



Alabama Board of Medical Examiners Newsletter and Report

www.albme.org

January – March 2009

Volume 24, Number 1

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Collaborative Practice: Be aware of new rules by CMS

by George C. Smith Jr.*

As the current chairman of the committee that helps to oversee collaborative practices, which is a cooperative endeavor between the Alabama State Board of Nursing and the Board of Medical Examiners, I have been concerned about the rising number of physicians who are failing to properly utilize the system. There are currently 1,846 collaborative practices involving certified registered nurse practitioners (CRNPs) and certified nurse midwives (CNMs) in the state of Alabama. A total of 1,228 physicians are involved in these collaborative practices (many physicians have more than one practice). The total number of CRNPs at this time in Alabama is 1,726 and there are 28 CNMs in the state of Alabama.

Every month the Board of Nursing receives over 100 new applications for collaborative practices or applications for changes in practices involving skills, location, or physicians. Because of a recent CMS rule change, it is vitally important that the paperwork involving these applications be as correct and as timely as possible. These rules mandate that a successful application for provider privileges with CMS programs must be completed within a 30 day window prior to the issuance of the proper credentials and numbers.

Previously, CMS regulations allowed a provider to bill Medicare for services rendered within 27 months prior to the “effective date of enrollment,” in other words, the date of approval by the Medicare contractor. CRNPs on temporary approval were allowed provider status while awaiting final approval for collaborative practice. The new CMS rules also require that the application include an NPI number (a separate application), and, as mentioned above, this must be obtained within the 30 day window. Since the respective Boards meet only once a month, and the joint committee only meets every other month, the importance of filing your paperwork completely and accurately along with the appropriate fees is self evident, and if not done correctly, will cost the collaborative practice time and money.

It is vitally important that the nurse professional submit his or her application to the Board with all the blank spaces filled out, particularly the information regarding the physician, including

(continued on page 3)

**Dr. Smith practices family and emergency medicine in Lineville and Anniston, Ala., and is actively engaged in collaborative practices. He is board certified in family medicine and has been a member of the Board of Medical Examiners since 2005.*



George C. Smith Jr., MD

CRNPs on temporary approval by CMS are no longer allowed provider status while awaiting final approval for collaborative practice.

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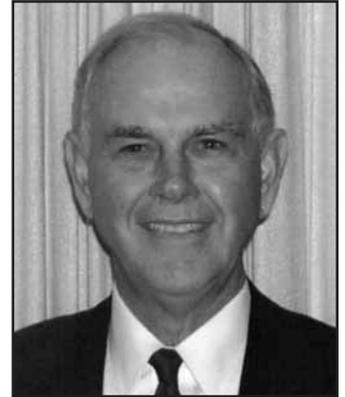
Patricia Shaner, General Counsel

Carla Kruger, Staff Editor

**A Message from the Executive Director
Annual Report of the Alabama BME**

by Larry Dixon

In 2008 there was a small increase in the number of newly licensed physicians in Alabama, with 643 approved applicants by endorsement and 136 approved applicants by examination, six more approved applicants than in 2007. The Board of Medical Examiners and its staff have compiled the following Annual Report for your information.



Larry Dixon

**Alabama Board of Medical Examiners
Annual Report – 2008**

**Applicants Certified to Medical Licensure
Commission**

- 1. Applicants by endorsement.....643
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- 2. Applicants by examination136

Applicants Certified for Limited License87

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ACSC Issued/Renewed11,501

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- 1. ACSC Surrender/Revocation/Restriction/Reinstatement3
- 2. Certificates of Qualification Denied/Surrendered4
- 3. Certificates of Qualification with Agreements/Restrictions3
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- 4. Letters of Concern138
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Collaborative Practice News

continued from page 1

board certification, licensure, etc. The Board of Medical Examiners uses this information to certify that the physician is approved for a collaborative practice. The appropriate skills and practice locations should also be filled out accurately and completely. All physicians involved should sign in the appropriate places on the form. Remember, there is a separate form for the Board of Medical Examiners that must be filled out by the physician and submitted to the Medical Board along with the \$100 collaborative practice fee. This fee is due upon initiation of a collaborative practice; thereafter, for each collaborative practice there is an annual fee. The collaborative practice is not approved until the initial fee is paid.

The application forms are legal documents and should be read carefully and thoughtfully. The Board has had too many physicians pleading that they did not carefully review what they were signing or did not understand their responsibilities as a collaborating physician.

If you are a collaborating physician, it is your responsibility to make sure that the Board of Medical Examiners has an accurate address and telephone number in order to reach you. Also providing a current email address that you check often can be helpful if the Board needs to contact

you. It is your responsibility to live up to the Quality Assurance standards of the collaborative practice agreement. It is your responsibility to pay or have paid on your behalf the fee on a yearly basis. Failure to do these things might bring you to the attention of the Board of Medical Examiners.

We want and encourage the growth of collaborative practices in the State of Alabama. At present, there are several initiatives with the Board of Nursing to try to streamline the process and make it more user friendly. Our staff at the Board of Medical Examiners is willing and able to help answer your questions or problems regarding these issues. If you would like to discuss any of these matters with the Board staff, please contact Cheryl Thomas, RN, or Patricia Enfinger, RN, at (334) 242-4116 or by email at cthomas@albme.org or penfinger@albme.org.

On the Net:

CMS web site: <http://www.cms.hhs.gov/>

Medical Board Web page concerning collaborative practices:

<http://www.albme.org/Default.aspx?Page=CollPrac>

Annual Report

continued from page 2

6. Complainant Inquiries Resolved.....	756
7. Complainant Inquiries Pending.....	11
8. Complainant Formal Investigations.....	137
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9. Collaborative Practice Inspections.....	110
10. Collaborative Practice Compliance Seminars.....	6
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22. Voluntary Surrender of Alabama Medical License.....	2

Do You Perform Surgery, Treatments or Examinations with any Sedation?

If so, you may be required
to register with the
Alabama Board of
Medical Examiners
and maintain specific
equipment, procedures
and records in your office
or clinic. Check the
Helpful Information
section of the Alabama
Board of Medical
Examiners Web site at
www.albme.org
to determine whether
your practice is required
to register.

Reduce risk of rejected prescriptions by using appropriate prescription formats

With more practitioners using software and e-script devices to print prescriptions (instead of using prescription pads), the Board has been receiving more queries from pharmacists and physicians concerning properly formatted and signed prescriptions.

A physician calls, unhappy because a pharmacist has refused to fill her prescription because it is not in the proper format. She uses software that prints the prescription and has been assured by the vendor that it meets state requirements. What she does not realize is that the format does not meet the Board's requirements because it does not have two lines for "dispense as written" and "product selection permitted." The physician may feel the pharmacist is being nitpicky and obstructionist, not appreciating that the pharmacist places his license at risk if he does not comply with the regulations of his licensing board.

A pharmacist calls, agitated because she has unsuccessfully attempted numerous times to contact a physician or other responsible person at the physician's office about a problem with a prescription, and no one from the doctor's office will return the calls. The prescription is for a Schedule III drug and the signature is not original – it was preprinted with the rest of the prescription. The patient is becoming belligerent because there is a delay in receiving his medication. Finally, the pharmacist contacts the Board for assistance. Board staff attempts to contact the physician and resolve the matter. The physician gets upset because a Board investigator is calling his office.

These sorts of situations may easily be pre-empted by assuring that your prescriptions meet all of the current guidelines. Board rules concern prescriptions for controlled substances specifically, but if all your prescriptions meet the guidelines, then you are less likely to encounter any problems with a pharmacy. There are also state laws that relate to all prescriptions, whether legend or controlled drugs.

Board rules state a controlled substance prescription must:

- Be dated as of, and signed on, the day when issued;
- Bear the full name and address of the patient;
- Bear the drug name, strength, dosage form, and quantity prescribed;
- Bear directions for use of the drug;
- Bear the name, address and ACSC number of the prescriber;
- Contain two signature lines, one for "dispense as written" and the other for "product selection permitted"*; and
- Be written with ink and manually signed (non-electronic, handwritten signature) on the appropriate signature line.

Some prescription software automatically prints the physician's signa-

ture on the prescription. For scheduled drugs, this is not sufficient, because a manual signature is required. In this situation, the Board recommends (short of modifying your software or using prescription pads for these prescriptions) signing manually above the electronically-generated signature on the appropriate signature line.

In Volume 23, Number 1, of the *Alabama BME Newsletter and Report*, we discussed signature requirements for written, computer-generated, oral and e-script prescriptions. It may be useful to review that information.

**This requirement also applies to legend drug prescriptions pursuant to Ala. Code §34-23-8(4) concerning pharmacists and pharmacies.*

On the Net:

Board's prescription guidelines (Rule 540-X-4-.05):

<http://www.alabamaadministrativecode.state.al.us/docs/mexam/MicrftWrd4MEXAM.pdf>

BME Newsletter & Report, Volume 23, Number 1 (see page 8):

<http://www.albme.org/Documents/Newsletters/08NLv23no1.pdf>

Ala. Code §34-23-8:

<http://alisdh.legislature.state.al.us/acas/CodeOfAlabama/1975/34-23-8.htm>

www.albme.org

The following forms are available on the BME's Web site:

- Retired Senior Volunteer license application
- CME worksheet
- Request for waiver from CME due to retirement
- Address change form
- Application for replacement of lost or destroyed license
- Malpractice payment report form for insurance companies
- Dispensing physician registration form
- Office based surgery registration form
- Office based surgery adverse event reporting form
- Laser/pulsed light device procedures registration form
- Laser/pulsed light device procedure adverse event reporting form
- Notification of commencement or termination of collaborative practice
- Collaborative practice QA forms, chart review audits

The Medical Association
of the State of Alabama

and

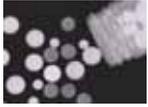
The Alabama Board of
Medical Examiners

present



PRESCRIBING CONTROLLED DRUGS:
CRITICAL ISSUES AND COMMON PITFALLS

The 2009 Series



SEMINAR DETAILS

Yesterday's newspaper headlines decry the under treatment of pain by physicians and we even hear of lawsuits against physicians who are accused of the under treatment of pain. Today's newspaper headlines bemoan the rampant abuse of prescription drugs. We increasingly hear of prescription drug overdoses and rumors that the DEA is in our neighborhood.

You wonder if your teenage patient who is a football star is on steroids since he suddenly bulked up and looks like he can bench press you. He has been acting somewhat aggressive.

Overweight and normal weight patients, whose definition of exercise is pulling the plug in the drain and fighting the current as the water goes out of the bathtub, are beating down your door demanding medication to help them lose weight.

This seminar will give you the opportunity to hear from experts that will hopefully help you be able to handle similar situations in an appropriate manner. You will learn some dos and don'ts as well as practical applications that you can use daily. We all want to prescribe appropriately so that we treat and do good for our patients and do no harm.

TARGET AUDIENCE

All physicians licensed in Alabama who prescribe controlled substances.

SEMINAR TOPICS

Basic and Advanced Pain Management

Dan Doleys, PhD, Director of The Doleys Clinic/Pain and Rehabilitation Institute

Upon completion of this educational activity, participants will be able to:

- Describe the complex array of causes of chronic pain.
- Define alternative therapies that should be considered and/or tried before chronic opioid therapy.
- Recognize when to continue and when to discontinue chronic opioid therapy.

Hijacking the Brain: Understanding Addiction

Greg Skipper, MD, Medical Director of the Alabama Physician Health Program

Upon completion of this educational activity, participants will be able to:

- Diagnose addiction and the primary ways it is different from chronic pain.
- Describe the pathophysiology of addiction and the common pathway of all addictive drugs.
- Cite what to do if addiction is suspected and how to intervene.

URine Luck: All about Drug Testing

Greg Skipper, MD, Medical Director of the Alabama Physician Health Program

Upon completion of this educational activity, participants will be able to:

- Describe the different media (e.g., urine, blood, hair, etc.) that can be tested and the pros and cons of each.
- Define different types of drug tests (e.g., quick test, screening tests, confirmation testing, etc.) and the pros and cons of each.
- Describe the drug test panels and the importance of selecting the proper panel.

Current Trends: The Entrepreneurial Patient and Obtaining Controlled Substances by Deception

Jeff Grimsley, Alabama Board of Medical Examiners Investigator

Ed Munson, Alabama Board of Medical Examiners Investigator

Upon completion of this educational activity, participants will be able to:

- Define the role and responsibility of a health professional regarding drug diversion, doctor shopping, etc.
- Identify basic scam techniques.
- Describe what to do when a scam is suspected.

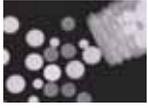
Common Problems in the Medical Office: Mistakes and How to Avoid Them

Jeff Grimsley, Alabama Board of Medical Examiners Investigator

Ed Munson, Alabama Board of Medical Examiners Investigator

Upon completion of this educational activity, participants will be able to:

- Describe the most common errors BME investigators see.
- Demonstrate understanding of the importance of good quality records, including legible handwriting and proper signatures.
- Translate the Alabama Board of Medical Examiners' *Guidelines to Prescribing for Chronic Pain*.



SEMINAR DETAILS

The Alabama PDMP: What it is, What it is For and How to Use it

Donna Jordan, MPA, PDMP Program Manager for the Alabama Department of Public Health

Upon completion of this educational activity, participants will be able to:

- Explain what PDMP is.
- Explain how PDMP works.
- Describe how to access information, some of the problems that may be encountered and how to avoid them.

Prescribing for Obesity: Dos and Don'ts (Mostly Don'ts!)

Jamy Ard, MD, Assistant Professor of Nutrition Science and Medical Director of UAB's Eat Right Weight Management Program

Upon completion of this educational activity, participants will be able to:

- List various medications that should **not** be used because of their risk and lack of evidence for efficacy.
- Cite which medications may have efficacy but are still questionable.
- Demonstrate understanding of the various medications that are being developed that hold promise.

Is There a Role for Androgenic Steroids in Medical Practice?

Shawn Harvey, MD, Partner, Grayson & Associates, PC

Upon completion of this educational activity, participants will be able to:

- Describe the risks of prescribing androgenic steroids.
- Recognize the signs of addictiveness of steroids.
- Define ways to test for androgenic steroid abuse.

Polypharmacy and Overdose Deaths in Alabama: An Epidemic?

Steve Boudreau, MD, FRCP, Director C.R. Rabren Laboratory, Department of Forensic Sciences, State of Alabama

Upon completion of this educational activity, participants will be able to:

- Interpret the statistics on overdose deaths in Alabama.
- Delineate the most common drugs involved in overdose deaths.
- Describe ways to prevent overdose deaths.

Workshop One: Non-malignant Chronic Pain Management

Upon completion of this educational activity, participants will be able to:

- Define the importance of a functional approach to chronic pain management.
- Examine issues of polypharmacy, use of methadone, suboxone, etc.

Workshop Two: Other Prescribing Problems

Upon completion of this educational activity, participants will be able to:

- Examine issues such as use of diet pills, testosterone, benzodiazepines, etc.
- Define the issue of self-prescribing and prescribing for family members.

Designation and Accreditation Statements

The Medical Foundation of Alabama designates this educational activity for a maximum of 7.25 AMA PRA Category One Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

This activity has been planned and implemented in accordance with the Essential Areas and policies of the Medical Association of the State of Alabama through the joint sponsorship of the Medical Foundation of Alabama and the Medical Association of the State of Alabama. The Medical Foundation of Alabama is accredited by the Medical Association of the State of Alabama to provide continuing medical education for physicians.



SEMINAR REGISTRATION

Registration Fee: The \$225 fee includes all course materials and meals (if applicable). Please see below for registration deadlines. **Note: All registration fees must be paid at time of registration. Attendees will not be allowed to pay or register at the door.**

Cancellation/Refund Policy: If you cancel two weeks before seminar, you will be refunded half of your registration fee and course materials. If you cancel less than two weeks before seminar, you will receive **NO refund** and **NO course materials**.

Name: _____

Company: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ Other: _____

E-mail: _____

Please mark session:

_____ Two-Day Symposium
April 18, 2009 (2 p.m. - 6 p.m.)
April 19, 2009 (10 a.m. - 2 p.m.)

Renaissance Hotel & Spa - Montgomery, Alabama
Registration Deadline: April 6, 2009
For MASA's room block: Call (877) 545-0311
Group Code: MASA 09

_____ Two-Day Symposium
August 1, 2009 (8 a.m. - 3:15 p.m.)
August 2, 2009 (8 a.m. - 11:30 a.m.)

Sandestin Golf and Beach Resort - Destin, Florida
Registration Deadline: July 20, 2009
Room Block Deadline: June 30, 2009
For MASA's room block: Call (800) 320-8115
Group Code: 2274J2

_____ One-Day Symposium
November 20, 2009 (8 a.m. - 5:45 p.m.)

ProAssurance Building - Birmingham, Alabama
Registration Deadline: November 9, 2009

We accept Checks, MasterCard, Visa and American Express

Type of Card: Visa MasterCard American Express

Card Number: _____

Exp. Date: _____ 3- or 4-digit Security Code: _____ Amount: _____

Cardholder: _____

Billing Address: _____

Signature: _____

Your signature constitutes an agreement to pay.

Please return completed registration form and payment to:

Medical Association of the State of Alabama • Attn: Stephanie Fletcher
P.O. Box 1900 • Montgomery, AL 36102-1900 • Phone: 334-954-2500 • Fax: 334-269-5200

Meet the Board

J. Daniel Gifford, MD, currently practices internal medicine/nephrology in Decatur, Alabama, where he has practiced since 1993. He became a member of the Board in June 2006. Dr. Gifford graduated from University of Tennessee College of Medicine and also completed his post graduate education in internal medicine there. He completed additional post graduate training in nephrology at the University of Alabama at Birmingham. Dr. Gifford is board certified in internal medicine and nephrology. In his free time, Dr. Gifford is involved in the Rotary Club of Decatur and is their organist/pianist. He is also a volunteer for the Special Olympics.



J. Daniel Gifford, MD



B. Jerome Harrison, MD

Boyde J. Harrison, MD, became a member of the Board in 2006. Dr. Harrison is a rural family practice physician in Haleyville, where he also maintains an active nursing home practice and collaborations with two nurse practitioners. After receiving a bachelor's degree from

Birmingham Southern College and completing graduate work at Tulane University, he attended the University of Alabama at Birmingham School of Medicine then completed post-graduate training at Georgia Baptist Medical Center. Dr. Harrison is a member of the board of the Alabama Academy of Family Physicians and is a founding member of the Alabama Medical Directors Association. Outside of medicine he enjoys traveling with his wife, Margaret. Other interests include aviation, photography, scuba and music. Dr. Harrison is the pianist for the morning service at First United Methodist Church of Haleyville.

PDMP: A good tool for physicians who prescribe controlled substances

An important part of the Alabama Department of Health's Physician Drug Monitoring Program (PDMP) is a service for physicians that allows them to obtain a report of all the controlled substances dispensed or prescribed to a current or prospective patient: the prescriber/dispenser, the pharmacy/site dispensed, the name, strength and quantity of the drug, and the date.

Physicians are encouraged to register for this free service. All that's needed for registration is to fill out a form and provide certain information to the Health Department and mail it in. Within two weeks you will receive your registration and password.

The PDMP data bank is not just for physicians in a pain control practice. Any physician who prescribes controlled substances to patients would be wise to check to be sure the patient isn't receiving controlled medications from other physicians, using multiple pharmacies or overlapping refills, all signs of possible drug abuse or diversion. Do keep in mind, however, there is a possibility that the information in the data bank is inaccurate. We have seen instances of reports made under the wrong physician and other data input errors. A quick check with the pharmacy and/or other prescriber will confirm the data.

What if you discover a patient is abusing or diverting medications? You can contact the Board of Medical Examiners and discuss your situation "off the record." Senior Investigator Ed Munson can be reached at (334) 242-4116 or emunson@albme.org.

On the Net:

Alabama Department of Public Health Prescription Drug Monitoring Program
<http://www.adph.org/PDMP/>

Meet the Staff

Randy Moore

Ms. Moore was employed by the Board in 2001 to act as the Director of Physician Extender Services and the Malpractice Review Coordinator. She is responsible for the licensing and registration of all Physician Assistants and Anesthesiologist Assistants as well as coordinating all requests and approvals for training or additional duties.

As Malpractice Review Coordinator, Ms. Moore's responsibilities include requesting and collecting information from physicians concerning malpractice judgments or settlements that have been reported to the Board and coordinating the annual malpractice case review, where the collected information is reviewed by Board members.

Report of Public Actions of the Medical Licensure Commission and Board of Medical Examiners

MLC – January 2009

◆ On Jan. 8, the Commission entered an Order placing on indefinite probation the license to practice medicine in Alabama of **Jeffrey D. Manord, MD**, license number MD.23436, Winfield, AL.

◆ On Jan. 20, pursuant to an Order of the Alabama Supreme Court dated Jan. 16, 2009, the Commission revoked the license to practice medicine in Alabama of **David G. Morrison, MD**, license number MD.20819, New Orleans, LA.

◆ On Jan. 28, **Jason DiFusco, MD**, license number MD.29388, Rocky Hill, CT, was issued a license to practice medicine in Alabama, subject to a Voluntary Restriction that restricts his practice of medicine to the confines of a postgraduate training program.

BME – January 2009

◆ On Jan. 21, the Board accepted the voluntary surrender of the certificate of qualification and license to practice medicine in Alabama of **Karen M. Fancher, MD**, license number MD.21594, Guntersville, AL.

MLC – February 2009

◆ On Feb. 6, the Commission entered an Order revoking the license to practice medicine in Alabama of **Wallace B. McGahan Jr., MD**, license number MD.9963, Weaver, AL.

◆ On Feb. 11, the Commission entered an Order placing on indefinite probation with conditions the license to practice medicine in Alabama of **Gilberto Sanchez, MD**, license number MD.17969, Montgomery, AL, and assessing an administrative fine.

◆ On Feb. 12, the Commission

entered an Order placing on probation with conditions the license to practice medicine in Alabama of **Barrett James Day, MD**, license number MD.18536, Mobile, AL, and assessing an administrative fine.

◆ On Feb. 12, the Commission entered an Order reprimanding the license to practice medicine in Alabama of **James David Surso, MD**, license number MD.19488, Rogersville, AL, revoking the Alabama Controlled Substances Certificate of Dr. Surso, assessing an administrative fine, and requiring the completion of certain continuing medical education courses.

◆ On Feb. 12, the Commission approved the request of **Janie T. Bush Teschner, MD**, license number MD.14227, Gadsden, AL, to perform social security disability examinations and insurance physicals.

◆ On Feb. 12, the Commission entered an Order removing all restrictions from the license to practice medicine in Alabama of **Carolyn M. Waldo, MD**, license number MD.19995, Rapid City, SD. There remains a restriction placed by the Board of Medical Examiners on Dr. Waldo's certificate of qualification to practice medicine in Alabama.

◆ Upon the stipulation of the parties, on Feb. 25, the Commission entered a Consent Order placing on probation the license to practice medicine in Alabama of **Vinit V. Patel, MD**, license number MD.21022, Fort Payne, AL, and assessing an administrative fine. Terms of probation include continuing medical education and no prescribing authority in Schedules II, IIN, III, IIIN and IV.

◆ Upon the stipulation of the parties, on Feb. 25, the Commission entered a Consent Order placing on probation the license to practice medicine in Alabama of **Bryant Heflin Hudson III, MD**, license number MD.4228, Montgomery, AL, reprimanding the license, assessing an administrative fine, requiring continuing medical education, and requiring the relinquishment of his Alabama Controlled Substances Certificate. Dr. Hudson is also limited to one practice site during the probationary period.

BME – February 2009

◆ The Order of the Board revoking the Alabama Controlled Substances Certificate of **William S. Pennington, MD**, license number MD.1479, Athens, AL, dated Jan. 21, 2009, became effective on Feb. 4, 2009. As of the effective date of the Order, Dr. Pennington is no longer authorized to order, distribute, dispense or prescribe controlled substances.

◆ On Feb. 10, **Nathan B. Collier, MD**, license number MD.7913, Gadsden, AL, voluntarily surrendered his certificate of qualification and license to practice medicine in Alabama. Dr. Collier is no longer authorized to practice medicine in Alabama.

◆ On Feb. 25, the Board entered an Order denying the request for removal of restrictions on the certificate of qualification to practice medicine of **John J. Villaverde, MD**, license number MD.11177, Birmingham, AL.

MLC – March 2009

◆ Upon the stipulation of the parties, on March 5, the Commission entered an Order reprimanding the license to

continued on page 11

News from the Federation of State Medical Boards

New physician re-entry to practice resources available

The Physician Re-entry into the Workforce Project has added additional resources to its Web site (www.aap.org/reentry) for physicians seeking information on re-entry to the workforce. New resources include a table of physician re-entry regulations for each state, and a recent article from the Family Practice Management journal discussing steps physicians should take for successful disengagement from clinical practice. The Physician Re-entry into the Workforce Project is a collaborative endeavor to examine the diverse issues encompassed under the rubric of "re-entry," and to create guidelines, recommendations and strategies that will serve participating organizations and members. Representatives from the FSMB serve on two of the project's workgroups.

HHS releases updated family history web tool

The U.S. Department of Health and

Human Services has released an updated version of the Surgeon General's Internet-based family health history tool. The new tool is designed to make it easier for patients to assemble and share family health history and can also help practitioners make better use of health history information. For more information, please go to www.hhs.gov/news/press/2009pres/01/20090113a.html.

New Health Care Notification Network (HCNN)

There is a new, free online service that delivers FDA-mandated drug alerts to health care providers electronically, replacing the current paper notification process via U.S. mail. The HCNN was developed in collaboration with the FDA, U.S. liability carriers, the American Medical Association and major medical societies, health plans and the National Patient Safety Foundation. Please see <http://www.hcnn.net/> for more information.

New CME courses, educational resources added to pharmaceutical marketing practices Web site

Five new educational courses were recently added to a FSMB-hosted Web portal (www.fsmb.org/re/open/default.html) providing practitioners with access to free, accredited CME courses about pharmaceutical industry marketing techniques. The new courses are:

- Off-label use of pharmaceuticals;
- Accessing and appraising unbiased drug information;
- Addressing patient inquiries about specific medications advertised directly to consumers;
- Communicating with patients;
- Organizational influences on prescribing; and
- Pharmaceutical marketing.

Most of the 25 courses available on the portal are free of charge to licensed medical prescribers.

Public Actions

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practice medicine in Alabama of **Delphia E. Marshall, MD**, license number MD.25273, Clarksdale, MS, assessing an administrative fine and costs, and requiring completion of certain continuing medical education.

◆ On March 13, the Commission's Order dated March 11, 2009, revoking the license to practice medicine in Alabama of **David R. Jenkins, MD**, license number MD.13060, Bayou La Batre, AL, became effective. Dr. Jenkins is no longer authorized to practice medicine in Alabama.

BME – March 2009

◆ On March 18, the Board accepted the voluntary surrender of the certificate of qualification and license to practice medicine in Alabama of **Michael Roy Sharpe, MD**, license number MD.6499, Albertville, AL. Dr. Sharpe is no longer authorized to practice medicine in Alabama.

Termination of P. A. Registration

When a P. A.'s employment is terminated, Board rules require both the P. A. and the supervising physician to inform the Board in writing of the effective date of termination of employment and the reasons for the termination. Failure to notify the Board of termination may be considered by the Board as a rule violation for the purpose of approval of future applications for registration.



Alabama State Board of Medical Examiners

Newsletter and Report

Alabama Board of Medical Examiners
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***Look inside
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Examiners that pertains to your
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All current licensees receive the *Board of Medical Examiners Newsletter and Report* at their address of record at no charge. Licensees may also choose to receive the newsletter by e-mail. Non-licensee subscriptions to the newsletter are by e-mail only.

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Change of Address

Alabama law requires that every licensed physician notify the Board of Medical Examiners in writing within **15 days** of a change of the physician's practice location address and/or mailing address.