

GUAM BOARD OF MEDICAL EXAMINERS

Wednesday, May 8, 2024 at 4:00 PM

Join Zoom Meeting: <https://us06web.zoom.us/j/84970418172?pwd=tb8FbjbzSeQAFb8mltg5ASVQWLSWu.1>

Meeting ID: 849 7041 8172 Passcode: 166926

MINUTES

Topic	DECISION(S) / ACTION(S) MADE	Responsible Party	Status	
I.	Call to Order	Meeting Chaired by: Dr. Berg	1610 Cailed to Order	
	<p>A. Roll Call: GBME <i>Present Virtually at Remote location:</i> <input checked="" type="checkbox"/> Nathaniel B. Berg, M.D., Chairperson <input checked="" type="checkbox"/> Luis G. Cruz, M.D. <input checked="" type="checkbox"/> Alexander D Wielaard, M.D. <input checked="" type="checkbox"/> John Sidell, Medical Director of GMH <input type="checkbox"/> Joleen Aguon, M.D. <input type="checkbox"/> Annette David, M.D.</p>	<p>OTHERS PRESENT: <i>Present at HPLO Conference Room:</i> Baltazar (Tre) Hattori III, HPLO Breanna Sablan, HPLO <i>Present Virtually at Remote location:</i> Mark Anderson, OAG Zennia Pecina, HPLO Jennifer Bruan, HPLO</p>	Chair Chair	Quorum Established
	<p>B. Election of Board Officers The Chair stated that the Election will be postponed pending updates regarding membership.</p>	Chair	Postponed	
	<p>C. Confirmation of Public Notice</p>	Chair	Confirmed	
II.	Adoption of Agenda	<i>Motion to Adopt the Agenda: Dr. Berg.</i>	GBME Adopted	
III.	Review and Approval of Minutes	<p>Draft Minutes dated March 13, 2024. Dr. Berg noted a discrepancy regarding Case 2022-002, which is referenced in the minutes as having been closed, it was referenced also that the basis of the closure of that case was that Dr. Berg would be working with the employer, who is well known to the Board in terms of involvement with this case. And, at the request of the employer, continued monitoring is going to be implemented. Dr. Berg has been requested to be involved in that process. Therefore, that case is not going to be under the purview of the Guam Board of Medical Examiners. The case remains closed as indicated, but that it was due to the excellent communication with the employer. <i>Motion to Approve, as amended: Dr. Berg</i></p>	GBME	Unanimously Approved, as amended
IV.	Treasurer's Report	B. Sablan informed the Board that in February of 2024, there was a new launch of a financial management system within the Department of Administration, DOA. B. Sablan states that with her access to that financial system, there	Mr. Flores Noted	

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	have been difficulties trying to do checks and balances with different funding levels for each Board. Due to this there is no financial report available. B. Sablan will work with the Board treasurer to prepare one for June.			
V.	<p>HPLO Administrator's Report</p> <p>Z. Pecina reported on the following:</p> <ul style="list-style-type: none"> • Welcomed Dr. Sidell to the Board, who confirmed that he completed the Ethics Training. • The Board composition is pending the appointment of two. A M.D. appointment to the Board is pending, and as well as the absence of a public member. Dr. Berg expressed that Mr. Flores is currently serving on the Board due to being requested to do so, indicating his willingness to welcome a new public member and highlighting the need for the appointment of a Vice-Chair. Dr. Berg mentioned being in communication with the Governor's office to obtain a list of suitable individuals for Board appointments. Z. Pecina emphasized the importance of Mr. Flores staying longer for Board stability due to his knowledge of its operations. • HPLO submitted two grants to the FSMB, focusing on disaster preparedness and automation of Board operations. Dr. Berg praised the significance of the grants and encouraged further funding efforts. 	HPLO		All
VI.	<p>Chairperson's Report</p> <p>Dr. Berg stated:</p> <ul style="list-style-type: none"> • During the approval of the minutes, he had specifically addressed an addendum regarding Case 2022-002, where he stated that in his capacity as chairman of the Guam Board of Medical Examiners, he would continue working with the employer of the physician involved to develop an appropriate ongoing monitoring program. <i>Motion to approve with minutes with the foregoing addendum: Dr. Berg.</i> NOTE: Action recorded in Agenda Item III, above. • The Chair reminded all attendees, including Dr. Seidel, of the requirement for all to vote during meetings. • The Chair highlighted the positive experience at the recent FSMB meeting, attended by several members. They emphasized the value of attending such meetings, especially for the Board attorney, noting the exceptional sections dedicated to them. The meetings were found to be engaging and informative, featuring excellent speakers and opportunities for interaction with professionals. The Chair encouraged all members to consider attending future FSMB meetings, mentioning that they are all members of the FSMB as active members of the Board. Details about next year's meeting in Seattle will be provided later. • The Chair shared positive feedback from the recent FSMB meeting regarding Guam's adoption of the Federal Credentialing Verification Service (FCVS), which was praised as a significant time saver. Additionally, the quick provision of temporary licensure, following the New Hampshire model, was acknowledged as beneficial for Guam. Utilizing FCVS for primary verification of credentials was highlighted, improving scrutiny of applicants' credentials. The Chair expressed satisfaction with this approach, which was encouraged by the FSMB in a previous meeting. The meeting also extended thanks to Guam for its initiatives. Grants-related matters were covered by Z. Pecina. • Physicians' Health Programs: the Chair emphasized the need for physicians with health-related issues to be 	Dr. Berg		Noted

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	<p>managed by such programs rather than the Board of Medical Examiners. Collaborative efforts are underway to develop a program in Guam, involving input from the Chair from Tennessee and cooperation with public and private entities. The aim is to create a program that encompasses all licensed professionals in Guam, not just physicians, with joint resources and autonomy from the Board. Collaborations with Tennessee boards and local universities are ongoing, with a scheduled meeting in mid-June to further progress. Assistance from FSMB and the Association of Physician Health Programs is also being sought. The Chair expressed excitement about the progress and proposed a timeline of no more than one year for implementation, potentially requiring legislative support. This initiative was highlighted as a significant achievement from the recent FSMB meeting. The Chair acknowledged Dr. Sidell's interest in participating in developing a physician's health program for GMH, and Dr. Wielaard's presumed interest in supporting the program's development for island-wide implementation. Dr. Wielaard confirmed his support for the initiative, expressing willingness to collaborate. The Chair expressed appreciation for the unified approach and committed to involving both Dr. Sidell and Dr. Wielaard in the process moving forward.</p> <ul style="list-style-type: none"> • The Chair discussed the pressing issue of alternative licensing pathways, highlighting its national significance and the challenges faced in Guam. Additionally, they touched on the difficulties of licensing international medical graduates, citing federal regulations that require U.S.-based residency for physician applicants. The Chair revealed their involvement in an FSMB working group tasked with developing a policy for physician re-entry that addresses testing and training requirements. However, progress has been impeded by regulatory hurdles and the necessity for congressional and AMA input. A meeting is scheduled in Washington DC to address alternative licensing pathways. • The Chair provided details about their meeting with IAMRA (International Association of Medical Regulators), emphasizing its national importance. They highlighted the presence of IAMRA's president and the head from Australia, discussing the lessons to be learned from countries like New Zealand regarding physician migration. New Zealand's approach, which recognizes certain countries' training without additional testing, was contrasted with the U.S. where training in the country is typically required. The Chair elaborated on New Zealand's policy, where training in the U.S., Canada, or certain other countries is deemed equivalent to local training, facilitating easier licensure. Additionally, he addressed New Zealand and Australia's ability to restrict physician movement for licensing, contrasting with the U.S.'s free state-to-state migration. The Chair noted Congress's interest in exploring alternative pathways to address physician shortages, which could involve requiring practice in designated shortage areas for international graduates. They concluded by highlighting the complexity of these issues and their ongoing efforts to address them. • The Chair discussed the process of joining IAMRA (International Association of Medical Regulatory Authorities), detailing the challenges faced due to fee structures. he successfully appealed for the Board to be placed in the lowest fee tier. Funding for IAMRA membership is now feasible, and the Chair proposed sending a delegation to IAMRA meetings, which often coincide with FSMB meetings. 		

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	<ul style="list-style-type: none"> • The Chair reiterated the requirement for the FCVS and encouraged timely submission for temporary licensure while awaiting FCVS verification. The Chair provided clarification on FSMB and FCVS roles, emphasizing their importance in credential verification across jurisdictions. They also addressed instances where applications were submitted without FCVS verification, reiterating the Board's policy on permanent licensure. The Chair concluded by inviting questions or comments from the attendees. <p>The following summarizes the discussions regarding the Chair's report:</p> <ul style="list-style-type: none"> • Asst AG Anderson raised potential concerns about the financial implications an a professional health program, drawing from his experience in Montana where dues include fees for the lawyer assistance program. He expressed apprehension about potential additional costs associated with participating in such programs. Other attendees acknowledged the validity of his concerns, agreeing that financial considerations play a significant role in decision-making. Dr. Berg responded to Asst AG Anderson's concerns by acknowledging the validity of the financial considerations involved in implementing an impaired licensed professional program. He expressed intentions to seek funding assistance from organizations like the FSMB and the National Association of Physician Health Programs to help mitigate costs and ensure that dues for such programs can be spread out and reduced. Dr. Berg also addressed the complexities of developing a program that encompasses various professions, highlighting the need for collaboration and integration across different fields. Dr. Berg emphasized the importance of addressing mental health issues within the professional community and expressed confidence in overcoming obstacles to establish a comprehensive program. He underscored the urgency of the matter, citing instances of suicides within the healthcare and legal communities in Guam and emphasized the responsibility to address these issues promptly. He stated that specifics will have to be addressed with each of the HPLO Boards. • Dr. Wielaard sought clarification regarding physicians who have been practicing outside the U.S. for an extended period and wish to re-enter practice in Guam. He mentioned the PACE program as a potential requirement for such individuals. Dr. Berg clarified that while the PACE program is commonly accepted, there are other reentry programs recognized by the FSMB. He emphasized the need for such programs to assess clinical acumen rather than just academic knowledge, noting that a physician's ability to meet current U.S. standards is crucial. • Dr. Berg expressed frustration with the current requirements, particularly for physicians trained in the U.S. who have provided excellent care outside the country. He acknowledged the political challenges in changing these requirements but highlighted the importance of exploring uniform policies and avoiding multiple, disparate regulations. He shared insights from discussions with Tennessee officials about their experiences in passing legislation related to international medical graduates. Dr. Berg emphasized the necessity of close collaboration between medical boards, legislators, and medical associations to avoid the pitfalls encountered by Tennessee. He indicated plans to learn from Tennessee's experience and involve relevant stakeholders in Guam's decision-making process regarding similar legislation. • Dr. Berg expressed openness to participation in national legislative decision-making through the FSMB, 		

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	<p>emphasizing the importance of Guam having a voice in such matters despite her size. He encouraged others to become involved in FSMB activities and even run for office within the organization to ensure Guam's interests are represented effectively.</p> <ul style="list-style-type: none"> Acknowledging the efforts of Z. Pecina and B. Hattori in facilitating discussions and travel arrangements, Dr. Berg expressed gratitude for their support and willingness to navigate the challenges of frequent travel for the benefit of Guam's healthcare community. He recognized their contributions as vital to making a meaningful impact despite the associated disruptions. 		
VII.	<p>Old Business</p> <p>A. Complaint(s):</p> <ol style="list-style-type: none"> GBME-CO-20-005 – Received: 09/18/2020. Dr. Berg reported that progress has been on hold due to the attorney situation. Now that Asst AG Anderson is assigned to the Board, Dr. Cruz will meet with Asst AG Anderson. The Chair requested HPLO to set-up a meeting with Asst AG Anderson to address the request for an off-island pediatrician to help resolve the complaint. B. Sablan reported that this issue was referred to an off-island pediatrician, Dr. Adams. B. Sablan confirmed that the report had been forwarded previously but agreed that sharing it again would be beneficial for ensuring everyone is on the same page before the meeting. GBME-CO-2022-002 – Received: 01/06/2022. Dr. Berg explained that the case involves a physician who is not currently practicing in Guam. The investigation is pending resolution by Guam Memorial Hospital Authority (GMHA), which has jurisdiction over the physician's practice. Dr. Berg emphasized the Board's mission to protect the public and noted that since the physician is not practicing in their jurisdiction, there is no immediate danger to the public. Regarding physician health programs, Dr. Berg highlighted the importance of protecting physicians as members of the public. Dr. Berg expressed interest in discussing the case further with Dr. Sidell to establish a timeline for resolution but suggested that this conversation could take place later. GBME-CO-2022-010 – Received: 06/21/2022. Dr. Berg indicated that the case is awaiting a legal opinion but noted that there is no immediate urgency to address it. Dr. Berg expressed a preference to defer to Dr. David on the matter once she returns. GBME-CO-2023-004 – Received: 07/31/2023 Dr. Berg expressed his intention to resolve it amicably. He mentioned that efforts have been made to contact both the physician and the patient involved in the complaint. Dr. Berg plans to meet with the patient to discuss potential resolutions, noting that the root of the complaint appears to stem from communication issues. The physician has shown a willingness to work with the patient to address these issues and rebuild their relationship. Dr. Berg will keep the Board informed of any developments and expressed hope for a satisfactory resolution. 	<p>GBME</p> <p>Dr. Cruz</p> <p>Dr. Berg</p> <p>Dr. David</p> <p>Dr. Berg</p>	<p></p> <p>In Progress</p> <p>In Progress</p> <p>In Progress</p> <p>In Progress</p>

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	<p>B. Accusation: GBME-001-2023. NOTE: Dr. Berg recused himself from the following discussion due to the conflict of interest since he is a partner in his clinic.</p> <ul style="list-style-type: none"> • B. Sablan mentioned that hearings have been conducted at the HPLO with the contracted attorney, Hearing Officer, Georgette Concepcion. Three motions have been filed to their office: a motion to dismiss the accusation against the doctor, a motion to stay and continue the hearing on the merits of the case, and a motion to disqualify the prosecuting attorney. The Hearing Officer has abstained from making any decision regarding the motion to disqualify the prosecuting attorney and will defer the motion to the Board. The Hearing Officer will provide a proposed decision and recommendations to the Board regarding the other two motions, and the report will be received by the office on Friday for dissemination to the Board members for review and decision-making in June. • Per Dr. Wielard’s request, the HPLO will make the related documentation available to the Board members. In addition, HPLO agreed to provide case information to Asst AG Anderson. • The Board noted HPLO’s comment that, if the physician is convicted in the criminal case, the Board would have to address the impact on the physician’s licensure. • Dr. Cruz raised concerns about the timing of the hearing and whether it’s premature given the ongoing legal proceedings. Other Board members expressed confusion about the situation and questioned whether the decision-making process was appropriate. The Board clarified that the attorney would provide background information on Friday, and the Board would then make decisions based on the motions presented. Regarding the physician’s practice, it was noted that he holds an active license but is required to have a chaperone present when seeing female patients, as a precautionary measure decided by the Board. <p>B. Arthur Root Jr. – Certified Laser Specialist, Non-Ablative Laser Tattoo Removal The Chair reported that the Board would like Mr. Root to be present to provide his input.</p> <p>C. Samer Shuaib, M.D. - Letter to the Board The Chair stated that Dr. Shuaib’s letter of concern was reviewed thoroughly, and after giving him ample opportunity to provide additional information, it was determined that there is no issue related to a specific licensee of the Guam Board of Medical Examiners failing to comply with the Medical Practices Act. <i>Therefore, a letter will be sent to Dr. Shuaib indicating that no action will be taken, and the case will be closed without prejudice.</i> This means that if Dr. Shuaib has further concerns regarding the behavior of a specific physician licensee in the future, those concerns can be incorporated into a new complaint. Otherwise, the case will be closed but remain on file.</p>	<p>B. Sablan</p> <p>GBME</p>	<p>In Progress</p> <p>Tabled</p> <p>Closed</p>
VIII.	New Business	A. Application for Full Licensure:	GBME

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	<p><i>Note: Dr. Berg reiterated the concern he shares with Tre regarding the lack of submission of FCVS (Federation Credentials Verification Service) documents and files by numerous applicants. They are addressing this issue individually and plan to communicate directly with credentialing offices at larger facilities. Additionally, they will send out another email to inform all applicants about the FCVS requirement, emphasizing that notarization is not necessary for renewals. Dr. Berg also suggested notifying the heads of the Medical Association and Medical Society to ensure that their members are aware of this requirement.</i></p>		
	<p>1. Amy Cummings The Chair reported the application was complete with no issues in the NPDB. <i>Motion to Approve: Dr. Berg.</i></p>		Unanimously Approved
	<p>2. Arthur D. Daniel The Chair reported the application was complete with no issues in the NPDB. <i>Motion to Approve: Dr. Berg</i></p>		Unanimously Approved
	<p>3. Jonathan W. McNeely The Chair stated that the GBME, similar to California, has strict regulations regarding the intentional or unintentional misrepresentation of Board certification. Dr. McNeely listed multiple specialties, including pediatrics, internal medicine, nephrology, and interventional nephrology, which are not recognized by the American Board of Medical Specialists (ABMS). While this may have been an error on his part, it's important to clarify that such mixed certifications are not considered valid Board certification. Given that there are no other issues within his license application, and he holds a temporary license, the Chair proposed that his license be approved contingent upon him correcting this issue. <i>Motion to conditionally approve pending the Chair's review of his update concerning the Board certification issue: Dr. Berg</i></p>		Unanimously Conditionally Approved
	<p>4. Judd W. Dawson Dr. Berg reports the applicant has a clean record with the NPDB and the FSB. <i>Motion to Approve: Dr. Berg.</i></p>		Unanimously Approved
	<p>5. Axel Rosengart The Chair reported there appears to be an error in the application regarding his Board certifications. The applicant states that he is certified in practices that are not recognized by the ABMS. This discrepancy needs to be rectified, as the application explicitly states that only ABMS-recognized boards should be listed. Since he holds a temporary license and has ample time to address these issues, the Chair suggest to table his license for consideration until these discrepancies are resolved. During the vote, the Chair proposed to conditionally approve vice table a decision. <i>Motion to conditionally approve pending clarification regarding his Board certification: Dr Berg</i></p>		Unanimously Conditionally Approved

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	<p>6. Anthony W. Kim The Chair reported that the applicant's <i>application is incomplete</i> as he has not submitted the required FCVS credentials. He will be notified of this deficiency and asked to submit the necessary FCVS documentation.</p>		Unanimously Tabled
	<p>7. Colette D. Reahl The Chair reported that Dr. Colette D. Reahl has listed herself as being Board certified in lifestyle medicine, which is not a recognized Board certification. However, there may be some organization with a similar name that offers certification in lifestyle medicine, but it is not recognized by the ABMS or other medical boards. Dr. Reahl will need to correct this error in her application. Dr. Berg proposed that her license be approved pending her providing correction or clarification regarding the unrecognized certification in lifestyle medicine. NOTE: Dr. Sidell recommended the application be updated to make the ABMS requirement absolutely clear. HPLO to draft a change to the application for consideration. <i>Motion to approve pending clarification regarding her Board certification: Dr Berg</i></p>		Unanimously Conditionally Approved
	<p>8. Kitty E. Victoria The Chair reported the applicant has numerous discrepancies identified on her FCVS report. The Board's obligation is to investigate these discrepancies to ensure accuracy. Since adopting FCVS, the Board has stated that full licensure will not be provided until these discrepancies are addressed satisfactorily. The applicant has a BA in psychology and attended a recognized medical school in Antigua. However, it took her five years to graduate due to several multi-month pauses in her medical education. The reason provided for these pauses, "studying for exams," is considered unusual by FCVS standards, requiring further clarification. Additionally, the applicant is licensed in three states and has a negative NPDB despite only having a few years of work experience. These discrepancies need clarification to the satisfaction of FCVS. <i>Her full license application will be deferred until these issues are clarified</i>, and the Board will encourage her to apply for a temporary license while the permanent one is under review.</p>		Tabled
	<p>9. Semjon Tsyrlin The Chair reported that the applicant has multiple discrepancies in his self-reported FCVS. The applicant attended three different medical schools in the Philippines but only listed two on his application. He explained personal issues that required him to take a leave of absence and switch schools, which were well explained but discrepant in some respects. Additionally, he listed himself as "Board eligible," despite still being in a family medicine residency that ends in June. Inaccuracies in listing specific dates and completion of three years of progressive postgraduate medical education make his license application incomplete. The applicant has a month to rectify these issues, and the Board will work with the relevant authorities to ensure accurate applications. Further discussion on his <i>case will be postponed until next month, pending clarification of discrepancies.</i></p>		Tabled
	<p>B. Application(s) for Reinstatement of Licensure:</p>		

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	<p>1. Sylvia S. Cruz The Chair reported that the applicant's license expired in 2017; therefore, a significant amount of time has lapsed before submitting for reinstatement. The Board has requested documentation to ensure there hasn't been a gap of more than two years in her practice. <i>While the applicant has a temporary license, reinstatement of her permanent license is pending this clarification.</i> Concerns were raised about the applicant's potential practice area, particularly if she plans to work in obstetrics and gynecology. However, the Board's focus is on ensuring continuity in her medical practice without a two-year gap. The specific nature of her future practice may be addressed in the future, but for reinstatements and renewals, the primary concern is the continuity of medical practice. The Board noted Dr. Sidell expressed concern regarding the lack of knowledge of any recent clinical practice, especially when considering admission privileges. <i>The Chair concluded that, since the applicant applied for a temporary and reinstatement applications, he has the authority and will approve a temporary license only.</i> Dr. Sidell expressed concern of the Chair's approval since her clinical practice in the past years is unknown. The Chair stated that the rules and regulations currently allow the submission of multiple applications, but agreed with Dr. Sidell's concern that the GBME should re-evaluate this process; therefore, he stated that <i>this issue will be added to next meeting's agenda.</i></p>			<p>Tabled Reinstatement Application</p> <p>Noted the Chair approved the Temporary License</p> <p>HPLO to added Agenda Item for Next Meeting</p>
	<p>2. Christopher S. Seitz The Chair reported the applicant's situation involves the reinstatement of his Guam licensure after holding a IMLCC license until December 2023. To reinstate his license, he must go through a specific process either via the IMLCC or directly through the Guam Board of Medical Examiners. The applicant missed the IMLCC window to apply; therefore, he is applying for reinstatement through the GBME. Once approved, his IMLCC license will also be reinstated accordingly. <i>The Board will defer further action on his case until one of these reinstatement processes is completed.</i></p>			<p>Tabled</p>
	<p>C. Application(s): For Limited Licensure</p>			
	<p>1. Michael S. Aguilar The Chair reported there's a discrepancy in the language used regarding his role. While some parts of the application suggest he will be covering for a physician, elsewhere it specifies that he will be supervised at all levels. To ensure clarity, the language indicating he will be covering for someone needs to be corrected. However, as long as it's clarified that he will be supervised, there are no other issues with his application. Therefore, no vote is needed, and he will be granted a limited licensure.</p>			<p>Approved</p>
	<p>D. Collaborative Practice Agreement(s):</p>			
	<p>1. Fironia Rofail, PA-C <i>Signed by: Dr. Berg</i></p>			<p>Approved</p>

Topic		DECISION(S) / ACTION(S) MADE	Responsible Party	Status
		2. Karla Wang, PA-C <i>Signed by: Dr. Berg</i>		Approved
		3. Kamille Wang, PA-C <i>Signed by: Dr. Berg</i>		Approved
		4. Genelyn I. Paz, PA-C <i>Signed by: Dr. Berg</i>		Approved
IX.	Announcement	Next regularly scheduled Board meeting: Wednesday, June 12, 2024 at 4:00 pm.	GBME	Set Meeting Time
X.	Adjournment	<i>Motion to Adjourn: Dr. Berg; 2nd Dr. Cruz</i>	GBME	1810 Adjourned

Minutes Drafted by: FLAME TREE Freedom Center, Inc.

Date Submitted: 5/26/2024

Submitted by the GBME Secretary:

Date:

Approved by the GBME with or without changes:



Date: 6/12/2024

Certified by or Attested by the Chairperson:



Date: 6/12/2024