



*Public Protection  
through fair and  
impartial application  
and enforcement of  
practice acts*

# THE REPORT

Fall 2019

## Message From: The Board

### Recent Changes to Idaho Board of Medicine Application Forms

By: David McCluskey III, MD



The Idaho Board of Medicine has made changes to questions on both the initial license application addendum and the license renewal forms to reduce redundancy, provide clarity, and modernize the language. We would like to highlight several of the changes in order to provide insight into the rationale behind the modifications to support applicants and licensees using these new forms.

The new addendum combines 3 questions regarding prior investigations and does not include a previous question regarding past alcohol or substance abuse. We also added one question regarding active military service. This nine-question addendum replaces the previous twelve question form.

Several of the questions on these application forms involve queries into previous exam failures, licensure actions, professional investigations, or involvement in previous malpractice suits. Nearly 10% of our most recent 200 applicants have attested “yes” to one of more of these questions. Whether a specific event, investigation, or malpractice action constitutes a “yes,” however, can often be confusing. This is the most frequent source of questions to the Board of Medicine regarding our application process. For perspective, 2.5% of our recent applicants answered “no” when they should have answered “yes.”

#### Inside this issue:

Message From The Board	1
Idaho Naturopathic Medical Board	6
Board Changes/New Members	8
CDC Opioid Advisement	10
Board Actions	12
Board Members and Staff	13

*continued on page 2*

The most frequent questions that are answered incorrectly include: “Have you ever failed any licensing examination for a medical or professional license?”; and “Are you now or have you ever been a party or defendant in any malpractice proceeding?” Take, for example, an applicant who was involved in a malpractice suit that settled in her favor. Perhaps her natural assumption would be to answer “no” on the malpractice question. The outcome was in her favor and it never went to trial. Right? This assumption is almost always incorrect. The majority of malpractice cases involve some form of legal proceeding. It may not be reported on the National Practitioner Databank, but it was still a proceeding nonetheless. This confusion often delays an application, and, more importantly, leads to a despondent, stressed, and otherwise confused physician caught in a situation that could have easily been avoided had they had some proper guidance.

The new application addendum form attempts to clarify what constitutes a “yes.” It is our hope that this will eliminate much of the confusion and help avoid these types of mistakes in the future. Some representative changes intended for clarity include:

“Are you now or have you ever been a defendant in any malpractice proceedings, **regardless of the outcome?**”

“Have you ever failed any step of a licensing examinations **(such as the USMLE or COMLEX)** for a medical or professional license?”

“Have you ever been investigated by any licensing board, hospital, healthcare organization, agency or professional association in connection with medical incompetency, practice act violations, unprofessional conduct or unethical conduct **(even if no action resulted from the investigation)?**”

For current licensees, we are still in the process of aligning the questions on our application addendum and renewal forms. Until then the clarifying statements listed above, and the standards that they represent, also apply to physicians renewing their license. One need only to review several of our previous newsletters to find where fines were imposed after similar questions on the renewal form were answered incorrectly in the past. The Board of Medicine levies a \$500 fine for inaccuracies on a renewal application.\* Remember that “you are attesting that the answers are true and correct” on every renewal application. This is **your** professional license and you are responsible for any submissions to the board. The most common source of error occurs when physicians delegate this responsibility to members of their staff or organization. To best avoid fines, read the renewal form questions carefully, review the application yourself, and ensure that the answers are accurate. If there is any question of how to answer a given question, the safest option is to contact the Board of Medicine. A detailed discussion of license renewal can be found in our Winter 2018 newsletter. <sup>1</sup>

*continued on page 3*

\*At its August meeting, the Board voted to maintain its current \$500 fine per incidence of false or erroneous reporting on Board forms. Previously, the Board had decided to raise the fine to \$1000 per occurrence.

The final change to discuss involves our queries regarding physical or mental impairment. Regulatory boards across the country struggle with how best to pose these types of questions. We have been engaged in this discussion and felt that it was time for a change to the way this question is posed. The largest challenge is that fear of disciplinary action and the stigma associated with self-reported illness remains prevalent. In a 2017 study of over 5,800 physicians from across the United States, 40% of physicians reported that they would be reluctant to seek formal medical care for treatment of a mental health condition because of concerns about repercussions to their medical licensure.<sup>2</sup> This is no longer acceptable in an era where physician suicide attempts continue to grow at alarming rates and where physician burnout now stands as one of the nation's largest public health concerns.<sup>3</sup>

Dr. Mark Grajcar provided some perspective on physician burnout in our Winter 2019 newsletter and noted that we are taking steps to destigmatize the process of receiving both therapy and prevention through our application process.<sup>4</sup> Our new forms now reflect that work we have done to create a more modern inquiry that takes into account the tension between the hesitancy to self-report physical or mental conditions and the need to protect the public from those who are truly impaired. For reference, the old and new questions are noted below.

Pre-2019: “Have you had any current or past mental or physical condition or any current or previous physical or mental illness which may impact your ability to practice medicine with reasonable skill and safety?”

Spring 2018 revision: “Do you currently have or have you had any serious physical or mental condition in the past five (5) years which in any way may impair or limit your ability to practice medicine with reasonable skill and safety?”

New Question (with emphasis on relevant changes): “Are you **currently** suffering from any physical or mental condition **for which you are not being appropriately treated** that **impairs your judgement** or that would otherwise adversely affect your ability to practice medicine with reasonable skill and safety?”

The new question now emphasizes “current” conditions, moving away from a five-year interval. This better aligns with the move by several states to focus on current impairment only. It also aligns more closely with current practice as a diverse range of professional regulatory agencies work to comply with modern interpretations of the Americans with Disabilities Act.<sup>5</sup>

One issue to consider is that we previously added an emphasis on the term “impairment” as opposed to “impact” based on these current practices.

*continued on page 4*

The Federation of State Medical Boards Policy on Physician Impairment in 2011 helps to provide further context on this important concept:

The diagnosis of an illness does not equate with impairment. Impairment is a functional classification of severity and can change over time rather than being a static phenomenon. Illness, per se, does not constitute impairment. When functional impairment exists, it is often the result of an illness in need of treatment. Therefore, with appropriate treatment, the issue of potential impairment may be resolved while the diagnosis of illness may remain.<sup>6</sup>

Given this context, impairment serves as the foundation for our current question, not the mere diagnosis or treatment of a given condition. Proper treatment should suffice to mitigate concerns of impairment or adverse affect. This is intended to encourage professionals to seek the help they may need without concern for regulatory action. In this arena it has been interesting to see how small changes (even in language) can have a large impact.

The new application addendum and renewal forms will be released shortly and available to view through links on the Idaho Board of Medicine website. Please do not hesitate to contact the board with any questions.

-----

#### References:

1. License Renewal Time Again. Idaho Board of Medicine Newsletter. Winter 2018. <https://bom.idaho.gov/BOMPortal/BOM/Newsletters/2018%20Winter%20Newsletter.pdf> . Accessed 8/30/2019.
2. Dyrbye LN, West CP, Sinsky CA, et al. Medical Licensure Questions and Physician Reluctance to Seek Care for Mental Health Conditions. Mayo Clinic Proceedings. 92: 1486 - 1493, 2017.
3. Noseworthy J, Madara J, Cosgrove D, et al. Physician Burnout Is A Public Health Crisis: A Message To Our Fellow Health Care CEOs. Heal Aff Blog. 2017. doi:10.1377/hblog20170328.059397. <https://www.healthaffairs.org/doi/10.1377/hblog20170328.059397/full/>. Accessed 8/30/2019.
4. Grajcar M. Physician Burnout. Idaho Board of Medicine Newsletter. Winter 2019. <https://bom.idaho.gov/BOMPortal/BOM/Newsletters/2019%20Winter%20Newsletter.pdf> . Accessed 9/1/2019.
5. Jones JTR, North CS, Vogel-Scibilia S, et al. Medical Licensure Questions About Mental Illness and Compliance with the Americans With Disabilities Act. Journal of the American Academy of Psychiatry and the Law. 46:458-471, 2018.
6. Federation of State Medical Boards. Policy on Physician Impairment, 2011. <https://www.fsmb.org/siteassets/advocacy/policies/physician-impairment.pdf> . Accessed 8/25/2019.

# Physician Vitality Program

ACMS has developed this program recognizing the crushing workload and unique stressors that physicians and other clinicians face today. It is provided as a benefit of ACMS membership with confidential, convenient, competent, and cost-free access.

Up to 8 appointments are allowed in a one year period for our members. Your employer, the Board of Medicine, and ACMS will not be informed when you utilize this service.

TO MAKE AN APPOINTMENT  
OR FIND ADDITIONAL RESOURCES

[www.PhysicianVitality.org](http://www.PhysicianVitality.org)  
208-336-2930

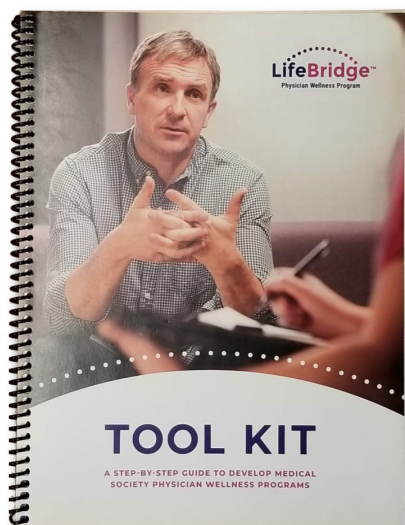


Photo by Pressfoto / Freepik

## Rediscover

Mental and Emotional Vigor  
Meaningful Life and Work  
Personal Development

## Interested in Starting a Program to Serve Your Local Doctors?



## Consider Building a LifeBridge™

Over the past few years, more than a dozen county medical societies have started confidential physician counseling or coaching programs to serve their members. The LifeBridge™ toolkit provides more than 130 pages of background guidance, samples, tips, and options to get your local program started more quickly. In addition, the LifeBridge™ trademark is freely available to any medical association who wants to start a similar program.

This project was funded by a grant from Physicians Foundation.

Download the FREE Toolkit at [physicianwellnessprogram.org](http://physicianwellnessprogram.org)



# Idaho Naturopathic Medical Board



The Idaho Board of Medicine (the “Board”) is pleased to announce that it has expanded its licensing categories to include Naturopathic Medical Doctors. Naturopathic Medical Doctors, or NMDs, have graduated from an accredited, four-year post-graduate naturopathic medical program. They are trained as primary health care providers, diagnosing, treating, and managing patients with both acute and chronic conditions, while emphasizing whole patient health through prevention and natural therapies.

NMDs have completed a minimum of 4,100 hours of specialized education, including courses in biomedical sciences, environmental and public health, pharmacology, diagnostic courses, and therapeutic courses. Of the 4,100 hours, a minimum of 1,200 clinical training hours are required. In order to be licensed in Idaho, NMD’s must pass the professional licensing NPLEX examinations.

The Board has appointed a Naturopathic Medical Board, which convened its first official meeting on July 1, 2019. The Naturopathic Medical Board will advise the Board on licensing and disciplinary issues involving Naturopathic Medical Doctors. As one of its first official acts, the Naturopathic Medical Board approved a draft of administrative rules which was forwarded to the Board of Medicine for review at its official Board meeting on August 1, 2019. The rules approved by the Board will be the subject of negotiated rule-making in September and October, and will be before the Idaho Legislature in January, 2020. The Board will begin issuing licenses to NMDs on July 1, 2020.

As with all of the Board’s licensees, NMDs

will be subject to the Board’s jurisdiction with regard to their practice, and will be required to meet or exceed the relevant standard of care. The Board’s greatest priority remains the protection of the public and ensuring that Idahoans have access to quality medical care.

The Naturopathic Medical Board consists of five Idaho resident members appointed by the Board. Three licensed naturopathic physicians (NMD), one licensed MD or DO, and one public member.

The inaugural five appointed members of the Naturopathic Medical Board are:

**Dr. Joan Haynes, NMD (Chair)** has been in practice since 1998. After graduating from the University of Arizona and later from the federally accredited, 4-year, National University of Natural Medicine, in Portland Oregon. She then completed a 1-year Family Practice Residency.

Dr. Haynes provides comprehensive general care for the whole family, treating both recent illnesses and ongoing chronic problems, self-responsibility and prevention. She uses lab testing, nutrition, herbs, homeopathy, supplementation and lifestyle counseling to help people recover their health.

**Dr. Brandi Solace, NMD** is a licensed, board-certified Naturopathic Physician and director of Solace Natural Medicine. She received her degree from Bastyr University in Seattle, Washington and has been practicing in McCall since 2007. Dr. Solace is a member of the Idaho Chapter of the American Association of Naturopathic Physicians.

*continued on page 7*

**Cory Szybala, NMD** After obtaining a degree in biochemistry from Indiana University Cory spent a number of years working in a hospital setting as a nursing assistant as well as in research working in the fields of neuroscience and endocrinology. During his time as a research assistant he was able to help develop a novel therapy for epilepsy following a traumatic brain injury and an artificial pancreas for individuals living with type I diabetes.

Cory earned his doctorate from the National University of Natural Medicine in Portland, Oregon in 2014. He has a unique perspective and passion for integrative medicine, and following his years working as a primary care provider in Portland, Oregon he understands the benefits of both conventional and natural medicine.

He believes in helping each of his clients (re)discover their optimal health by helping them remove any obstacles to cure while nurturing a healthy state of being using an integrative approach (e.g. diet and lifestyle, counseling, herbal medicine, homeopathy, and vitamin or mineral supplementation, if necessary).

**Martin Tubach, MD** has been a practicing ENT physician in Boise for 19 years and is dedicated to helping provide the highest quality and diversity of health care possible in Idaho. He is active and in touch with Allopathic practices of health care but sees a need for better integration of other types of health practitioners. He has experience and additional education in Functional Medicine, Naturopathic practices, as well as Integrative medical therapies.

With this recognition and expansion of health care providers, he would like to be a part of holding up standards and over-

sight that can give these practices integrity and the most benefit to the community, Furthermore, it has become obvious to him that our society needs healing techniques that utilize less expensive and more natural solutions to treat and prevent the underlying causes of disease.

He feels expanding the community's access to primary care practitioners that can develop a lasting relationship with their patients and provide this type of care solves many problems in health care we currently face.

**Kelsey Jae Nunez, JD** is an attorney and small business owner. Her solo law practice, Law for Conscious Leadership, is dedicated to social entrepreneurship and collaborative culture. She was a founding member of the sustainability consulting firm, Warm Springs Consulting. This summer, Kelsey and her partners in The Vervain Collective opened a new plant based-apothecary in Garden City. It features a well-curated retail space, a consultation room for naturopathic medical doctors and other natural health care providers, and a community classroom.

She received a Bachelors Degree in Biology with Honors from the University of Idaho in 2003 and graduated cum laude from Pepperdine University with a Juris Doctor / Master of Public Policy in 2007. She is licensed to practice law in Oregon and Idaho and is a fellow with the Sustainable Economies Law Center.

She is a member of the Idaho Chapter of the American Association of Naturopathic Physicians (IDAANP) as well as the Oncology Association of Naturopathic Physicians (OncANP).



## Board Changes and Newly Appointed Members

As a part of the Board's 2019 overhaul of its Medical Practice Act and administrative rules, changes were made to the composition of the Medical Board as well as the Physician Assistant Advisory Committee.

The Medical Board now consists of 11 members (increased from 10) and includes a physician assistant member.

The Physician Assistant Advisory Committee will consist of 5 members appointed by the Board (increased from 3). Four members will be Idaho licensed physician assistants and one will be a public member.

The Board of Medicine and Committee on Professional Discipline took on new leadership in 2019. Kathleen Sutherland, MD's term expired as Board Chair and Steven Malek, MD was elected to take her place as new Chair. David McClusky III, MD was appointed new Board Vice Chair, and Laura McGeorge, MD was elected Chair of the Committee on Professional Discipline.

Also in the first half of this year, several new members were appointed to the Board of Medicine and Committee on Professional Discipline as well as to the Physician Assistant Advisory Committee, Dietetic Licensure Board and Respiratory Licensure Board:

**Dr. Catherine Cunagin, MD** is a newly appointed member of the Board of Medicine.

She is an orthopedic surgeon with St. Luke's Health System in Boise, specializing in geriatric fracture care and emergent orthopedics.

Dr. Cunagin moved to Idaho in 2013 after three years of general practice in Baton Rouge, Louisiana. Originally from South Carolina, she attended medical school at the Medical University of South Carolina.

She completed residency in orthopedic surgery at the Harvard Combined Orthopedic Residency Program in 2008. After residency, she complet-

ed two fellowships, one in orthopedic sports surgery and another in orthopedic trauma.

**Keith E. Davis, MD** is a newly appointed member of the Board of Medicine.

He is a board certified family physician from Shoshone, Idaho, and is owner, CEO and medical director of the independent Shoshone Family Medical Center he founded in 1985.

He was born in Dallas, Oregon, and grew up Tangent, Oregon, then a town of 300 people. He earned his BS Chemistry and BA Biology from Pacific Lutheran University (Tacoma), then his MD at George Washington University (DC), and his Family medicine residency at University of Iowa (Iowa City). He and his wife Diane raised their three children in Shoshone.

He was Lincoln County Coroner 1999-2018 and continues as Medical Director of Lincoln County EMS. He was the American Academy of Family Physicians' 2014 Family Physician of the Year.

**William H. Miller, Jr., MD** is a newly appointed member of the Committee on Professional Discipline.

He is staff psychiatrist at Kootenai Psychiatric Center in Coeur d'Alene, ID and Behavioral Health Director of the Coeur D'Alene Family Practice Residency.

Dr. Miller received his MD in 1977 from Northwestern University in Chicago, IL and completed a residency in obstetrics and gynecology before going into private practice as an OB/GYN in Medford, OR.

In 1989, he completed a psychiatry residency at Oregon Health Sciences University in Portland, OR, relocated to Kentucky and became staff psychiatrist at University of Kentucky Medical Center and Charter Ridge Hospital in Lexington. In 1991, he moved to Coeur D'Alene, established a private outpatient psychiatry practice and began practicing at the Kootenai Psychiatric Center as staff psychiatrist.

During his career, Dr. Miller has also been a consulting psychiatrist and medical director for several non-profit clinics and chemical dependency treatment centers.

*continued on page 9*



Dr. Miller is still currently board certified in both obstetrics and gynecology and psychiatry.

**Paula Phelps, PA-C** is the first Governor-appointed physician assistant member of the Medical Board.

She was the first faculty hire at the Idaho State University PA Program in 1995. She has implemented countless new and innovative curricula. During her tenure, the Program has grown from 20 students per class on one campus to 72 students per class divided over three campuses. Meridian was added in 2007 and the partnership campus with College of Idaho was added in 2014.

In addition to multiple positions within the PA Program, Ms. Phelps has also maintained a continuous one day a week clinical practice since 1995. She has worked and volunteered as a PA in migrant health with underserved Latino populations in Idaho and internationally. Ms. Phelps has learned firsthand the importance of bilingual/bicultural knowledge and skills and the lack of resources in rural Idaho.

She and her husband have been married for over 30 years and have 2 adult daughters, one a medical student in the Idaho TRUST program at WWAMI, and the other graduating from College of Idaho in May 2020.

**Anntara Smith, PA-C** is a newly appointed member of the Physician Assistant Advisory committee.

She is a Boise native who Graduated from Idaho State University with a BS in Physician Assistant Studies in 2003 followed by a Masters Degree from A.T. Still in 2014.

Anntara currently lives in Boise where she has enjoyed a varied practice including orthopedics, family medicine, mental health, and HIV primary care. In 2011, Ms. Smith joined Idaho State University as faculty in the Physician Assistant Program where she is currently the Clinical Coordinator.

She has enjoyed the opportunity to serve in the community on the ISU Alumni Board of Directors and many roles including President within the

Idaho Academy of Physician Assistants. She looks forward to her newest role on the Board of Medicine PA Advisory Committee.

**Sue Stillman Linja, RDN, LD** is a newly appointed member of the Dietetic Licensure Board.

She has 30+ years of experience working with nutrition and the aging. She and her business partner have built a successful consulting practice which provides contract work for nearly 55 dietitians in 10 states, servicing a wide variety of health care clients.

Sue is a researcher, author, and a sought-after speaker in the area of nutrition, long term care and longevity. She has recently published The Alzheimer's Prevention Food Guide and presented a TED Talk titled The Road to 100.

Sue has held leadership positions in the Academy of Nutrition and Dietetics, the Idaho Health Care Association/Idaho Center for Assisted Living, Idaho Women's Charitable Foundation and Treasure Valley Dietetic Association. She is Co-founder, Officer and President of S&S Nutrition Network, Inc., LTC Nutrition Consulting, LLC, and Nutrition and Wellness Associates, LLC.

**Lutana Haan, RT** is a newly appointed member of the Respiratory Therapy Licensure Board.

Idaho native and Boise State Alumni, she grew up in McCall, Idaho and came to Boise State, finding a good fit in the Respiratory Care (RC) Program. She worked in Sleep Medicine for 7 years at St. Luke's Regional Medical Center.

Lutana came to teach at Boise State University in 2003 and began to teach in the RC Program. She went on to get a master of Health Science Degree and is currently working on Doctorate of Education Leadership through the University of New England.

Her area of expertise is in sleep medicine and career pathways in RC. She served as Department Chair in RC and is currently Assistant Dean in the College of Health Science.

ECHO IDAHO is a webinar lecture series that provides medical training and mentoring to healthcare professionals around the state of Idaho. ECHO allows Idahoans to gain access to specialty and high-quality primary care in rural and underserved areas by offering training to the providers in these areas using videoconferencing software. Sessions are free, one hour a week, and take place over the lunch hour. ECHO also offer free CME with two tracks: Opioid Addiction and Treatment, and Behavioral Health in Primary Care. Sessions include a short didactic presentation and a de-identified patient case consultation.

Project ECHO strives to be as helpful a resource as possible to clinicians like you. Please take this brief [survey](#) to let ECHO Idaho know how they can be more helpful to you.

In the survey, you can let us know about items such as the following:

1. Healthcare issues you see in your practice or region about which you would like to receive more training
2. Healthcare issues in Idaho you feel need more attention
3. How ECHO can be more convenient for you

You don't have to have attended ECHO to take this survey, and you can enter to win a \$50 gift card! Please help ECHO understand your practice's unique healthcare challenges, so they can better help patients in Idaho.

## CDC Advises Against Misapplication of the Guideline for Prescribing Opioids for Chronic Pain



In a recent commentary in the *New England Journal of Medicine* (NEJM), the authors of the 2016 CDC guideline warned that misapplication of the guideline can risk patient health and safety.

The CDC is now advising that some practices that cite the guidelines are inconsistent with, and go beyond, its recommendations. In a media statement, it highlighted the following issues that could put patients at risk:

- **Misapplication of recommendations to populations outside of the Guideline's scope.** The Guideline is intended for primary care clinicians treating chronic pain for patients 18 and older. Examples of misapplication include applying the Guideline to patients in active cancer treatment, patients experiencing acute sickle cell crises, or patients experiencing post-surgical pain.
- **Misapplication of the Guideline's dosage recommendation that results in hard limits or "cutting off" opioids.** The Guideline states, "When opioids are started, clinicians should prescribe the lowest effective dosage. Clinicians should avoid increasing dosage to  $\geq 90$  MME/day or carefully justify a

decision to titrate dosage to  $\geq 90$  MME/day." The recommendation statement does not suggest discontinuation of opioids already prescribed at higher dosages.

- **The Guideline does not support abrupt tapering or sudden discontinuation of opioids.** These practices can result in severe opioid withdrawal symptoms including pain and psychological distress, and some patients might seek other sources of opioids. In addition, policies that mandate hard limits conflict with the Guideline's emphasis on individualized assessment of the benefits and risks of opioids given the specific circumstances and unique needs of each patient.
- **Misapplication of the Guideline's dosage recommendation to patients receiving or starting medication-assisted treatment for opioid use disorder.** The Guideline's recommendation about dosage applies to use of opioids in the management of chronic pain, not to the use of medication-assisted treatment for opioid use disorder. The Guideline strongly recommends offering medication-assisted treatment for patients with opioid use disorder.

\* For further guidance and resources, visit the CDC web page <https://www.cdc.gov/media/releases/2019/s0424-advises-misapplication->



Public members to serve on Prelitigation Hearings for consideration of Medical Malpractice claims for damages against physicians or licensed acute care general hospitals in Idaho.

Lay Panelist volunteers must be responsible adult citizens of Idaho but may not be lawyers, physicians or hospital employees. Lay Panelists may serve more than one (1) time in a year as a member of a Prelitigation Hearing Panel.

The composition of a Prelitigation Hearing Panel includes one (1) Idaho licensed physician; one (1) layman panelist; one (1) resident lawyer and one (1) person serving as an administrator of a licensed acute care general hospital in cases involving claims against hospitals.

If a Lay Panelist agrees to serve, he/she receives copies of documents and/or medical records for review before the Prelitigation Hearing. At the Prelitigation Hearing, the Lay Panelist will meet with the other Panelists and hear the claim made by or on behalf of any patient who is an alleged victim of medical negligence. Upon deliberation, the Hearing Panel issues an Advisory Decision and returns all copies of documents and/or medical records to the Board. A Prelitigation Hearing will typically last two (2) hours, but may vary in duration.

In order to properly convene future Prelitigation Hearing Panels, the Board must recruit Lay Panelist volunteers in the following six regions: Hearings are held in each Region.

Region 1 - Boise  
Region 4 - Coeur D'Alene

Region 2 - Idaho Falls  
Region 5 - Lewiston

Region 3 - Pocatello  
Region 6 - Moscow

**How to Apply:** The Board would appreciate receiving name(s) and telephone numbers(s) of possible volunteers to be Lay Panelists by contacting Jennifer Woodland, in Prelitigation.

Email: [Jennifer.woodland@bom.idaho.gov](mailto:Jennifer.woodland@bom.idaho.gov)

Telephone: 208.577.2509



## Rx Profiles

Please access the Board of Pharmacy Prescription Drug Monitoring Program (PMP) to review your patients' profiles. In a single minute you can improve the safety and efficacy of the care you provide your patients.

For information on how to access the PMP, visit the Board of Pharmacy website <http://bop.idaho.gov/>.

# Board Actions

## Explanation of Terms

The following are non-reportable, non-disciplinary actions:

- **Letter of Concern:** non-disciplinary letter issued for a minor violation the Board feels may pose a risk to public safety.
- **Corrective Action Plan:** confidential, non-reportable practice remediation.
- **Fine:** a fee imposed for failure to provide accurate information on renewal.

The following are reportable disciplinary actions:

- **Stipulation and Order (S&O):** an agreement between the Board and the practitioner regarding authorization to practice or placing terms or conditions on the authorization to practice.
- **Public Reprimand:** a formal admonishment of conduct or practice.
- **Suspension:** temporary withdrawal of authorization to practice.
- **Revocation:** cancellation of the authorization to practice.
- **Administrative Complaint:** occurs when a licensee refuses to sign a recommended stipulation. Commences formal administrative disciplinary hearing process.

### **Behunin, Joseph, M.D. (BOMA-7650), Coeur d'Alene, ID**

Licensee falsely attested on a license application to not having been arrested, charged with or convicted of a felony or misdemeanor other than minor traffic violations regardless of the outcome. Was ordered to pay a \$500 fine. Fine was paid and order terminated on August 13, 2019.

### **Burbank, Nicole, M.D. (M-9657), Coeur D'Alene, ID**

Licensee falsely attested on a license renewal application to not having been a party to any malpractice proceedings since last renewal. Was ordered to pay a \$500 fine.

### **Chamberlain, David, D.O. (O-194), Idaho Falls, ID**

Licensee was a defendant in a settled malpractice lawsuit involving surgical removal of an incorrect kidney. Was issued a public reprimand for care that fell below the acceptable standard in the treatment of a patient in Idaho.

### **Tall, Roger, M.D. (M-4222), Idaho Falls, ID**

Licensee was a defendant in a settled malpractice lawsuit involving surgical removal of an incorrect kidney. Was issued a public reprimand for care that fell below the acceptable standard in the treatment of a patient in Idaho.

### **Zundel, Brett, P.A. (PA-197) Idaho Falls, ID**

Licensee was arrested and charged with Driving Under the Influence (DUI) and thus violated the terms of a Stipulation and Order requiring him, among other terms, to obey all federal, state and local laws. He was ordered to follow recommendations received as the result of inpatient evaluation obtained on May 16, 2019.

♦ ♦ ♦ ♦ ♦ ♦ ♦ ♦ ♦ ♦ ♦ ♦

### **The following licensees had prior Stipulated Orders that were terminated by the Board:**

Behunin, Joseph, M.D. (BOMA-7650), Couer D'Alene, ID

Hill, Richard C., MD (M-4478), Blackfoot, ID

McConnell, Bryan, D.O. (O-1007), Green Valley, AZ

Simon, Tamara, M.D. (M-8909), Eagle, ID



## Idaho State Board Of Medicine

Logger Creek Plaza  
345 Bobwhite Court, Suite 150  
Boise, Idaho 83706

Phone: 208-327-7000

Fax: 208-327-7005

E-mail: [info@bom.idaho.gov](mailto:info@bom.idaho.gov)

Visit our Website at:

[www.bom.idaho.gov](http://www.bom.idaho.gov)

## IDAHO STATE BOARD OF MEDICINE

Steven Malek, MD, Chairman

David McClusky III, MD, Vice Chairman

Julia Bouchard, MD, Member

Catherine Cunagin, MD, Member

Keith Davis, MD, Member

Erich Garland, MD, Member

Mark Grajcar, DO, Member

Paula Phelps, PA, Member

Ked Wills, ISP, Member

Michele Chadwick, Public Member

Erwin Sonnenberg, Public Member

## COMMITTEE ON PROFESSIONAL DISCIPLINE

Laura McGeorge, MD, Chairman

Barry Bennett, MD, Member

William Ganz, MD, Member

William H. Miller, MD, Member

Robert Yoshida, Public Member

## Naturopathic Medical Board

Joan Haynes, Chairman

Brandi Solace, NMD, Member

Cory Szybala, NMD, Member

Martin Tubach, MD, Member

Kelsey Nunez, JD, Public Member



## Board Staff

Anne Lawler, Executive Director

Angela Wickham, Associate Director

Shasta Kilminster-Hadley, Board Attorney

Phyllis Tambling, Licensing Manager

Margaret Major, Executive Assistant

Frutoso Gonzalez, Medical Investigator

Darlene Parrott, Medical Investigator

Jason Weaver, Medical Investigator

Debbie Mitchell, Medical Investigator

Felicia Kruck, Investigations Specialist

Elisha Fawkes, Licensing Specialist

Jodi Adcock, Licensing Specialist

Pam Thornburg, Licensing Specialist

Claudia Lawson, Licensing Specialist

Jennifer Woodland, Pre-litigation Specialist

Debbie Taylor, Financial Technician

Jennifer Strange, Reception and Administrative Asst.

## Physician Assistant Advisory Committee

Mary Eggleston Thompson, PA (Chair)

Heather M. Frazee Whitson, PA  
Anntara Smith, PA

## Board of Athletic Trainers

Richard Bingham, AT (Chair)

Forrest Pecha, AT

James Spooner, AT

Alta Graham, Public Member

## Dietetic Licensure Board

Rebecca Tufts Sulik, LD (Chair)

Katie Rebecca Miner, LD

Renee Watson, Public Member

Suzanne Marguerite Linja, LD

## Respiratory Therapy Licensure Board

Michelle Jarvis, Public Member (Chair)

Carla Miller, RT, RPSGT

David Blakeman, RT

Erica Mazarrella, RT

Lutana Haan, RT