAN-1995
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124. MORIN, VERONIQUE MD
   SCHOOL: UNIV OF MONTREAL, MONTREAL-2007
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125. MORRISON, MATTHEW ELLIS MD  
SCHOOL: MOUNT SINAI SCH OF MED, CITY UNIV OF NEW YORK, NEW YORK-2012

126. NAGRA, AMRITA DO  
SCHOOL: ARIZONA COLL OF OSTEO MED, MIDWESTERN UNIV, GLENDALE, AZ-2012

127. NAVANEETHAN, SANKAR DASS MD  
SCHOOL: MADRAS MED COLL, MADRAS UNIV, MADRAS, TAMIL NADU, INDIA-2000

128. NEGRICH, RONALD JAMES MD  
SCHOOL: UNIV DEL NORESTE, TAMPICO, TAMAULIPAS-1989

129. NGUYEN, NAM HOANG DO  
SCHOOL: UNIV OF NORTH TEXAS HLTH SCI CTR, FORT WORTH-2012

130. NGUYEN, ROSELYNN HONGLAM MD  
SCHOOL: UNIV OF TEXAS, SOUTHWESTERN MED SCH, DALLAS-2012

131. NGUYEN, TRAM ANH MD  
SCHOOL: ROSS UNIV, ROSEAU-2012

132. NOLEN, DAVID MD  
SCHOOL: UNIV OF TEXAS MEDICAL SCHOOL, HOUSTON-2008

133. NOTTAGE-MURPHY, LATOYA CHRISTAL MD  
SCHOOL: UNIV OF TEXAS MED BRANCH, GALVESTON-2013

134. NWOSU, JENIFER CHIOMA MD  
SCHOOL: GEORGE WASHINGTON UNIV SCH OF MED & HLTH SCI, WASHINGTON-2011

135. O'DONNELL, ARLENE ELIZABETH DO  
SCHOOL: EDWARD VIA VIRGINIA COLLEGE OF OSTOEPATHIC MEDICINE, BLACKSBURG, VA-2011

136. OKWARA, CHINEMEREM JOHN MD  
SCHOOL: UNIV OF TEXAS MEDICAL SCHOOL, SAN ANTONIO-2013

137. OSBORNE, CHRISTOPHER MICHAEL MD  
SCHOOL: WEST VIRGINIA UNIV SCH OF MED, MORGANTOWN-2006

138. OSHINOWO, ADEOTI E MD  
SCHOOL: STANFORD UNIV SCHOOL OF MEDICINE, STANFORD-2009

139. OYENUGA, OLUSEGUN A MD  
SCHOOL: UNIV OF IBADAN, IBADAN-2002

140. PADMANABHAN, VIJAYALAKSHMI MD  
SCHOOL: KASTURBA MED COLL MANGALORE, MANIPAL UNIVERSITY, MANGALORE, KARNATAKA (GRADUATES PRIOR TO 2008)-1988

141. PAL, VABHAVE MD  
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FULL-REG (589733)

160. RAJAGOPAL, SURESH KUMAR MD
SCHOOL: STANLEY MED COLL, MADRAS UNIV, MADRAS, TAMIL NADU-2002
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161. RAJKUMAR, JOHN SANGEETH JOYWIN MD
SCHOOL: STATE UNIV OF NEW YORK HLTH SCI CTR, SYRACUSE COLL OF MED, SYRACUSE-2007
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162. RAZZAQ, KANWAL MD
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163. REINKE, AARON MD
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164. REINKE, TESSA MD
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165. REYES, RAUL JR MD
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166. RICHARDS, KRISTEN NICOLE MD
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167. RISEN, SARAH RUNDELL MD
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168. RUSSELL, KIMBERLY TANIS MD
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169. SALAZAR, HUGO PASTOR JR MD
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170. SALDANHA, USHA MD
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171. SANCHEZ, DIMARYS MD
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172. SANJEEVAIAH, ARAVIND RAJ MD
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FULL-REG (535308)

173. SCHWAB, SHANNON JORY DO
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192. VIDI, SMITHA RAO MD  
    SCHOOL: MADRAS MED COLL, MADRAS UNIV, MADRAS, TAMIL NADU, INDIA-2002  
    FULL-REG (595105)

193. VIDI, VENKATESAN DYANESH MD  
    SCHOOL: MED COLL, MADURAI UNIV, MADURAI, TAMIL NADU-1997  
    FULL-REG (591228)

194. WANG, CHRISTINA X MD  
    SCHOOL: UNIV OF TEXAS, SOUTHWESTERN MED SCH, DALLAS-2011  
    FULL-REG (557753)

195. WEDIN, KYLE EDWARD MD  
    SCHOOL: UNIV OF TEXAS, SOUTHWESTERN MED SCH, DALLAS-2011  
    FULL-REG (593019)

196. WEISBRUCH, MICHAEL ADAM MD  
    SCHOOL: UNIV OF TEXAS MEDICAL SCHOOL, HOUSTON-2012  
    FULL-REG (567222)

197. WU, WESLEY JONATHAN MD  
    SCHOOL: BROWN UNIVERSITY PROGRAM IN MEDICINE, PROVIDENCE-2012  
    FULL-REG (573197)

198. YEN, CHRISTOPHER JAMES MD  
    SCHOOL: BAYLOR COLL OF MED, HOUSTON-2013  
    FULL-REG (575406)

199. ZARLING, JOEL PHILIP MD  
    SCHOOL: PRITZKER SCH OF MED, UNIV OF CHICAGO, CHICAGO-2009  
    FULL-REG (538892)

200. ZATAKIA, JIGNA DO  
    SCHOOL: WEST VIRGINIA SCH OF OSTEO MED, LEWISBURG-2008  
    FULL-REG (590799)

201. ZATIKYAN, NINA MD  
    SCHOOL: YEREVAN STATE MEDICAL UNIVERSITY NAMED FOR MKHITAR HERATSI-2000  
    FULL-REG (552341)

TEXAS MEDICAL BOARD  
TELEMEDICINE LICENSURE APPLICANTS FOR  
CONSIDERATION AT AUGUST, 2015 BOARD MEETING

1. SHKUROVICH, SERGEY MD  
    SCHOOL: NEW YORK MED COLL, VALHALLA-2003  
    TELE-REG (585159)

2. SUMMERS, ALLISON LUANNE MD  
    SCHOOL: UNIV OF NEBRASKA COLL OF MED, OMAHA-1999  
    TELE-REG (587389)
August 2015

Agenda Item 02d: Surgical Assistant Licensure Applicants to be Licensed

1. Cantu, Yolanda Ruth
2. Cortes, Gisela Veronica
3. Gonzalez, Leslie Jade
4. Greene, Joshua Hunter
5. Khan, Nawab
6. Lacks, Adam Coy
7. Luna – Cabrera, Alejandro
8. Persaud, Ravindra
9. Seamans, Cindy R
10. Stoughton, Scott T
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Agenda Item 5a: Applications for Initial Certification as Nonprofit Health Organization

1) Century Integrated Partners, Inc.
2) Children’s BMG
3) Clinical Wellness Group of Texas
4) Genesis Physician Alliance, Inc.
5) Hand Care Partners, Inc.
6) McAllen Preventive Care Institute
7) Med Management Associates
8) Nix Physicians, Inc.
9) NPPA Services
10) NTX Catalyst Senior Health Network, Inc.
11) Physician Prime Care
12) Sonic Pathology Group, Inc.
13) Texas Health Back Care
14) Texas Medical Alliance, Inc.
15) Valeo RMS Texas, Inc.
16) Vascular Center at Southeast Texas
August 2015

Agenda Item 5b – Requests for Biennial Recertification as Nonprofit Health Organizations

1) Advantage Medical Clinic
2) Centro de Salud Familiar La Fe, Inc.
3) Children’s Pediatrics of South Texas
4) HMH Physician Organization
5) Huguley Medical Associates
6) Permian Basin Healthcare Network
7) Southern Texas Physicians Network
8) TCH Pediatric Associates, Inc.
9) TMH Physician Organization
10) USMD Affiliated Services
11) Wesley Primary Care Clinic
12) Williamson County Clinical Services, Inc.
§163.1. Definitions.

The following words and terms (concerning General Definitions), when used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise.

(1) through (14) remain unchanged

(15) *Military service member*—A person who is on active duty, currently serving in the armed forces of the United States, in a reserve component of the armed forces of the United States, including the National Guard, or in the state military service of any state.

(16) *Military spouse*—A person who is married to a military service member who is currently on active duty.

(17) *Military veteran*—A person who served on active duty in the army, navy, air force, marine corps, or coast guard of the United States, or in an auxiliary service of one of those branches of the armed forces and who was discharged or released from active duty under conditions other than dishonorable.

(18) *Active duty*—A person who is currently serving as full-time military service member in the armed forces of the United States or active duty military service as a member of the Texas military forces, as defined by Section 437.001, Government Code, or similar military service of another state.

(19) *Armed forces of the United States*—Army, Navy, Air Force, Coast Guard, or Marine Corps of the United States or a reserve unit of one of those branches of the armed forces.
§163.2. Full Texas Medical License.
(a) through (c) unchanged

(d) Alternative License Procedures for Military Service Members, Military Veterans, and Military Spouses.

(1) An applicant who is a military service member, military veteran, or military spouse [the spouse of a member of the armed forces of the United States assigned to a military unit headquartered in Texas] may be eligible for alternative demonstrations of competency for certain licensure requirements. Unless specifically allowed in this subsection, an applicant must meet the requirements for licensure as specified in this chapter.

(2) To be eligible, an applicant must be a military service member, military veteran, or military spouse [the spouse of a person serving on active duty as a member of the armed forces of the United States] and meet one of the following requirements:
   (A) holds an active unrestricted medical license issued by another state that has licensing requirements that are substantially equivalent to the requirements for a Texas medical license; or
   (B) within the five years preceding the application date held a medical license in this state [that expired and was cancelled for nonpayment while the applicant lived in another state for at least six months].

(3) The executive director may waive any prerequisite to obtaining a license for an applicant described by subsection (d)(1) after reviewing the applicant’s credentials.

(4) Applications for licensure from applicants qualifying under this subsection, shall be expedited by the board's licensure division as if they meet the provisions of §163.13 of this title (relating to expedited Licensure Process). Such applicants shall be notified, in writing or by electronic means, as soon as practicable, of the requirements and process for renewal of the license.

(5) Alternative Demonstrations of Competency Allowed. Applicants qualifying under this subsection:
   (A) are not required to comply with §163.7 of this title (relating to Ten Year Rule); and
   (B) in demonstrating compliance with §163.11(a) of this title (relating to Active Practice of Medicine), must only provide sufficient documentation to the board that the applicant has, on a full-time basis, actively diagnosed or treated persons or has been on the active teaching faculty of an acceptable approved medical school, within one of the last three years preceding receipt of an Application for licensure.

(e) Applicants with Military Experience.

(1) For applications filed on or after March 1, 2014, the Board shall, with respect to an applicant who is a military service member or military veteran as defined in §163.1 of
this title, credit verified military service, training, or education toward the licensing requirements, other than an examination requirement, for a license issued by the Board. (2) This section does not apply to an applicant who:
   (A) has had a medical license suspended or revoked by another state or a Canadian province;
   (B) holds a medical license issued by another state or a Canadian province that is subject to a restriction, disciplinary order, or probationary order; or
   (C) has an unacceptable criminal history.
166.1. Physician Registration.
(a) Each physician licensed to practice medicine in Texas shall register with the board, submit a current physician profile, and pay a fee. A physician may obtain a registration permit ("permit") by submitting the required form and by paying the required registration fee to the board on or before the expiration date of the permit. The fee shall accompany an application prescribed by the board which sets forth the licensee's name, mailing address, primary practice site, and address for receipt of electronic mail if available.
(b) The board shall stagger initial registrations of newly-licensed physicians proportionally.
(c) The board shall provide notice to each physician at the physician's last known mailing address according to the records of the board at least 30 days prior to the expiration date of the registration permit and shall provide for a 30-day grace period for payment of the registration fee from the date of the expiration of the permit.
(d) Within 30 days of a physician's change of mailing or practice address or professional name from the addresses or professional name on file with the board, a physician shall notify the board in writing of such change and submit additional documentation if requested.
(e) All permits issued to license holders are valid for two-year periods.
(f) Emergency Contact Information.
   (1) As part of the physician's registration application, each physician shall submit to the board telephone numbers, fax numbers, and e-mail addresses, if available and as appropriate, that the board may use to contact the license holder in an emergency.
   (2) A licensed physician who receives an initial registration permit shall provide the information required under paragraph (1) of this subsection not later than the 30th day after the date the permit is issued to the extent the information has not been provided through a recent registration. Each physician who applies to renew a registration permit shall submit the information required under paragraph (1) of this subsection with the renewal application.
   (3) A physician shall report to the board any change in the information required under paragraph (1) of this subsection not later than the 45th day after the date of the change.
   (4) The information provided by a physician under this subsection is confidential and is not subject to disclosure under Chapter 552, Government Code. The board may not publish, release, or make available information provided by a license holder under this section except as provided by paragraph (5) of this subsection.
   (5) In the event of a public health emergency declared or invoked by the governor, the Department of State Health Services, or a federal agency, the board may publish, release, or make available information provided by a physician under this subsection for the sole purpose of disseminating information to:
      (A) a physician licensed by the board;
      (B) a designated city, county, state, or federal public health or emergency management official; or
(g) A physician may not obtain a registration permit if the physician has violated §170.002 or Chapter 171, Texas Health and Safety Code.

(h) A military service member who holds a license to practice in Texas is entitled to two years of additional time to complete any other requirement related to the renewal of the military service member’s license.
RULE §166.2 Continuing Medical Education

(a) As a prerequisite to the registration of a physician's permit a physician must complete 48 credits of continuing medical education (CME) every 24 months. CME credits must be completed in the following categories:

(1) At least 24 credits every 24 months are to be from formal courses that are:
   (A) designated for AMA/PRA Category 1 credit by a CME sponsor accredited by the Accreditation Council for Continuing Medical Education or a state medical society recognized by the Committee for Review and Recognition of the Accreditation Council for Continuing Medical Education;
   (B) approved for prescribed credit by the American Academy of Family Physicians;
   (C) designated for AOA Category 1-A credit required for osteopathic physicians by an accredited CME sponsor approved by the American Osteopathic Association;
   (D) approved by the Texas Medical Association based on standards established by the AMA for its Physician's Recognition Award; or
   (E) approved by the board for medical ethics and/or professional responsibility courses only.

(2) At least two of the 24 formal credits of CME which are required by paragraph (1) of this subsection must involve the study of medical ethics and/or professional responsibility. Whether a particular credit of CME involves the study of medical ethics and/or professional responsibility shall be determined by the organizations which are enumerated in paragraph (1) of this subsection as part of their course planning.

(3) The remaining 24 credits for the 24-month period may be composed of informal self-study, attendance at hospital lectures, grand rounds, or case conferences not approved for formal CME, and shall be recorded in a manner that can be easily transmitted to the board upon request.

(4) A physician who performs forensic examinations on sexual assault survivors must have basic forensic evidence collection training or the equivalent education. A physician who completes a CME course in forensic evidence collection that:
   (A) meet the requirements described in paragraph (1)(A) - (C) of this subsection; or
   (B) is approved or recognized by the Texas Board of Nursing, is considered to have the basic forensic evidence training required by the Health and Safety Code, §323.0045.

(5) A physician may complete one credit of formal continuing medical education, as required by paragraph (1) of this subsection, for each hour of time spent up to 12 hours, based on participation in a program sponsored by the board and approved for CME credit for the evaluation of a physician competency or practice monitoring.

(6) A physician whose practice includes the treatment of tick-borne diseases should complete CME in the treatment of tick-borne diseases that meet the requirements described in paragraph (1)(A) - (E) of this subsection.
(b) A physician must report on the registration permit application if she or he has completed the required CME during the previous 2 years.

(1) A physician may carry forward CME credits earned prior to a registration report which are in excess of the 48-credit biennial requirement and such excess credits may be applied to the following years' requirements.

(2) A maximum of 48 total excess credits may be carried forward and shall be reported according to the categories set out in subsection (a) of this section.

(3) Excess CME credits of any type may not be carried forward or applied to a report of CME more than two years beyond the date of the registration following the period during which the credits were earned.

(c) A physician shall be presumed to have complied with this section if in the preceding 36 months the physician becomes board certified or recertified by a specialty board approved by the American Board of Medical Specialties (ABMS) or the American Osteopathic Association Bureau of Osteopathic Specialists (AOA). This provision exempts the physician from all CME requirements, including the requirement for two credits involving the study of medical ethics and/or professional responsibility, as outlined in subsection (a)(2) of this section. This exemption is valid for one registration period only.

(d) A physician shall be presumed to have complied with subsection (a)(1) and (3) of this section if the physician is meeting the Maintenance of Certification (MOC) program requirements set forth by a specialty or subspecialty member board of the ABMS or the Osteopathic Continuous Certification (OCC) program requirements set forth by the AOA, and the member board's MOC or OCC program mandates completion of CME credits that meet the minimum criteria set forth under subsection (a)(1) of this section. This provision does not exempt the physician from the requirement for two credits involving the study of medical ethics and/or professional responsibility, as outlined in subsection (a)(2) of this section.

(e) A physician may request in writing an exemption for the following reasons:

(1) the physician's catastrophic illness;

(2) the physician's military service of longer than one year's duration outside the state;

(3) the physician's medical practice and residence of longer than one year's duration outside the United States; or

(4) good cause shown submitted in writing by the physician, which provides satisfactory evidence to the board that the physician is unable to comply with the requirement for CME.

(f) through (o) remain unchanged

(p) A physician, who is a military service member, may request an extension of time, not to exceed two years, to complete any continuing medical education requirements.
RULE §171.5 Duties of PIT Holders to Report

(a) Failure of any PIT holder to comply with the provisions of this chapter or the Medical Practice Act §160.002 and §160.003 may be grounds for disciplinary action as an administrative violation against the PIT holder.

(b) The PIT holder shall report in writing to the executive director of the board the following circumstances within thirty days of their occurrence:

(1) the opening of an investigation or disciplinary action taken against the PIT holder by any licensing entity other than the TMB;

(2) an arrest; a fine, citation or violation over $250 (excluding traffic tickets, unless drugs or alcohol were involved); charge or conviction of a crime; indictment; imprisonment; placement on probation; or receipt of deferred adjudication; and

(3) diagnosis or treatment of a physical, mental or emotional condition, which has impaired or [could] impairs the PIT holder's ability to practice medicine.
172.5 - Visiting Physician Temporary Permit

(a) Visiting Physician Temporary Permit - General.

(1) The executive director of the board may issue a permit to practice medicine to an applicant who intends to practice under the supervision of a licensed Texas physician, excluding training in postgraduate training programs:

(A) for educational purposes;
(B) to practice charity care to underserved populations in Texas;
(C) in cases of declared emergency disasters;
(D) for the provision of forensic psychiatric examinations related to criminal matters; or
(E) for the provision of specialized medical care for which the applying physician has demonstrated good cause for the issuance of the permit.

(2) In order to be determined eligible for a visiting physician temporary permit the applicant must:

(A) have an active medical license in another state, territory, Canadian province, or country;
(B) not have any medical license that is under restriction, disciplinary order, or investigation in another state, territory, or Canadian province;
(C) be supervised by a physician who:
(i) has an unrestricted license in Texas; and
(ii) does not have an investigation or proceeding pending for the restriction, cancellation, suspension, revocation, or other discipline of the supervising physician’s medical license, permit, or authority to practice medicine; and
(iii) has not been the subject of a disciplinary order, unless the order was administrative in nature;
(D) present written verification from the physician who will be supervising the applicant that the physician will provide continuous supervision of the applicant. Constant physical presence of the physician is not required but the physician must remain readily available; and
(E) present written verification from the supervising physician as to the purpose for the requested permit.

(3) Visiting physician temporary permits shall be valid for no more than ten working days and for a specified locale and purpose. The executive director of the board, in his/her discretion, may extend the length of the temporary permit if the applicant shows good cause for why the extended time is needed.

(b) Visiting Physician Temporary Permit - KSTAR.

(1) The executive director of the board may issue a permit to practice medicine to an applicant who intends to participate in the Texas A&M KSTAR program. In order to be determined eligible for a visiting physician temporary permit, the applicant must:
(A) present written verification from the KSTAR program of acceptance into the program;
(B) be supervised by a physician who:
   (i) has an unrestricted license in Texas; and
   (ii) does not have an investigation or proceeding pending for the restriction, cancellation, suspension, revocation, or other discipline of the supervising physician’s medical license, permit, or authority to practice medicine; and
   (iii) has not been the subject of a disciplinary order, unless the order was administrative in nature;
(C) present written verification from the physician who will be supervising the applicant that the physician will provide continuous supervision of the applicant. Constant physical presence of the physician is not required but the physician must remain readily available; and
(D) not have been convicted of a felony or have any medical license that is or has been under restriction, disciplinary order, or probation in another state, territory, or Canadian province based on a professional boundary violation, unless otherwise determined eligible by the Board.
(2) Visiting physician temporary permits for participation in the KSTAR program shall be valid for the length of the program. The executive director of the board, in his/her discretion, may extend the length of the temporary permit if the applicant shows good cause for why the extended time is needed.
In addition to any other application, registration, or renewal fees, the board shall charge the following late fee penalties:

(1) Physicians:
   (A) Physician's registration permit expired for 31 - 90 days--$75.
   (B) Physician's registration permit expired for longer than 90 days but less than one year- -$150.

(2) Physician Assistants:
   (A) Physician assistant's registration permit expired for 90 days or less--half the registration fee.
   (B) Physician assistant's registration permit expired for longer than 90 days but less than one year--full registration fee.

(3) Acupuncturists/Acudetox Specialists:
   (A) Acupuncturist's registration permit expired for 90 days or less--half the registration fee.
   (B) Acupuncturist's registration permit expired for longer than 90 days but less than one year--full registration fee.
   (C) Renewal of acudetox specialist certification expired for less than one year--$25.

(4) Non-Certified Radiologic Technicians. Renewal of non-certified radiologic technician's registration expired for 1 - 90 days--$25.

(5) Certification as a Non-Profit Health Organization fee for a late application for biennial recertification--$1,000.

(6) Surgical Assistants:
   (A) Surgical Assistant's registration permit expired for 90 days or less--half the registration fee.
   (B) Surgical Assistant - registration permit expired for longer than 90 days but less than one year--full registration fee.

(7) An individual who holds a license issued by the board is exempt from any penalty for failing to renew the license in a timely manner if the individual establishes, to the satisfaction of the board, that the individual failed to renew the license in a timely manner because the individual was serving as a military service member.
175.4 Fee Exemption for Military Service Member, Military Veteran, or Military Spouse.

The license application fees do not apply to a military service member, military veteran, or military spouse, as defined under §163.1 of this title (relating to Definitions).
175.4 Fee Exemption for Military Service Member, Military Veteran, or Military Spouse.

The license application fees do not apply to a military service member, military veteran, or military spouse, as defined under §163.1 of this title (relating to Definitions).
$184.2 Definitions.

The following words and terms, when used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise.

(1) through (11) remain unchanged

(12) Military service member—A person who is on active duty [currently serving in the armed forces of the United States, in a reserve component of the armed forces of the United States, including the National Guard, or in the state military service of any state].

(13) Military spouse—A person who is married to a military service member [who is currently on active duty].

(14) Military veteran—A person who served on active duty [in the army, navy, air force, marine corps, or coast guard of the United States, or in an auxiliary service of one of those branches of the armed forces] and who was discharged or released from active duty [under conditions other than dishonorable].

(15) Active duty—A person who is currently serving as full-time military service member in the armed forces of the United States or active duty military service as a member of the Texas military forces, as defined by Section 437.001, Government Code, or similar military service of another state.

(16) Armed forces of the United States—Army, Navy, Air Force, Coast Guard, or Marine Corps of the United States or a reserve unit of one of those branches of the armed forces.
§184.4. Qualifications for Licensure.

(a) through (b) remain unchanged

(c) Alternative License Procedures for Military Service Members, Military Veterans, and Military Spouses.

(1) An applicant who is a military service member, military veteran, or military spouse [the spouse of a member of the armed forces of the United States assigned to a military unit headquartered in Texas] may be eligible for alternative demonstrations of competency for certain licensure requirements. Unless specifically allowed in this subsection, an applicant must meet the requirements for licensure as specified in this chapter.

(2) To be eligible, an applicant must be a military service member, military veteran, or military spouse [the spouse of a person serving on active duty as a member of the armed forces of the United States] and meet one of the following requirements:

(A) holds an active unrestricted surgical assistant license issued by another state that has licensing requirements that are substantially equivalent to the requirements for a Texas surgical assistant license; or

(B) within the five years preceding the application date held a surgical assistant license in this state [that expired and was cancelled for nonpayment while the applicant lived in another state for at least six months].

(3) The executive director may waive any prerequisite to obtaining a license for an applicant described by subsection (c)(1) after reviewing the applicant’s credentials.

(4) Applications for licensure from applicants qualifying under this section, shall be expedited by the board's licensure division. Such applicants shall be notified, in writing or by electronic means, as soon as practicable, of the requirements and process for renewal of the license.

(5) Alternative Demonstrations of Competency Allowed. Applicants qualifying under this section, notwithstanding:

(A) the one year expiration in §184.5(a)(2) of this title (relating to Procedural Rules for Licensure Applicants), are allowed an additional six months to complete the application prior to it becoming inactive; and

(B) the 20 day deadline in §184.5(a)(6) of this title, may be considered for permanent licensure up to five days prior to the board meeting; and

(C) the requirement to produce a copy of a valid and current certificate from a board approved national certifying organization in §184.6(b)(4) of this title (relating to Licensure Documentation), may substitute certification from a board approved national certifying organization if it is made on a valid examination transcript.

(d) Applicants with Military Experience.

(1) For applications filed on or after March 1, 2014, the Board shall, with respect to an applicant who is a military service member or military veteran as defined in §184.2 of
this title (relating to Definitions), credit verified military service, training, or education toward the licensing requirements, other than an examination requirement, for a license issued by the Board.

(2) This section does not apply to an applicant who:
   (A) has had a surgical assistant license suspended or revoked by another state or a Canadian province;
   (B) holds a surgical assistant license issued by another state or a Canadian province that is subject to a restriction, disciplinary order, or probationary order; or
   (C) has an unacceptable criminal history.
RULE §184.6 Licensure Documentation

(a) Original documents may include, but are not limited to, those listed in subsections (b) and (c) of this section.

(b) Documentation required of all applicants for licensure.

(1) Birth Certificate/Proof of Age. Each applicant for licensure must provide a copy of a birth certificate and translation if necessary to prove that the applicant is at least 21 years of age. In instances where a birth certificate is not available the applicant must provide copies of a passport or other suitable alternate documentation.

(2) Name change. Any applicant who submits documentation showing a name other than the name under which the applicant has applied must present copies of marriage licenses, divorce decrees, or court orders stating the name change. In cases where the applicant’s name has been changed by naturalization, the applicant should send the original naturalization certificate by certified mail to the board offices for inspection.

(3) Examination verification. Each applicant for licensure must have the appropriate testing service that administered the surgical assistant examination submit verification of the applicant’s passage of the examination directly to the board.

(4) Certification. All applicants must submit:

(A) a valid and current certificate from a board approved national certifying organization; and

(B) a certificate of successful completion of an educational program whose curriculum includes surgical assisting submitted directly from the program, unless the applicant qualifies for the special eligibility provision regarding education under §184.4(a)(13)(B) of this title (relating to Qualifications for Licensure).

(5) Transcripts. Each applicant must have his or her educational program(s) submit a transcript of courses taken and grades obtained to demonstrate compliance with curriculum requirements under §184.4(a)(13)(C) of this title.
(6) Evaluations.

(A) All applicants must provide evaluations, on forms provided by the board, of their professional affiliations for the past three years or since graduation from an educational program, in compliance with §184.4(a)(13) of this title, whichever is the shorter period.

(B) The evaluations must come from at least three physicians who have each supervised the applicant for more than 100 hours or a majority of the applicant's work experience.

(C) An exception to subparagraph (B) of this paragraph may be made for those applicants who provide adequate documentation that they have not been supervised by at least three physicians for the three years preceding the board's receipt of application or since graduation, whichever is the shorter period.

(7) Temporary license affidavit. Each applicant must submit a completed form, furnished by the board, titled "Temporary License Affidavit" prior to the issuance of a temporary license.

(8) License verifications. Each applicant for licensure who is licensed, registered, or certified in another state must have that state submit directly to the board, that the applicant's license, registration, or certification is current and in full force and that the license, registration, or certification has not been restricted, suspended, revoked or otherwise subject to disciplinary action. The other state shall also include a description of any sanctions imposed by or disciplinary matters pending in the state.

(c) Applicants may be required to submit other documentation, which may include the following:

(1) Translations. Any document that is in a language other than the English language will need to have a certified translation prepared and a copy of the translation submitted with the translated document.

(A) An official translation from the school or appropriate agency attached to the foreign language transcript or other document is acceptable.

(B) If a foreign document is received without a translation, the board will send the applicant a copy of the document to be translated and returned to the board.

(C) Documents must be translated by a translation agency who is a member of the American Translation Association or a United States college or university official.
(D) The translation must be on the translator's letterhead, and the translator must verify that it is a "true word for word translation" to the best of his/her knowledge, and that he/she is fluent in the language translated, and is qualified to translate the document.

(E) The translation must be signed in the presence of a notary public and then notarized. The translator's name must be printed below his/her signature. The notary public must use the phrase: "Subscribed and Sworn this _______ day of ________, 20___." The notary must then sign and date the translation, and affix his/her notary seal to the document.

(2) Arrest records. If an applicant has ever been arrested the applicant must request that the arresting authority submit to the board copies of the arrest and arrest disposition.

(3) Inpatient treatment for alcohol/substance disorder or mental illness. Each applicant that has been admitted to an inpatient facility within the last five years for treatment of alcohol/substance disorder or mental illness must submit the following:
   (A) applicant's statement explaining the circumstances of the hospitalization;
   (B) all records, submitted directly from the inpatient facility;
   (C) a statement from the applicant's treating physician/psychotherapist as to diagnosis, prognosis, medications prescribed, and follow-up treatment recommended; and
   (D) a copy of any contracts signed with any licensing authority, professional society or impaired practitioner committee.

(4) Outpatient treatment for alcohol/substance disorder or mental illness. Each applicant that has been treated on an outpatient basis within the past five years for alcohol/substance disorder must submit the following:
   (A) applicant's statement explaining the circumstances of the outpatient treatment;
   (B) a statement from the applicant's treating physician/psychotherapist as to diagnosis, prognosis, medications prescribed, and follow-up treatment recommended; and
   (C) a copy of any contracts signed with any licensing authority, professional society or impaired practitioners committee.

(5) Malpractice. If an applicant has ever been named in a malpractice claim filed with any liability carrier or if an applicant has ever been named in a malpractice suit, the applicant must:
(A) have each liability carrier complete a form furnished by this board regarding each claim filed against the applicant's insurance;
(B) for each claim that becomes a malpractice suit, have the attorney representing the applicant in each suit submit a letter to the board explaining the allegation, relevant dates of the allegation, and current status of the suit. If the suit has been closed, the attorney must state the disposition of the suit, and if any money was paid, the amount of the settlement. If such letter is not available, the applicant will be required to furnish a notarized affidavit explaining why this letter cannot be provided; and
(C) provide a statement composed by the applicant, explaining the circumstances pertaining to patient care in defense of the allegations.

(6) Additional documentation. Additional documentation may be required as is deemed necessary to facilitate the investigation of any application for medical licensure.
(d) The board may, in unusual circumstances, allow substitute documents where proof of exhaustive efforts on the applicant's part to secure the required documents is presented. These exceptions are reviewed by the board's executive director on a case-by-case basis.
§184. 8. License Renewal.

(a) Surgical assistants licensed by the board shall register biennially and pay a fee. A surgical assistant may, on notification from the board, renew an unexpired license by submitting a required form and paying the required renewal fee to the board on or before the expiration date of the license. The fee shall accompany a written application that sets forth the licensee's name, mailing address, residence, the address of each of the licensee's offices, and other necessary information prescribed by the board.

(b) The board may prorate the length of the initial surgical assistant registration and registration fees, so that registrations expire on a single date, regardless of the board meeting at which the surgical assistant is licensed.

(c) The board shall provide written notice to each practitioner at the practitioner's address of record at least 30 days prior to the expiration date of the license.

(d) Within 30 days of a surgical assistant's change of mailing, residence or office address from the address on file with the board, a surgical assistant shall notify the board in writing of such change.

(e) A licensee shall furnish a written explanation of his or her affirmative answer to any question asked on the application for license renewal, if requested by the board. This explanation shall include all details as the board may request and shall be furnished within 14 days of the date of the board's request.

(f) Falsification of an affidavit or submission of false information to obtain renewal of a license shall subject a surgical assistant to denial of the renewal and/or to discipline pursuant to §206.301 of the Act.

(g) Expired Annual Registration Permits.

   (1) If a surgical assistant's registration permit has been expired for 90 days or less, the surgical assistant may obtain a new permit by submitting to the board a completed permit application, the registration fee, and the penalty fee, as defined in §175.3(6) of this title (relating to Penalties).

   (2) If a surgical assistant's registration permit has been expired for longer than 90 days but less than one year, the surgical assistant may obtain a new permit by submitting a completed permit application, the registration fee, and a penalty fee as defined in §175.3(6) of this title.

   (3) If a surgical assistant's registration permit has been expired for one year or longer, the surgical assistant's license is automatically canceled, unless an investigation is pending, and the surgical assistant may not obtain a new permit.
(4) A surgical assistant may not hold himself out as a licensed surgical assistant if he holds an expired permit.

(h) A military service member who holds a surgical assistant license in Texas is entitled to two years of additional time to complete any other requirement related to the renewal of the military service member’s license.
RULE §184.21 Impaired Surgical Assistants

(a) Mental or physical examination requirement. The board may require a licensee to submit to a mental and/or physical examination by a physician or physicians designated by the board if the board has probable cause to believe that the licensee is impaired. Impairment is present if one appears to be unable to practice with reasonable skill and safety to patients by reason of age, illness, drunkenness, excessive use of drugs, narcotics, chemicals, or any other type of material; or as a result of any mental or physical condition. Probable cause may include, but is not limited to, any one of the following:

(1) sworn statements from two people, willing to testify before the board, medical board, or the State Office of Administrative Hearings that a certain licensee is impaired;

(2) a sworn statement from an official representative of the Texas Society of Surgical Assistants stating that the representative is willing to testify before the board that a certain licensee is impaired;

(3) evidence that a licensee left a treatment program for alcohol or chemical dependency before completion of that program;

(4) evidence that a licensee is guilty of intemperate use of drugs or alcohol;

(5) evidence of repeated arrests of a licensee for intoxication;

(6) evidence of recurring temporary commitments of a licensee to a mental institution; or

(7) medical records indicating that a licensee has an illness or condition which results in the inability to function properly in his or her practice.

(b) Chapter 180 of this title (relating to Texas Physician Health Program and Rehabilitation Orders) shall be applied to surgical assistants who are believed to be impaired and eligible for the Texas Physician Health Program. Rehabilitation orders entered into on or before January 1, 2010 shall be governed by law as it existed immediately before that date. Rehabilitation Order. The board through an agreed order or after a contested proceeding, may impose a nondisciplinary rehabilitation order on any licensee, or as a prerequisite for licensure, on any licensure applicant.
Chapter 180 of this title (relating to Rehabilitation Order) shall govern procedures relating to surgical assistants who are found eligible for a rehabilitation order. If the provisions of Chapter 180 conflict with the Act or rules under this chapter, the Act and provisions of this chapter shall control.
§184.25. Continuing Education.

(a) through (b) remain unchanged

(c) A licensed surgical assistant may request in writing an exemption for the following reasons:
   (1) the licensee’s catastrophic illness;
   (2) the licensee’s military service of longer than one year's duration outside the state;
   (3) the licensee’s residence of longer than one year's duration outside the United States;
   or
   (4) good cause shown submitted in writing by the licensee that gives satisfactory evidence to the board that the licensee is unable to comply with the requirement for continuing education.

(d) through (l) remain unchanged

(m) A surgical assistant, who is a military service member, may request an extension of time, not to exceed two years, to complete any CE requirements.