

# Med Board

## Newsletter

A Publication of the Wisconsin Medical Examining Board

Fall 2018

### Chair's Corner

“The good old days are now.” Tom Clancy

We humans often reflect on how things were better in the past, and physicians are certainly not an exception to having these musings. We may reminisce about how we only had to focus on the patient, not systems of care or patient satisfaction; or how the doctor-patient relationship was better, without having to worry about patient satisfaction scores; or how reimbursement rates seemed better too. But as time presses on, we physicians cannot afford to live in the past. We need instead to adapt to present circumstances and work to make them meet the needs of our patients.



**Kenneth Simons**

According to the PwC Health Research Institute's new report, “Top Health Industry Issues of 2018: A Year for Resilience Amid Uncertainty,” there are a number of issues that every physician needs to know about in order to positively impact the care of our patients. One of these issues is Artificial Intelligence (AI), and the Federation of State Medical Boards (FSMB) certainly agrees. It convened a national panel of experts in November to discuss this topic as it relates to medical regulation. Wisconsin was well represented, and we will report on the conference in more detail in an upcoming newsletter to inform you of how it may or may not impact medical regulation writ large, your Wisconsin Medical Examining Board (MEB) and you, our license holders.

Another critical topic identified in the PwC report is the opioid crisis. Keeping a close eye on patients and discovering social factors that influence their behavior could possibly help to prevent new opioid addictions. Using care management programs from other areas, such as cancer care, could help manage at-risk opioid patients.

Here in Wisconsin, we have been very fortunate to have MEB Vice-Chair, Timothy Westlake, MD, working tirelessly and in a bipartisan manner with our legislative leadership, as well as the Executive branch, to enhance physician education on this important topic. These efforts include determining how to combat the inappropriate prescribing of opioids through use of the Prescription Drug Monitoring Program (Wisconsin ePDMP) as well as through enhancements to electronic health records (EHR).

Ethical challenges in healthcare have always been and should remain an important topic if we as physicians wish to continue to

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## Medical Examining Board Membership and Staff Assignments

*The Medical Examining Board consists of 13 members. The members are appointed by the Governor and confirmed by the Senate.*

### Board Members:

Kenneth Simons, M.D., Chairperson (Milwaukee)  
Timothy Westlake, M.D., Vice Chairperson (Hartland)  
Mary Jo Capodice, D.O., Secretary (Sheboygan)  
Alaa Abd-Elseyed, M.D., Physician Member (Madison)  
David Bryce, M.D., Physician Member (Middleton)  
Michael Carton, Public Member (Oconomowoc)  
Padmaja Doniparthi, M.D., Physician Member (Oconomowoc)  
Rodney Erickson, M.D., Physician Member (Tomah)  
Bradley Kudick, Public Member (Waukesha)  
Lee Ann Lau, M.D., Physician Member (West Bend)  
David Roelke, M.D., Physician Member (Hartland)  
Robert Zoeller, Physician Member (Oconomowoc)  
Vacant, Public Member

*Information on how to apply for appointment to the Wisconsin Medical Examining Board can be found through the Office of the Governor: <https://walker.wi.gov/apply/boards-commissions>*

## Department of Safety and Professional Services

### Administrative Staff:

Thomas Ryan, Executive Director  
Sarah Norberg, Legal Counsel  
Kate Stolarzyk, Bureau Assistant

### Executive Staff:

Laura Gutiérrez, Secretary  
Eric Esser, Deputy Secretary  
Kirsten Reader, Assistant Deputy Secretary

*The dates and times of the Medical Examining Board meetings are announced on the DSPS website at <https://dspd.wi.gov>. Meeting agendas are posted approximately one week prior to the meeting.*

**A wealth of useful information is available on the Department of Safety and Professional Services website at: <https://dspd.wi.gov>**

### Do you have a change of name or address?

Licenses can update name or address information on the Department website at: <https://dspd.wi.gov/Pages/SelfService/Default.aspx>. Please note that confirmation of change is not automatically provided. Legal notices will be sent to a licensee's address of record with the Department. Under s. 440.11 (1), Wis. Stats., an applicant or credential holder has 30 days to provide notification of a change in name or address.

If name and address information is not kept current, a credential holder may not receive complaint and investigation notices or other important information from the Board. Failure for any reason to respond in a timely manner to an investigation notice from the Board may result in disciplinary action (s. Med 10.03 (3) (g), Wis. Admin. Code).

### Telephone Directory:

Call the Department of Safety and Professional Services toll-free (877) 617-1565, or (608) 266-2112 in the Madison area to connect to the service you need.

## Physician Member Positions on MEB Councils

The Respiratory Care Practitioners Examining Council and the Perfusionists Examining Council currently have Physician Member vacancies. If you are interested in serving on one of these MEB Councils, please review the position information provided below. To apply to serve simply complete the [application for appointment](#) and return it to the Department of Safety and Professional Services with a cover letter and resume as outlined in the application.

### Application for MEB Council Appointments

#### Respiratory Care Practitioners Examining Council

*Created at Wis. Stat. § [15.407\(1m\)](#)*

- Position Info: Physician Member:  
Serves a 3-year term with no term limits
- Council Webpage: [Respiratory Care Practitioners Examining Council](#)

#### Perfusionists Examining Council

*Created at Wis. Stat. § [15.407\(2m\)](#)*

- Position Info: Cardiothoracic Surgeon or Cardiovascular Anesthesiologist Member: Serves a 3-year term with no more than 2 consecutive terms
- Council Webpage: [Perfusionists Examining Council](#)

**Chair's Corner continued from page 1...**

be held in high esteem by the broader community. Recent news stories have revealed some shocking ethical violations that require our utmost attention. We are all aware of the case of the USA Gymnastics national team doctor and physician at Michigan State University, Larry Nassar, who was found guilty and sentenced to 40 to 125 years in prison for sexual misconduct. And many are likely familiar with the podcast "Dr. Death," the story of neurosurgeon Christopher Duntch, who was sentenced to life in prison for his crimes against patients. These incidents hurt the character and trust of the entire medical profession and each of us as individuals who are dedicated to compassionate, appropriate care. Given the very serious ramifications to society and the public trust, we as healthcare providers must ensure that our behavior and the behavior of our team members is above reproach.

Shifting workforce demographics and rising physician burnout are yet other areas of increasing concern. Many healthcare organizations are experiencing generational transitions as the baby boomer generation retires and millennials join and advance within the workforce. Adapting to generational expectations will require sustained effort and dialogue, and these efforts will succeed as long as all parties keep the needs of the patient at the forefront. However, in

addition to workforce shifts, many leaders, including the FSMB leadership, have identified physician burnout as a factor that impairs both the morale within institutions and patient care. Fifty-one percent of physicians reported experiencing frequent or constant feelings of burnout in 2017, up from 40 percent in 2013, according to Medscape's annual survey. The FSMB recently published an extraordinary report that I highly recommend you read (<http://www.fsmb.org/siteassets/advocacy/policies/policy-on-wellness-and-burnout.pdf>). The language in your MEB initial licensing form aligns well with best practices and is in fact an exemplar of how to ask the questions regarding physician mental health, addiction, substance use, and impairment. Recently, the MEB appointed a committee to look more closely at our licensing forms in an effort to see if they can be made even better for our licensees. The WI MEB would certainly welcome your thoughts on how we can assist our colleagues to maintain wellness.

In closing, we would do well to remember that it is incumbent upon us to look forward, not backwards, as we strive to care for our patients and ourselves, for as Samuel Johnson said, "The future is purchased by the present."

## **COMBATING OPIOID ABUSE**

### **Medication Assisted Treatment for Opioid Addiction**

According to the PEW Charitable Trusts, "A conclusive body of research has demonstrated that Medication Assisted Treatment for Opioid Abuse (MAT) is the most effective way to treat Opioid Use Disorder (OUD)." [Source: *Substance Use Disorder Treatment Policy Recommendations for the State of Wisconsin, Final Report – July 2018, page 9, <http://legis.wisconsin.gov/assembly/hope/media/1161/wisconsin-final-report-final.pdf>*]

The Medical Examining Board passed a motion in November 2017 in support of MAT programs, as another tool to combat the opioid epidemic.

Physicians and Physician Assistants (PAs) must obtain a waiver to provide MAT. To obtain the waiver, physicians and

PAs must complete MAT training. Physicians must complete 8 hours of training. PAs must complete 24 hours of training.

Current state law permits a PA with a waiver to be supervised by a physician that has not obtained a waiver but otherwise meets the qualifications of federal law.

For more information about MAT, go to: <https://www.samhsa.gov/medication-assisted-treatment>

For background regarding the treatment of opioid addiction in the medical office, go to: <http://www.fsmb.org/globalassets/advocacy/policies/model-policy-on-data-2000-and-treatment-of-opioid-addiction-in-the-medical-office.pdf>

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### **Duty to Report Convictions to the Board**

Physicians are required to provide certified copies of the criminal complaint and the judgment of conviction within 30 days of any conviction (felony or misdemeanor). Failure to report a conviction within 30 days is unprofessional conduct under Wis. Admin. Code § [Med 10.03\(3\)\(h\)](#). Board action, including discipline, may result for any conviction that is substantially related to the practice of medicine and surgery. Board action may also result from a failure to timely report any conviction as required.



*Combating Opioid Abuse continued from page 3...*

**Wisconsin Prescription Drug Monitoring Program Update**

The Wisconsin Department of Safety and Professional Services (DSPS) continues to enhance the features of the Wisconsin Enhanced Prescription Drug Monitoring Program (WI ePDMP) and use WI ePDMP data to support the Controlled Substance Board (CSB) with the analysis of controlled substance prescription dispensing trends in the state.

**Controlled Substances Board WI ePDMP Report**

In July, the Controlled Substances Board (CSB) released the Q2 2018 WI ePDMP Report, including trend analysis of controlled substance dispensing in Wisconsin. The report highlights a 5% decrease in the total number of monitored drug prescriptions dispensed and a 9% decrease in the number of opioid prescriptions dispensed over the past 12 months. Analysis also shows a 32% decrease in the average monthly doctor shopping alerts, an 18% decrease in the average monthly high morphine milligram equivalents (MME) alerts, and a 13% decrease in the average monthly opioid-benzodiazepine alerts over the same time period.

higher for those who are accessing the WI ePDMP via EHR integration.

Survey results suggest that using the WI ePDMP is influencing the behavior of healthcare professionals. Out of the 6,000 survey respondents, 44% indicated that, after reviewing information in the PDMP, they had spoken with a patient about controlled substance use, and 37% of respondents indicated that they had denied or modified a patient’s prescription. Only 8% of respondents indicated that they had dismissed a patient from care, but 10% to 21% of respondents indicated that they had referred a patient for substance abuse treatment, behavioral health treatment, or pain management.

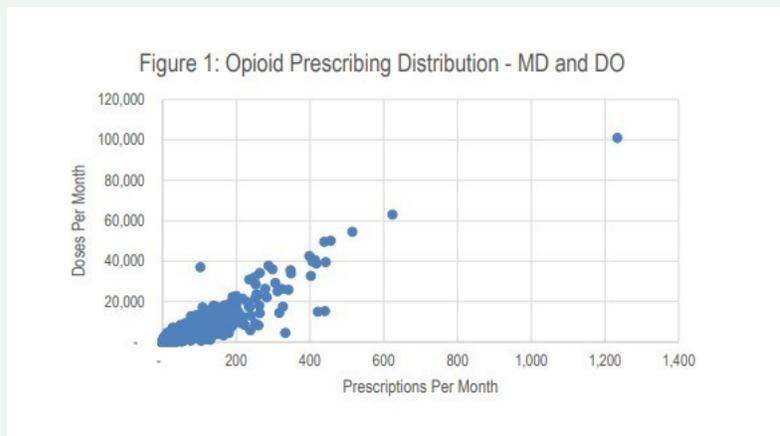
In addition, the report highlights results of the WI ePDMP user satisfaction survey conducted in April of 2018. The survey indicates that most users are satisfied with the WI ePDMP. Seventy-seven percent of respondents reported overall satisfaction with the WI ePDMP, providing responses of either “Satisfied” or “Very Satisfied.” Satisfaction rates are slightly

Review the full CSB Wisconsin ePDMP report (Report 5) at: <https://dsps.wi.gov/Documents/BoardCouncils/CSB/WIePDMPReport2018Q2.pdf>

**Wisconsin Medical Examining Board Referrals Based on PDMP Data**

Wisconsin Administrative Rules Chapter CSB 4.15 allows the CSB to review PDMP data to determine whether there is an indication of suspicious or critically dangerous conduct or practices of a pharmacist, pharmacy, practitioner, or patient. The Medical Examining Board (MEB) received a summary of the CSB data specific to physicians at its August meeting. After review and discussion of the CSB data, the MEB voted to open investigations for the prescribers who fell in the top .04 percentile of opioid dispensing volume for all MD/DO prescribers.

Figure 1 below from the CSB MEB report depicts the distribution of the over 15,000 MD/DO prescribers, including the significant variation of those in the top percentile for the time period of December 2017 through May 2017. The full report, “Analysis of Monitored Prescription Drug Dispensings: MD/DO,” prepared for the MEB meeting can be viewed at: <https://dsps.wi.gov/Documents/BoardCouncils/MED/20180815MEDAdditionalMaterials.pdf>



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### Spotlight: WI ePDMP Prescriber Features

The WI ePDMP continues to be a valuable communication and prescribing practice assessment tool. Unique prescriber features include:

- Prescriber Led Alerts, which allow prescribers to enter alerts on a patient record in the WI ePDMP indicating: 1) a treatment agreement; 2) a treatment agreement violation; and 3) an overdose incident. Look for the Add Alert button on the Patient Report just above the Patient Demographics. Prescriber Led Alerts are visible to other healthcare users of the WI ePDMP but are not made available to non-healthcare users, such as law enforcement. Once added to a patient record, the prescriber can remove a Prescriber Led Alert if it is no longer applicable.
- Prescriber Metrics Reports, which display a summary of an individual prescriber's prescription and patient alert metrics for the last 100 days in comparison to other prescribers of the same specialty. New features were added earlier this year, including a map that plots the home address of patients so that prescribers can see the distance patients travel to receive controlled substance prescriptions. Prescribers can also now click to view the patient names associated with patient history alerts.

### Spotlight: WI ePDMP Medical Coordinator Features

The medical coordinator role allows staff who medically coordinate Wisconsin prescribers to access the Prescriber Metrics Report of the prescribers they oversee. Medical coordinators do not have access to the patient level detail in the prescriber's Prescriber Metrics Report, nor do they have access to view a prescriber's metrics until the prescriber accepts the coordinator's request in the WI ePDMP. Recent enhancements provide medical coordinators with an at-a-glance view of the metrics for all the prescribers who have granted them access. In addition, medical coordinators will receive a weekly email

summarizing the status of their request to access a prescriber's metrics. An upcoming enhancement will allow medical coordinators to delegate the management of the prescriber DEA number list to another staff member.

To receive future updates about the WI ePDMP, make sure you are subscribed to PDMP Updates at <https://public.govdelivery.com/accounts/WIDSPS/subscriber/new>. Please feel free to contact PDMP staff at DSPS with questions: [pdmp@wisconsin.gov](mailto:pdmp@wisconsin.gov).

### Responsible Opioid Prescribing Continuing Medical Education Requirement

For the 2019 renewal, MDs and DOs will have to complete 30 hours of AMA or AOA Category 1 CME. This includes two hours of course work on responsible opioid prescribing. New to this biennium: individuals will have the option of bundling multiple courses from the approved course list as long as the total number of approved hours completed is two or more. Courses can also be offered in subjects related to responsible opioid prescribing that may not specifically cover the guidelines;

all courses still must be approved by the Medical Examining Board. As in previous biennia, residents, fellows, and other license holders who complete three consecutive months of postgraduate training during the biennium are exempt from all CME requirements. License holders who do not hold an active DEA number to prescribe controlled substances are exempt from the two-hour opioid requirement, but they still must complete 30 hours of CME.

## **UPDATE FROM THE FEDERATION OF STATE MEDICAL BOARDS**

### Journal of Medical Regulation (JMR)

#### Offers Special Continuing Medical Education Edition on Physician Wellness and Burnout

The *Journal of Medical Regulation* (JMR), a quarterly publication of the Federation of State Medical Boards (FSMB), announced a special Continuing Medical Education (CME) edition addressing physician wellness and burnout – a serious issue that is on the rise in the United States.

Studies have shown that at any time, as many as half of U.S. physicians may be suffering from at least one symptom of burnout, which has been documented to be a threat to patient safety and effective medical care. Major health care organizations, including the National Academy of Medicine, have launched initiatives recently to address the issue.

Burnout is a psychological response that may be experienced by those exposed to chronic stress in the health care practice environment, and it may include overwhelming exhaustion, feelings of cynicism, detachment from work, and a sense of ineffectiveness and lack of accomplishment. Burnout among physicians, physician assistants and others may lead to unprofessional behavior and surgical or diagnostic medical errors.

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## *FSMB Update, continued from page 5...*

The special themed-edition of JMR includes four articles and the full text of a new policy on physician wellness and burnout adopted recently by the FSMB, which publishes JMR. The articles, available free online, are approved for *AMA PRA Category 1 Credit™*. Articles include:

- *Physician Mental Health: An Evidence-Based Approach to Change*
- *FSMB Efforts on Physician Wellness and Burnout*
- *Facilitating Help-Seeking Behavior Among Medical Trainees and Physicians Using the Interactive Screening Program*

### **Report and Recommendations of the FSMB Workgroup on Physician Wellness and Burnout**

To access the special JMR CME issue, go to [www.jmronline.org](http://www.jmronline.org).

### **FSMB Releases Recommendations on Regulating Physicians' Use of Stem Cell and Regenerative Therapies**

The FSMB has released a report recommending best practices for regulating the promotion, communication and practices of treatments received at stem cell clinics in the United States. The report was drafted by FSMB's Workgroup to Study Regenerative and Stem Cell Therapy Practices and seeks to raise awareness about these practices generally, outline potential benefits and risks, as well as provide basic guidance for state medical boards and their licensees.

The Workgroup was established in response to a request from Senator Lamar Alexander (TN-R), Chairman of the Senate Health, Education, Labor, and Pensions (HELP) Committee. Sen. Alexander asked the FSMB to lead efforts to develop recommendations for state medical boards in their pursuit to help protect patients from unproven or unethical stem cell treatments.

“The field of stem cell therapies is rapidly evolving, and with that advancement comes the need for consistent regulation to

ensure patients are not being exploited or harmed,” said Humayun J. Chaudhry, DO, MACP, President and CEO of the FSMB. “We are hopeful that these recommendations will provide guidance in helping to achieve an appropriate balance between respecting patient autonomy and protecting patients from the risks of unproven and potentially dangerous interventions.”

Appointed by Greg Snyder, MD, former Chair of the FSMB Board of Directors, the Workgroup included members of state medical boards, subject matter experts, and a patient representative. The report and its recommendations were voted on and passed unanimously by the FSMB House of Delegates at FSMB's Annual Meeting in Charlotte, North Carolina, in April 2018.

The report can be accessed at [www.fsmb.org/globalassets/advocacy/policies/fsmb-stem-cell-workgroup-report.pdf](http://www.fsmb.org/globalassets/advocacy/policies/fsmb-stem-cell-workgroup-report.pdf).

### **Educational Modules Provide Information About Medical Regulation**

A series of free, online education modules from the FSMB are designed to provide information about medical regulation. The series includes:

- ***The Role of State Medical Boards*** - This module can be accessed at [www.fsmb.org/globalassets/education/modules/the-role-of-state-medical-boards/story\\_html5.html](http://www.fsmb.org/globalassets/education/modules/the-role-of-state-medical-boards/story_html5.html)
- ***The Medical Licensing Process*** - This module can be accessed at [www.fsmb.org/globalassets/education/modules/the-medical-licensing-process/story\\_html5.html](http://www.fsmb.org/globalassets/education/modules/the-medical-licensing-process/story_html5.html)
- ***State Medical Board and Physician Discipline: Part I - Complaint and Disciplinary Processes*** - This module can be accessed at [www.fsmb.org/globalassets/education/modules/the-medical-disciplinary-process/story\\_html5.html](http://www.fsmb.org/globalassets/education/modules/the-medical-disciplinary-process/story_html5.html)

Developed by the FSMB Workgroup on Education for Medical Regulation, the series will explore additional facets of medical regulation in the future. Learn more at [www.fsmb.org/education](http://www.fsmb.org/education).

## Enforcement Actions of the Medical Examining Board

The Medical Examining Board, with help from staff at the Department of Safety and Professional Services, can take action against licensed professionals around the state to help protect the citizens of Wisconsin, and the profession. You may search for any of the Board Orders listed below on the Department's website by using this link:

**Board Order Search:** <https://dsps.wi.gov/Pages/SelfService/OrdersDisciplinaryActions.aspx>

*Disciplinary actions are reported to the National Practitioners Data Bank. Available options to the Board are:*

- ⇒ **Reprimand** - A public warning of the licensee for a violation.
- ⇒ **Limitation of License** - Imposes conditions and requirements upon the licensee, imposes restrictions on the scope of practice, or both.
- ⇒ **Suspension** - Completely and absolutely withdraws and withholds for a period of time all rights, privileges and authority previously conferred by the credential.
- ⇒ **Revocation** - Completely and absolutely terminates the credential and all rights, privileges and authority previously conferred by the credential.

*Non-disciplinary actions are not reported to the National Practitioners Data Bank. Available options to the Board are:*

- ⇒ **Administrative Warning** - Issued if violation is of a minor nature, a first occurrence and the warning will adequately protect the public. The issuance of an Administrative Warning is public information, however the reason for issuance is not.
- ⇒ **Remedial Education Order** - Issued when there is reason to believe that the deficiency can be corrected with remedial education, while sufficiently protecting the public.

### Board Orders April 2018-November 2018

Profession	Order Number	Order Date	Respondent	City	State
Medicine and Surgery, MD	<a href="#">ORDER0004391</a>	11/29/2018	Armus, Steven L.	Franksville	WI
Medicine and Surgery, MD	<a href="#">ORDER0005957</a>	11/14/2018	Henry, Keith A.	Ashland	WI
Medicine and Surgery, MD	<a href="#">ORDER0005961</a>	11/14/2018	Nkwazi, Geoffrey C. K.	Milwaukee	WI
Medicine and Surgery, MD	<a href="#">ORDER0005962</a>	11/14/2018	Grant-Acquah, Kwesi K.	Wauwatosa	WI
Medicine and Surgery, MD	<a href="#">ORDER0005960</a>	11/14/2018	Jackson, Edgar Basil	Menomonee Falls	WI
Medicine and Surgery, MD	<a href="#">ORDER0005958</a>	11/14/2018	Oren, John W.	Mequon	WI
Medicine and Surgery, MD	<a href="#">ORDER0005956</a>	11/14/2018	Westcott, Stephen C.	Elkhart Lake	WI
Medicine and Surgery, MD	<a href="#">ORDER0005959</a>	11/14/2018	Dunn, Warren R.	Madison	WI
Medicine and Surgery, MD	<a href="#">ORDER0005798</a>	10/31/2018	Landdeck, Daniel S.	Sparta	WI
Medicine and Surgery, MD	<a href="#">ORDER0002832</a>	10/23/2018	Ahmad, Farid A.	Greenfield	WI
Medicine and Surgery, MD	<a href="#">ORDER0004661</a>	10/23/2018	Garibaldi, Abel A.	Oconomowoc	WI
Physician Assistant	<a href="#">LS0708153MED</a>	10/23/2018	Fick, Jennifer L.	Verona	WI
Physician Assistant	<a href="#">ORDER0005758</a>	10/23/2018	Conroy, Sean K.	Hays	KS
Medicine and Surgery, MD	<a href="#">ORDER0005705</a>	10/23/2018	Schlidt, Scott A.	Menomonee Falls	WI
Medicine and Surgery, MD	<a href="#">ORDER0005918</a>	10/17/2018	Murphy, John W.	Waukesha	WI
Medicine and Surgery, MD	<a href="#">ORDER0005919</a>	10/17/2018	Regne-Karlsson, Maud H.	Madison	WI
Medicine and Surgery, MD	<a href="#">ORDER0005920</a>	10/17/2018	Dries, Alissa	Waukesha	WI
Physician Assistant	<a href="#">ORDER0005757</a>	9/26/2018	Zachel, Gretchen O.	Coon Rapids	MN
Medicine and Surgery, DO	<a href="#">ORDER0002624</a>	9/20/2018	Moraski, Luann	Whitefish Bay	WI
Medicine and Surgery, MD	<a href="#">ORDER0005398</a>	9/20/2018	Mayo II, Charles William	St. Croix Falls	WI
Medicine and Surgery, MD	<a href="#">ORDER0005890</a>	9/19/2018	Lawal, Adegboyega H.	River Hills	WI

## Board Orders

### April 2018-November 2018

Profession	Order Number	Order Date	Respondent	City	State
Medicine and Surgery, MD	<a href="#">ORDER0005815</a>	9/19/2018	Yarborough, Garland W.	Mequon	WI
Medicine and Surgery, MD	<a href="#">ORDER0005889</a>	9/19/2018	Nelson, Mark Alan	Brookfield	WI
Medicine and Surgery, MD	<a href="#">ORDER0002303</a>	8/28/2018	Haughey, Stephen A.	Whitefish Bay	WI
Medicine and Surgery, MD	<a href="#">ORDER0005849</a>	8/15/2018	Gerson, Robert M.	Delavan	WI
Medicine and Surgery, MD	<a href="#">ORDER0005850</a>	8/15/2018	Meyers, James H.	Louisville	KY
Medicine and Surgery, MD	<a href="#">ORDER0004662</a>	7/16/2018	Johnson, Tammy A.	Waukegan	WI
Medicine and Surgery, MD	<a href="#">ORDER0005301</a>	7/16/2018	Defatta, Robert J.	Eau Claire	WI
Physician Assistant	<a href="#">ORDER0005814</a>	7/11/2018	Wiggins, Virginia L.	North Freedom	WI
Medicine and Surgery, MD	<a href="#">ORDER0005813</a>	7/11/2018	Carpenter, William S.	Park Falls	WI
Medicine and Surgery, MD	<a href="#">ORDER0005798</a>	6/20/2018	Landdeck, Daniel S.	Sparta	WI
Physician Assistant	<a href="#">ORDER0005757</a>	6/20/2018	Zachel, Gretchen O.	Coon Rapids	MN
Physician Assistant	<a href="#">LS0708153MED</a>	6/20/2018	Fick, Jennifer L.	Verona	WI
Medicine and Surgery, MD	<a href="#">ORDER0005797</a>	6/20/2018	Mirkia, Kiarash	Las Vegas	NV
Medicine and Surgery, MD	<a href="#">ORDER0004312</a>	5/30/2018	Preciado-Riestra, Juan S.	Waupaca	WI
Medicine and Surgery, MD	<a href="#">ORDER0003817</a>	5/21/2018	Krieger, Westscot G.	Appleton	WI
Physician Assistant	<a href="#">ORDER0005757</a>	5/16/2018	Zachel, Gretchen O.	Coon Rapids	MN
Medicine and Surgery, MD	<a href="#">ORDER0005756</a>	5/16/2018	Johnson, Steven James	Sauk City	WI
Physician Assistant	<a href="#">ORDER0005758</a>	5/16/2018	Conroy, Sean K	Hays	KS
Medicine and Surgery, MD	<a href="#">ORDER0005759</a>	5/16/2018	Chhabria, Shakuntala P.	Gurnee	IL
Medicine and Surgery, MD	<a href="#">ORDER0005755</a>	5/16/2018	Cleary, Martin J.	Shullsburg	WI
Medicine and Surgery, MD	<a href="#">ORDER0004555</a>	5/4/2018	Vinluan, Jeremias B.	Milwaukee	WI
Medicine and Surgery, MD	<a href="#">ORDER0005707</a>	4/18/2018	Kamysz, Jeffery J.	Chicago	IL
Medicine and Surgery, MD	<a href="#">ORDER0005702</a>	4/18/2018	Fahim, Magid M.	Perryville	MO
Medicine and Surgery, MD	<a href="#">ORDER0005705</a>	4/18/2018	Schlidt, Scott A.	Menomonee Falls	WI
Medicine and Surgery, MD	<a href="#">ORDER0005703</a>	4/18/2018	Malik, Ahmed Mehdi	West Allis	WI
Medicine and Surgery, MD	<a href="#">ORDER0005701</a>	4/18/2018	Marshall, Angus	La Crosse	WI
Medicine and Surgery, MD	<a href="#">ORDER0005699</a>	4/18/2018	Wiersema, Channing C.	Plover	WI
Medicine and Surgery, MD	<a href="#">ORDER0005700</a>	4/18/2018	Farrell, Julie A.	Cincinnati	OH
Medicine and Surgery, DO	<a href="#">ORDER0005708</a>	4/18/2018	Benzer, David G.	Fifty Lakes	MN
Medicine and Surgery, MD	<a href="#">ORDER0005704</a>	4/18/2018	Maldonado, Dennys E.	Janesville	WI
Medicine and Surgery, MD	<a href="#">ORDER0005706</a>	4/18/2018	Mahn, Thomas Henning	Milwaukee	WI

**Board Order Search:** <https://dsps.wi.gov/Pages/SelfService/OrdersDisciplinaryActions.aspx>