

# Kentucky Board of Medical Licensure Newsletter

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Spring 2022

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## Board Member Receives Recognition from Federation of State Medical Boards

During the proceedings of the Federation of State Medical Boards 2022 Annual meeting, Heidi M. Koenig, M.D., was presented with the FSMB's Distinguished Service Award. John H. Clark, M.D. Leadership Award. This prestigious award recognizes outstanding and exemplary leadership, commitment, and contribution to advancing the public good on the national and state medical board level.

Dr. Koenig was first appointed to the KBML in 2013 where she served a four-year term. Dr. Koenig was reappointed to the Board in 2020 and was immediately recognized for her experience and leadership abilities.

In addition to serving the citizens of the Commonwealth, Dr. Koenig has readily taken on leadership roles that certainly promote the advancement of medical licensure and discipline. She began service on the FSMB Editorial Committee for the Journal of Medical Regulation in 2015 and took on the leadership role as Editor-in-Chief in 2016. In this role, she has selflessly spent many countless hours reviewing and collaborating with her fellow Committee members to ensure the Journal serves as a valuable resource to medical regulators through the publishing of articles that support evidence -based medical regulation not only in the United States, but also throughout international medical regulatory communities.

Along with staying very active with her regulatory activities, Dr. Koenig also maintains an active clinical practice. Dr. Koenig is a tenured Professor of Anesthesiology and Perioperative Medicine and Academic Advisory Dean at the University of Louisville. She also actively practices Anesthesiology in the Louisville area and provides substantial support to U of L's School of Medicine on the Promotion and Tenure Committee.

Words cannot express the Board's appreciation to Dr. Koenig for her unyielding dedication to medical regulation and public protection and congratulates her for receiving this prestigious recognition.

## Warning – Scammers are Still Attempting to Impersonate Board and Government Officials

Please be aware the Board is still receiving reports of a widespread fraud scheme in which telephone scammers are impersonating Board representatives in attempt to extort money or steal personal information. Over the past year, the Board has even noted the scammers are employing more sophisticated tactics and have spoofed the Board main phone number in attempt to convince their target that the call is legitimate. Often, they will utilize an urgent and aggressive tone, refusing to speak or leave a message with anyone other than the physician and threaten some kind of Board action or action against the physician's DEA unless thousands of dollars are wire transferred or sent via untraceable gift card numbers.

With these reports in mind, the Board would like to remind you that our office does not operate in this manner and any correspondence from the Board would appear on formal Board letterhead or from an email address ending with ky.gov. For instance, our general email is kbml@ky.gov. While the appropriate authorities have been made aware of these fraudulent attempts, the Board encourages all its licensees to be on alert and are encouraged to contact our office at (502) 429-7150 in the event you want to verify official board communications.

Board Orders can be viewed under the Physician Profile/ Verification of License link on the Board's website: www.kbml.ky.gov

Board Action Report (actions taken since 01/01/2022)

- Atif A. Atyia, M.D., Jonesborough, TN #34294 Agreed Order entered into 02/07/2022
- Atif A. Atyia, M.D., Jonesborough, TN #34294
  Order Terminating Agreed Order issued
  02/11/2022
- Natalie J. Bauer, M.D., Louisville, KY #53987 Order Reinstating Suspended License issued 02/16/2022
- Natalie J. Bauer, M.D., Louisville, KY #53987

  Order Suspending License Pursuant to
  201 KAR 9:310 issued 1/27/2022, effective
  1/29/2022
- Alan Brooks, M.D., Louisvile, KY License #55662

  Order Terminating Agreed Order issued 03/18/2022
- Morgan Budde, M.D., Winchester, KY #43121 Amended Agreed Order entered into 1/25/2022

Christopher Church, M.D., Hazard, KY License #56562

Agreed Order entered into 03/21/2022

Jerry Conners, M.D., Fort Thomas, KY License #15481

Order Suspending License Pursuant to 201 KAR 9:310 issued 01/27/2022, effective 02/23/2022

Hazem Garada, M.D., Fairfax Station, VA License #30261

Order Denying Application for Licensure issued 03/21/2022

David T. Gilliam, M.D., Bloomington, IN #17454
Order Suspending License Pursuant to
201 KAR 9:310 issued 01/27/2022, effective
02/12/2022

Shawn Gorden, M.D., Manchester, KY License #39057

Fifth Amended Agreed Order entered into 03/10/2022

Katherine S. Herold, M.D., Crestwood, KY License #45460

Agreed Order entered into 03/09/2022

- Ashok P. Jarkani, M.D., Edgewood, KY #41064
  Order Suspending License Pursuant to
  201 KAR 9:310 issued 1/27/2022, effective
  02/23/2022
- Ashok P. Jarkani, M.D., Edgewood, KY #41064
  Order Reinstating Suspended License issued
  02/24/2022

Paul A. Kearney, M.D., Lexington, KY License #25755

Agreed Order entered into 03/02/2022

Paul A. Kearney, M.D., Lexington, KY License #25755

Order Terminating Agreed Order issued 03/07/2022

- Mary Jean Lang, M.D., London, KY #44482
  Order Terminating Agreed Order issued
  02/17/2022
- Stephen A. Lasher, M.D., Brentwood, TN #53387
  Order Suspending License Pursuant to
  201 KAR 9:310 issued 1/27/2022, effective
  1/31/2022
- Stephen A. Lasher, M.D., Brentwood, TN License #53387

Order Reinstating Suspended License issued 03/03/2022

- Blaine M. Lisner, M.D., Louisville, KY #25368

  Order Suspending License Pursuant to
  201 KAR 9:310 issued 1/27/2022, effective
  1/31/2022
- Joshua Lynn, M.D., Louisville, KY #52440
  Agreed Order entered into 02/02/2022
- Joshua Lynn, M.D., Louisville, KY #52440
  Order Terminating Agreed Order issued 02/02/2022
- Paul E. McLaughlin, M.D., Mt. Sterling, KY License #24118

Order of Revocation issued 03/21/2022, effective 04/21/2022

- Bonnie L. Mitchell, M.D., Lexington, KY #21265
  Order Suspending License Pursuant to
  201 KAR 9:310 issued 1/27/2022, effective
  1/29/2022
- Charles R. Noplis, M.D., Louisville, KY #44044
  Second Amended Agreed Order entered into 01/21/2022

William W. O'Nan, M.D., Henderson, KY #17430
Agreed Order of Retirement entered into 02/11/2022

Samson K. Orusa, M.D., Clarksville, TN License #33408

Order of Revocation issued 03/21/2022, effective 04/21/2022

Saagar K. Raju, M.D., Riverside, CA #17130 Agreed Order entered into 02/07/2022

Joseph W. Richardson, M.D., Lexington, KY License #24023

Agreed Order entered into 03/29/2022

Carolyn V. Smith, M.D., Lexington, KY License #31089

Order of Revocation issued 03/21/2022, effective 04/20/2022

David N. Smith, M.D., Waxhaw, NC License #52836 Order of Revocation issued 03/21/2022, effective 04/20/2022

Robert So, M.D., Walton, KY #42021

Order Suspending License Pursuant to 201 KAR 9:310 issued 1/27/2022, effective 1/31/2022

Robert So, M.D., Walton, KY #42021

Order Reinstating Suspended License issued 02/23/2022

Gerald W. Thorpe, M.D., Louisville, KY License #48842

Agreed Order entered into 03/17/2022

Richard A. Vanbergen, M.D., Lafayette, LA #34422
Order Suspending License Pursuant to
201 KAR 9:310 issued 1/27/2022, effective
1/31/2022

Restrictions have also been placed on the following physicians' licenses pending resolution of charges brought against them.

Katharine S. Cox, M.D., Lexington, KY #53380 Emergency Order of Suspension issued 1/21/2022, effective 1/21/2022

Pavan Bejgum, M.D., Mayfield, KY License #52262 Complaint and Emergency Order of Suspension issued 03/04/2022, effective 03/05/2022

Joshua Kadetz, M.D., Barbourville, KY License #42223

Complaint and Emergency Order of Suspension issued 03/21/2022, effective 03/23/2022

John L. Stanton, M.D., Clarksville, TN #52748

Emergency Order of Restriction issued 1/21/2022, effective 1/21/2022

## Reminder on Retirement and Maintaining a DEA

One of the most frequent inquiry the Board receives involves matters relating to physicians who have retired from practicing medicine; however, they wish to maintain their DEA registration for emergency purposes.

In this situation, the Board would like to remind all of its licensees that just because you are not actively writing prescriptions for controlled substances, any physician with an active Kentucky DEA registration must register and maintain a KASPER account regardless of whether you plan to use such authority. The Board would also remind physicians, unless it is an emergency, it is unethical for Kentucky physicians to prescribe controlled substances for members of their immediate family. Finally, it is important to note that any physician, who prescribes controlled substances in Kentucky, must adhere to the acceptable and prevailing medical standards set out in the Board administrative regulations.

If you do not desire or are unable to conform to all KBML controlled substance prescribing and dispensing regulations, you may want to retire your KY DEA number by calling DEA Registration Support at 571-362-6905 for assistance.

### 2022 Renewal of Physician Licenses

The Board is pleased to report that our agency recently completed the annual renewal cycle for medical and osteopathic physicians practicing in the Commonwealth for 2022.

As in past years, the process went smoothly with <u>19,603</u> physicians renewing their medical/ osteopathic licenses for 2022. Of that number, <u>12,001</u> physicians have an active Kentucky practice address.

In the event that a physician has allowed his/her license to lapse, he/she can simply contact the Board office for instructions on how to reactivate it. Just a reminder, it is very important to update the Board anytime that you change your mailing or practice address. You can do so, by going to the following page on our website, <a href="Update Your Address - Kentucky Board of Medical Licensure">Update Your Address - Kentucky Board of Medical Licensure</a>

### Medical Waste in Kentucky – Regulation, SARS-CoV-2, Management and Future Trends

George Partridge, PhD, P.E., QEP, Departmental Protection

### Division of Waste Management, Recycling and Local Assistance Branch

The Recycling & Local Assistance Branch (RLA), Division of Waste Management within the Energy & Environment Cabinet serves as a contact for inquiries from all types of healthcare facilities and those businesses that provide support services including medical testing laboratories and waste treatment and disposal facilities. The RLA provides technical assistance, regulatory guidance and serves as a point of contact in state government for questions associated with regulated medical waste, pharmaceuticals, and waste management planning. The RLA also assists the inquirer with establishing contacts with the agencies across state government that can address their licensure, permitting and registration needs.

Healthcare facilities typically dispose of PPE and items used in patient care that are not visibly contaminated with blood and body fluids as general waste. With the COVID pandemic and concern over SARS-CoV-2, a very infectious virus with the primary transmission mechanism for disease associated with respiratory aerosols, many healthcare facilities have been treating all the items that came in contact with COVID patients as a potentially biohazardous waste. Early in the pandemic, research studies conducted in clinical settings identified the virus present on various types of material surfaces, hours to days after contact with respiratory aerosols. This warranted the precautionary practice that was being followed to treat all COVID patient associated waste as biohazardous. Over the course of the pandemic, it was recognized by many in the health care professions that inhalation was the primary transmission pathway and the respiratory aerosols deposited on surfaces such as PPE presented a low-risk for transmission of the SARS-CoV-2 virus. The World Health Organization (WHO) in a report recently released stated the following: "...SARS-CoV-2 is an enveloped virus, which means that it is inactivated relatively quickly by environmental factors such as sunlight or heat. Most evidence indicates that the main route of transmission of the virus is directly from person to person though exhaled respiratory particles, not fomites... Since the beginning of the pandemic, WHO has stated that extra or special procedures beyond normal classification into infectious and non-infectious are not needed for waste from COVID-19 patients."

The pandemic has raised new awareness globally how a highly mobile integrated society addresses the potential for disease transmission and protection of public health by the way it manages wastes, from the household level to that of large regional hospital systems. There are many lessons to be learned from SARS-CoV-2 as healthcare waste management decisions are made based on the type of pathogen and its primary mechanism of transmission which are important to waste management planning. There will be other emerging pathogens and their respective variants of concern emerging in the future and it is important we learn from this pandemic how to continue to manage medical waste safety to protect human health and the environment.

EPA has not had authority for medical waste since the Medical Waste Tracking Act (MWTA) of 1988 expired in 1991. Medical waste is primarily regulated at the state level. Recognizing that the regulations affecting waste management decisions are shared by numerous agencies and cabinets in Kentucky, a few regulatory areas will be briefly highlighted focusing on regulated medical waste.

Regulations especially important to waste generators are found in the Kentucky Administrative Regulations (KAR), Title 902 for the Cabinet for Health and Family Services (CHFS) – Department for Public Health (DPH). Chapter 20 addresses "health services and facilities" and Chapter 11 "medical laboratories." For some types of wastes, specific treatment technologies are specified; for example (401 KAR 20:016), hospital "pathological waste" for which incineration is required. For other wastes there is flexibility in terms of treatment requirements where incineration, autoclaving, or otherwise rendering "non-hazardous" is required.

The Kentucky Transportation Cabinet oversees the registration of vehicles for medical waste transporters (Kentucky Revised Statues - KRS 174.450). The Kentucky Department for Environmental Protection, Division of Waste Management, oversees the permitting of facilities for the storage, treatment, and disposal of medical waste. Medical waste storage and treatment facilities are permitted as "Medical Waste Transfer Stations" and the disposal facilities that receive the treated waste are permitted as contained landfills (designated to receive municipal solid waste). The regulatory requirements addressed by the Division of Waste Management include those found in 401 KAR Chapter 30 – Waste Management; General Administrative Procedures; 401 KAR Chapter 47 – Solid Waste Facilities, and 401 Chapter 48 – Standards for Solid Waste Facilities.

In Kentucky, except for incineration, there are no specific guidelines for waste treatment efficacy or type of treatment technology that establishes the basis for determining when treatment of a medical waste renders it non-infectious.

Some states have established alternative infectious waste treatment technology approval permitting processes in addition to performance assessments of established technologies developed around pressurize steam (autoclaving). These typically specify microbial inactivation test protocols using mycobacteria and/or bacterial spores for the challenge microorganisms with specified microbial log<sub>10</sub> inactivation levels required.

It is important to recognize that infection level varies on a continuum from a highly contaminated material with infectious microorganisms to a material that has been sterilized. The specific type of treatment technology along with operating and process conditions will determine treatment efficacy and how much the infection potential or infectious level has been reduced. A state with minimal specific treatment standards; only requiring medical waste to be treated, rendered non-infectious and handled in a way that is protective of human health and the environment, establishes business opportunities for innovative and new alternative treatment technologies to be introduced into the state. Autoclaving has been the primary technology of choice in Kentucky with waste requiring incineration being sent out of the state to permitted facilities. Presently there are companies seeking to introduce alternative treatment technologies (other than incineration and autoclaving) into Kentucky.

There are four basic processes for the treatment of bio-hazardous components in healthcare waste. The processes include thermal, chemical, irradiative and biological. Autoclaves and hybrid-autoclaves have historically been the primary choice of technology with other technologies receiving increased attention in recent years. With the surge in the volume of medical waste generated during the pandemic, the alternative medical waste treatment technology industry has received increased attention (including technologies incorporating low-pressure stream, frictional or dry heat, microwave energy, ionizing radiation, ozone, pyrolysis, and pressurized steam/hybrid autoclave design features).

One design feature that is unique to all these technologies, is the use of shredders for waste material size reduction which reduces thermal/chemical treatment costs. At the same time, shredding technology generates bio-aerosols. With some medical waste containing significant quantities of liquids and/or with a high moisture content, aerosolization has been a safety concern. Environmental benefits of waste shredding along with compaction technology include the reduce waste volume going to landfills. Other options offered by manufacturers include automated waste sorting technologies for the treated waste to recover materials for recycling and resource recovery.

The WHO in a report just released titled: "Global Analysis of Health Care Waste in the Context of COVID-19 – Status, Impacts and Recommendations" highlights increasing environmental waste disposal concerns and climate impacts from all the materials/products used by the healthcare sector. The healthcare section contributes 4-5 % of total greenhouse emissions globally. Appropriate use PPE guidelines were presented for COVID-19 along with sustainable options. Medical waste accounts for approximately 10-15 % of the waste generated with non-hazardous waste accounting for the greatest percentage – identifying significant opportunities for recycling and resource conservation initiatives. Future trends in PPE manufacture will result in products with a greater proportion of renewable biobased or recyclable materials. Reverse logistics and centralized treatment using non-burn technologies will pave the way for the future of healthcare waste management.

The United States has already minimized the use of incineration and adopted widely accepted thermal treatment technologies based around autoclave technology. As a nation we are beginning to see an increased application of alternative treatment technologies and more environmentally friendly materials incorporated in PPE and products utilized by healthcare personnel. All this will change how waste is categorized, segregated, and managed for treatment and disposal.

To maximize the benefits of the emerging waste treatment technologies and address important global Issues including sustainability and climate change; how we classify, segregate, and manage waste will be become increasingly important for the future of public health care. I personally see waste management initiatives addressing present waste materials that include paper and other cellulosic materials, plastic, rubber, cloth, glass, liquids, and metals. Optimizing waste minimization strategies will require a department-by-department approach recognizing that waste compositions vary across departments and healthcare facilities and the services they provide that include patient care, emergency room, clinical laboratories, surgery, labor and delivery, pharmacy, chemotherapy, radiology, dental, dialysis, and environmental services.

To summarize, what do I envision the future holds for healthcare from a waste management perspective:

- Assessing with greater attention, how we classify waste materials as infection or non-infectious.
- PPE and associated products used in patient care increasingly becoming more environmentally friendly by incorporating renewable biobased or recyclable materials.
- Greater attention at the waste generator level for waste prevention initiatives based on products selected and guideline for their us in patient care.
- Increased waste segregation by waste generators to minimize waste treatment costs while optimizing resource conservation, recovery of recyclable materials, and minimizing waste going to landfills.
- Implementation of emerging medical waste treatment technologies that reduce the environmental footprint allowing for recycling of treated waste materials and recovery of resources

Please do not hesitate to contact the Recycling and Local Assistance Branch with the Division of Waste Management, Department for Environmental Protection, Energy and Environment Cabinet if we can assist you with your waste management questions and with waste management planning.

## Kentucky Board of Medical Licensure 310 Whittington Parkway, Suite 1B Louisville, KY 40222

### **Change of Address Notice**

All information provided below is used to update the licensee's profile on the Board's website www.kbml.ky.gov. You may also change your address online by clicking here, Date: \_\_\_\_\_ License Number: \_\_\_\_\_ Name: \_\_\_\_\_\_ Mailing Address: \_\_\_\_\_ Practice Address: Practice County: \_\_\_\_\_ Office Phone Number:

Email Address:

<sup>\*</sup>The Board does not publish your email address.